Guideline for Preschool Program Operation

I. Referral Process

**Early Start Referrals:**

An LEA representative is invited to participate in the Transition Individual Family Service Plan (IFSP) when the child is approximately 30-36 months of age. The team identifies what additional information and assessment is needed, who will do it, and, when it will take place.

The LEA representative attends a monthly meeting where the North Bay Regional Center (NBRC) presents information about children who may be referred. Early Start participants in these meetings may include: ELI, Easter Seals, Early Start providers.

Referral packets are given to the LEA representative. The packets include: referral form, assessments, health/developmental history, parent release of information, etc.

**Other Referral Sources:** Pediatricians, Community Preschools, Head Start, Parents, other agencies or service providers.

The LEA representative receives the referral directly; gathers information about student’s needs; and determines what next steps will be.

Refer to District for screening
Gather assessment information from parent or agencies working with the child
Begin intake process: identify case carrier, set up visits, schedule IEP

II. Intake Process

The intake activities take place within the legal timelines.

LEA identifies case manager & schedules/ notifies of IEP.

Assessment includes both formal and informal, standardized and non-standard measures that are appropriate for young children.

Parent input is sought and honored.

The family’s culture is respected and taken into consideration in both the assessment process and reporting results.

A trans disciplinary team approach is used (i.e.: input from specialists including school psychologists, speech/language therapists, OT, PT, preschool teachers etc.).
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The child is assessed in the environment in which he or she is most comfortable. The team will observe and assess in a variety of environments, such as community preschool or daycare, or home. The child’s primary language is used in the assessment whenever possible.

The assessment team works closely with the referring agency and with other involved agencies such as Matrix, ELI, CCS, NBRC.

Eligibility for services is determined based on established criteria outlined in the SELPA policies.

Information about the referral process and available services is provided in an ongoing way to parents of children who are being referred to the program.

Parents/care providers will be given a packet of information including:

- health & developmental questionnaire
- description of intake process
- parent input form, emergency forms, immunization form
- home language survey
- photo/video release
- consent for release of information
- parent rights
- calendar
- information regarding allergic reaction, emergency procedures, communicable disease

III. Assessment

Assessment will include formal and informal strategies (observation, checklists, parent interviews, etc.) Teachers and specialists will utilize developmentally appropriate, evidenced-based tools. Students are assessed in all areas of suspected need.

IV. Instructional Program

The Desired Results Developmental Profile (DRDP) will be utilized to gain baseline information and monitor progress in all areas of development/instruction.

Curriculum will be aligned with the state-adopted Preschool Learning Foundations for Social-Emotional Development, Language and Literacy, English Language Development, and Mathematics.
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Curriculum will address the students’ individual instructional goals and objectives as written in their Individual Education Plans (IEP). Monitoring of goals and objectives will be ongoing. Parents will be provided with Progress Reports at least 3 times per school year.

Services for students with autism spectrum disorder (ASD) will follow the Best Practices Guidelines for Screening, Diagnosis, Assessment and Intervention; utilize evidence-based program; and will be individually developed based on student needs.

V. Small-Group Preschool Program

The Small-Group Preschool programs provide small group instruction for preschoolers with mild to moderate delays in speech, language, readiness or learning skills, which may affect school performance without early intervention. Classes utilize play-based, developmentally appropriate instruction and guided practice techniques to address the individual needs of the student. Classes are taught by credentialed speech/language specialists. A qualified speech aide or speech assistant may conduct group activities under the direction of the speech/language specialist.

Parent participation in speech and language groups is encouraged.

A “homework” component is included to provide practice exercises in the home and reinforce the parents’ role in the child’s progress.

Opportunities for parents to participate in family education activities, plus printed resources in English and Spanish, are made available.

All curriculum and activities are age-appropriate and take into consideration the preschool child’s need to play, explore, and move.

Specialized instructional methodology, such as oral motor programs, is used whenever needed. Evaluation and consultation from specialists such as OT, APE, psychologist, and nurse are available as needed.

The classroom environment is reflective of the young child’s interests, welcoming to the child and parent, and has furniture and facilities that are appropriate in size.

Goals and objectives are functional and support acquisition of developmentally appropriate communication skills and transition to the next learning environment.

Progress reports are provided at least two times per year in addition to IEP annual reviews.

Ongoing in-service and training opportunities exist for staff.

Collaboration with community preschool programs such as Head Start.
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Consultation is available from other professionals such as school psychologists or nurses or occupational therapists.

Multi-cultural needs are addressed and an anti-bias approach is used in the classroom and modeled by all staff.

Teaching staff will be trained in and will implement positive behavior management strategies, such as reward systems, preferred activities, environmental modifications, applied behavioral analysis, effective communication systems, sensory regulation strategies, etc.

VI. Preschool Special Day Class

*The Special Day Class provides a program and an environment where children can develop through active exploration, socialization, communication and by “learning how to learn.” Emphasis is placed on engaging children in play-based interventions that enhance sensory, social, pre-academic, motor, and communication development.*

*Students generally attend classes four days a week for up to four hours per day. The daily schedule includes reading, language activities, art and music, outdoor play, motor skills development, toilet training and other self-care activities, snack time, and more. Classes are staffed by credentialed special education teachers, trained instructional assistants, and a team of support personnel that may include speech/language therapists, school nurses, psychologists, counselors, occupational and physical therapists, education specialists.*

A continuum of instructional models and methodologies are employed to fit the needs of the students being served.

Most classes are not categorical, but to the extent practical, reflect groupings that are instructionally coherent.

The least restrictive environment is addressed by providing and/or supporting opportunities for integration with typically developing peers.

A strong parent support component, which includes parent instruction, printed resources, and opportunities for parents to observe instruction and receive frequent information from staff.

Home visits are scheduled on a regular basis to share information, review progress, work with families to address issues or develop goals, model teaching strategies, provide support and education to parents.

Curriculum