

Planning for Pre-Referral Support, Screening and Referral Services in Preschool

The Abbott decision provides an historic opportunity to alleviate the educational disadvantages related to poverty for all children, including children with challenges due to a physical, learning or behavioral disability. Through Abbott's requirement for universal access to preschool, there are far greater opportunities for children to be educated in an inclusive setting with their peers and to have access to all the resources necessary to address their individualized needs. Abbott districts should lead the way in implementing a visionary approach to preschool. The goal is to provide each child the opportunity to access the preschool learning environment with the individualized supports needed for the child to succeed.

Pre-Referral and Support

When a child demonstrates learning or behavioral difficulties, it is up to the classroom teacher to closely observe and document the child's behavior. In order to support the child who is having difficulties, the teacher will attempt to adapt the activities and environment to meet the child's distinct learning or behavioral needs. The teacher will also enlist the help of the child's parents as they are the primary source of information concerning the child. Another resource is the classroom master teacher who works in conjunction with the classroom teacher to provide curriculum modifications to meet the child's needs and to facilitate full participation in the preschool classroom. School based social workers and family workers can help with additional family and community outreach to support the child's needs.

As more preschoolers enroll in early childhood programs, educators report an increase in challenging behaviors exhibited by children. The presence of challenging behaviors may or may not indicate that a child is deemed eligible to receive special education services. The preschool intervention and referral team (PIRT) should help school district preschool staff modify children's challenging behaviors (i.e., physical, social, language, emotional) that block successful participation in a general preschool classroom through development and implementation of intervention plans. Intervention plans will address a variety of behaviors (i.e., a child who hits, a child who doesn't have any friends, a child with separation anxiety from the caregiver, a child who stutters, a child unable to learn new concepts, a child who cannot eat independently with

utensils, a child who does not speak).

Abbott preschool programs receive funding for a four member PIRT for every 750 preschool students. In Abbott school districts with less than 750 preschool children, one team is allocated for every 750 children in preschool through grade three. In this case, the school district's preschool budget funds the preschool proportion of the team.

- The primary role of the PIRT is to provide support and suggested interventions to teachers so that all children can succeed within the general education classroom.
- Collectively, PIRT members should have a strong background and knowledge in early childhood education, child development, the district chosen curriculum, and the four levels of the Positive Behavior Support (PBS) pyramid.
- The team may include any combination of the following: teachers, behavior specialists, psychologists, learning disabilities teacher-consultants, school social workers, speech and language pathologist or other specialists and is supervised by the school district preschool administrator.

Preschool Intervention and Referral Team Responsibilities/Process

- Support classroom teachers in order to provide strategies for children who are exhibiting difficulty in the classroom as indicated through the screening process or the observation of the classroom teacher and master teacher.
- Provide support including written strategies for classroom staff, modeling strategies in the classroom when appropriate, providing professional development and providing consultation to classroom staff, parents, administrators and master teachers.
- Provide ongoing professional development based upon PBS pyramid for district staff (i.e., administrators, teacher assistants, master teachers, teachers).
- Coordinate data from ESI-R screenings and follow through with children scoring re-screen and refer.
- Facilitate transition of all PIRT case files to other programs as necessary (i.e., Kindergarten, CST).
- Establish PIRT assistance protocol including Request For Assistance (RFA) form.

- Once receiving an RFA establish and manage a case file for each child.
- Consult with necessary professionals as applicable (i.e., classroom teacher, master teacher, administrators, social workers, family workers, parents).
- Create and implement a PIRT intervention plan for which each child a RFA is received.
- Conduct classroom visits as necessary to implement the PIRT intervention plan. These visits may include observations, providing feedback regarding the child or support plan, providing recommendations and modeling strategies when appropriate.
- Modify and adapt the PIRT intervention plan as necessary throughout the year.
- Evaluate the progress of the student and if necessary, facilitate a written referral to the school district Child Study Team as set forth in N.J.A.C. 6A:14.
- For children with persistent behavior-related difficulties develop and implement the PIRT behavior support plan. The PIRT's role in the behavior support plan is as follows:
 - a) Document several previously attempted PIRT intervention plans with modifications and follow through attempts.
 - b) Oversee a team (as outlined through PBS) and conduct the behavior support plan process.
 - c) Coordinate and conduct any necessary follow through related to the developed PIRT behavior support plan.

Screening

According to findings of the National Research Council (2002), locally driven, universal screening of young children is associated with better outcomes for all children and will help identify those most at risk for achievement and behavior problems. It is required that all three- and four-year-old children in Abbott school districts are administered a screening device by the classroom teacher upon entry to the program, such as the Early Screening Inventory-Revised (ESI-R: Meisels et al., 1997). This information should never be used to determine or deny placement. Rather, it is used to determine if a child is within one of the three screening categories: refer, re-screen, ok. Parents must be notified before and after all screenings have taken place.

Referral to the Child Study Team Process

When initial screening indicates that a child should be referred, or a parent, teacher, or PIRT member has a concern about a child's development and suspects a potential disability, he/she should follow these steps:

- Submit a written request to the school district's child study team for a special education evaluation. The written request (referral) must be submitted to the appropriate school official. This may be the principal at the neighborhood school, the director of the preschool program where the child attends, the director of special education or the child study team coordinator of the school district.
- The parent, preschool teacher, and the child study team (school psychologist, school social worker, learning disabilities teacher-consultant, speech and language pathologist) will meet within twenty days (excluding school holidays) to determine the need for evaluation.
- After the completion of the evaluation and a determination of eligibility, an individualized education program (IEP) is developed for the child by an IEP team consisting of a parent, a child study member, a school district representative, the case manager, and general education teacher or provider. The team will determine modifications, interventions, support and supplementary services necessary to support the child. The early childhood teacher assists with the determination of the child's needs. The preschool general education environment and routines should always be considered when determining the goals and areas needing to be addressed.
- To the maximum extent appropriate, preschool children eligible for special education will receive their preschool program with their peers without disabilities. In the event that there is a disagreement, the school district has an obligation to inform parents of due process rights in referral.
- Referrals throughout the year are made to the child study team from the birth to three early intervention (EI) system. Children exit the EI system at age three and if they are determined eligible as a preschool child with a disability are to begin preschool with an individualized education program (IEP) at age three.

It is not required that a child be seen by the PIRT before being referred to the child study team. A preschool teacher or administrator familiar with the school district's preschool programs should be available at all meetings when determining special education services. Classroom teachers should always be involved in the planning process.