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## CHAPTER 10

# Addressing Parent and Staff Concerns

*Janet Bates and Janet Keating*

In this chapter you will find information on the following topics:

- Common parental questions when a preschool child is served in an inclusive setting
- Common teacher/staff questions when including a new child with disabilities

### Frequently Asked Questions

**1. When working on a consultative basis, don't you miss having your own classroom?**

This is one of the most frequently asked questions and is of great concern to many early childhood special educators. Our response to this question is yes, many teachers may find it difficult to no longer have their "own" classroom. However, our own personal experience is that as a teacher you no longer have one classroom to teach, but you now have many classrooms and lots of children with whom to work and enjoy!

In order to have a truly effective team, it is extremely important that the ECSE teacher and related service providers develop good relationships with the community preschool staff as well as with the other children in the classrooms. As one spends more time in the various programs, the children and staff begin to recognize you as a part of the classroom. It may take a while longer than if it were your own classroom of children four or five days a week, but it can and does happen.

## **2. How do you deal with disagreements among team members?**

Disagreements should be dealt with as they occur. There are a variety of ways in which conflicts can be handled. One solution is to have the persons in disagreement meet on an individual basis if that is appropriate. If it is a problem which requires the input of several other team members, then during the child's team meeting the issue should be put on the agenda for group discussion. It sometimes helps to "brainstorm" or look at all of the issues and any possible solutions and to rate and prioritize those solutions: what are the most feasible solutions and what solution should we try first? (An example of a format in which to use when dealing with disagreements or conflict is included in chapter 10 appendix.)

Regardless of how the team chooses to deal with disagreements, it is important to remember that the purpose of the team is to work together for the benefit of the child. The best interest of the child must come first and foremost! It is sometimes necessary as a team member to make compromises and to accept solutions that might not have been our first choice (and, yes, some team members will be better than others in accepting compromise). While true consensus of the team is desirable, parent priorities should guide the decision-making process especially if there are several opinions. Whatever the situation, it is important to keep in mind that developing an effective team is an ongoing process.

## **3. Isn't it difficult for the community preschool staff when the various service providers are coming in and out of the classroom?**

There are likely to be times when the various adults coming in and out of a classroom seem overwhelming. If the community preschool staff are feeling there is a problem with the times and/or scheduling of the various service providers working with a student in their classroom, it is crucial that these issues be discussed either one-on-one with the service provider or at the child's team meeting. The situa-

tion might involve a conflict with the time of day service providers are coming into the classroom, or possibly too many service providers are attempting work with the child on the same day.

We suggest at the beginning of the school year the service providers and classroom staff look at their schedules together so that suitable times and days for all involved parties can be agreed upon from the start (see chapter 10 appendix for schedule form samples). For example, the physical therapist may prefer to work with the child during outside time and the speech therapist may prefer small group time. If the occupational therapist comes on Tuesday during center activities, then possibly the ECSE teacher can be in the classroom on Wednesdays. Whatever the issues are, it is very important to discuss concerns and problems openly and honestly (and don't forget to mention the great things that are happening in the classroom as well!! )

#### **4. How does one determine which children will be served within a community preschool?**

During the IFSP/IEP meeting, the parents/caregivers should be provided with a variety of options for the delivery of special services for which a child demonstrates a need. For example, options might include: 1) placement in a community preschool in which the school district has placement spaces for children with special needs (if available\*); 2) delivery of services in a community preschool in which the child already attends; 3) offering to deliver services in a community preschool setting if the parent/caregiver chooses to enroll their child in a program; and 4) any other options which the school district has available for preschoolers with special needs (special education classroom, home-based services, etc.).

It is the family's choice where the child will receive services. The important thing to remember when considering the provision of services within a community

preschool setting is that this should be a team decision. Members of the child's team should include not only the child's parents or caregivers, but all the related service providers, and the community preschool staff. There is no particular "formula" or secret to determining how a child with disabilities will be served within a community preschool setting. Rather, it is our belief that any child, regardless of type or level of disability, can potentially be served very well in a regular early childhood preschool setting. The team will analyze each child's situation and determine the logistics of providing services within the inclusive preschool setting.

Our experience has been that some parents feel quite strongly about making sure their child is included in a community preschool program and other parents are much more hesitant about the move from the special education classroom. It is important that we actively advocate for providing special services within community preschool settings. By showing our support and enthusiasm for inclusion, we can open doors for children with disabilities who might not otherwise have had the opportunity to attend a typical preschool program.

**5. Do you find using the MAPS format for writing IFSP's/IEP's to be a time consuming process? (see Chapter 7 for description of MAPS)**

Depending upon the needs of the child and the issues needing to be addressed, use of the "MAPS" IFSP/IEP process may take more than one session to complete. Once again, it depends upon the situation. We have found this process to

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\*If your special services program has placement spaces with community preschools or is considering moving toward that model, you may want to consider developing an enrollment or consideration list for families who are interested in inclusion for their child. We have found it helpful to have the parents complete a form (parent's name, address, home and work phone numbers, child's name, date of birth, etc.) which indicates their interest in an inclusive preschool placement. This form might also include the parent's preference for time of day (a.m. or p.m.), and the date the parents would like their child to begin attendance (see example in chapter 10 appendix).

be particularly useful during times of transition (from infant/toddler services to pre-school services and from the preschool to the elementary setting). Use of the MAPS process familiarizes receiving staff members with the child's history (educational, health, etc.) as well as the child's strengths and needs, and the team member's dreams and concerns for the child. The format of the MAPS meeting which begins with the parents relating the child's history and answering each question first emphasizes the role of the parent as the main stakeholder in the child's life and supports the field's shift to family-centered services. The information gathered from the questions discussed at the MAPS meeting will provide the team with the necessary input for developing the IEP goals and objectives.

We have also found it useful to do a "modified MAPS," or to simply reduce the number of questions asked at the IFSP/IEP meeting. This is especially effective when the team members are already familiar with the child. For example, the questions may simply address the child's strengths and needs. Using large tablet paper or chart paper, the facilitator writes the comments of the various team members as they are stated. From the strengths and needs, the goal and objectives are formulated and transferred to the formal format which the school district requires you to use. The process does not have to be cumbersome and lengthy. The whole idea behind the process is to receive input from all of the team members, especially the parents or caregivers. We feel parents (and possibly some team members) are less likely to have input in the IFSP/IEP process if the document is pre-written and presented at the meeting. By generating the child's strengths, needs, goals and objectives together as a team, the IFSP/IEP document is more likely to reflect the skills the child currently has and the skills the child needs to develop within the educational setting.

#### **6. Will my child have his/her own paraprofessional in the inclusive setting?**

There are many factors to consider when asking this question. The first thing

is to identify the child's individual needs and how those needs can be met. For example, ways to provide additional support includes peer assistance, use of existing staff, paraprofessional support at specific times during the classroom schedule, or full individual support by a paraprofessional. Sometimes it is possible for a paraprofessional to work with more than one student at a time. It is important to remember that the paraprofessional provides support only as needed and fosters participation and independence rather than dependence.

**7. Will my child receive the same therapy services at the same level of intensity in the inclusive preschool ?**

Just as early childhood special education teachers have experienced role changes, related service providers (such as occupational therapists, speech language pathologists, physical therapists, etc.) serving children in inclusive settings are also experiencing role changes. One positive outcome has been increased investment and involvement in the classroom by the related service providers. Many times related service providers plan and participate in small groups, whole class activities, center time activities and during other classroom activities (however, removing the child from the classroom and into another area for therapy services may be appropriate at times). Through demonstration and guidance by related service personnel, other classroom staff are shown techniques such as range of motion, language strategies, positioning, dressing skills, gross motor activities etc. that can be incorporated into the classroom's daily schedule. Because there are more opportunities to practice specific skills at functional and meaningful times of the day, skills can easily be generalized to a variety of situations and settings. Thus the intensity of therapeutic benefits actually is increased. While individual therapy contact time of a related service may be decreased or be of a different configuration, the child's needs can be met. In fact, when done appropriately, the benefits of the inclusive setting are nu-

merous and offset the changes in other services.

#### **8. How should I introduce a child with disabilities to my class?**

From our experiences, we have found it best to introduce the student with disabilities to the class in the same manner as with any other new student. This might be at opening circle or individually to the students as they come into class. Some classroom teachers have "Student of the Week" bulletin boards in which children share via photographs their likes, family members and important events in their lives. This is a good way for the children to get to know their new friend. Another strategy for introducing the child into the classroom is to pair that child with a child who knows the routine and the classroom well, so that they both start to know each other. The children will have many questions about the new child. Provide them with simple, brief and accurate answers. The children will also be curious about any equipment or adaptive devices the new child uses. Provide supervised opportunities for the children to explore and use the equipment. It is important to teach the children to ask the child and caregivers before they touch the equipment and to respect the child's equipment.

#### **9. Does the use of peer buddies separate the student with disabilities as being different?**

The first component to the question infers the need for everyone to be the same. A child with disabilities is more similar to other children in the classroom than different. Similarities and differences in all the children in the classroom can and should be explored. The other component deals with peer buddies. Some teachers use pairing of students as part of their classroom routines so that the students can learn from each other. In our experiences, we have also used peer buddies to assist in developing friendships and facilitating peer interactions. Many times the

children in the classroom want to assist their friend. By either rotating through the class roster or having the child select their buddy for the day eliminates a daily question over who gets to assist.

#### **10. How should we prepare the community preschool staff for having a child with disabilities attend their program?**

As previously mentioned in this manual, collaboration is the key for successful programs and inclusive experiences. The community preschool should define their level of involvement, roles and responsibilities prior to the enrollment of a student with disabilities. This needs to be done in collaboration with the school district and mutually agreed upon by both agencies. From there, inservice options can be discussed. The staff can determine what topics should be covered and in what order. Topics of inservice interest may include behavior management strategies, strategies for including children with disabilities, information on specific medical conditions, and general inclusion philosophy. Other strategies for providing staff information include articles and other written materials, videotapes on the topic, and on-site demonstration and instruction. On-site instruction may be viewed as the best alternative for some sites due to limited financial resources to pay for inservice time outside of the school day or to provide substitutes. It has been our experience that providing ongoing support and continued on-site demonstrations have been highly valued. Another helpful strategy is to have the child and family visit the preschool prior to actually starting school. This visit assists in reducing staff fears and concerns, and helps to reassure the child and family.

Another concern frequently expressed is the number of staff that enters the classroom. Some strategies that have reduced those concerns about the number of adults include; selecting times that are least disruptive, explaining the need of each person working in the classroom, introducing all the related service staff, and mak-

ing sure the related service staff spend some time at planned meetings with the community preschool staff.

### **11. What is the staff development process for paraprofessionals (paraeducators)?**

The paraprofessional's level of experience when entering an inclusion program influences the training program. For new paraprofessionals the school district provides basic information training on the policies and procedures of the school district, new employee orientation and information on the role of the paraprofessional. While the inclusion special education teacher is responsible to the school district for supervising the paraprofessional, it is critical that the classroom teacher, special education teacher and related service staff collaborate and share supervision and training responsibilities.

The paraprofessional staff inservice training is similar to that of community center staff. Paraprofessionals should be individual in all joint inservice training activities. Different topics are presented through inservices, informational videotapes and handouts. Those topics include inclusion philosophy, basic instructional procedures, first aid and infection control, the community program's policies and procedures, individual educational programs, strategies for implementing and monitoring objectives, and techniques for full inclusion of a child. Another important area is child specific skills such as positioning and handling techniques, feeding skills training, behavior management strategies, range of motion, and augmentative communication systems. Videotaping of the paraprofessional while working with the child is useful when the focus is on training a specific skill, obtaining information about the child's responses, and providing feedback regarding paraprofessional skill development. Ongoing opportunities for both general and child specific training should be provided.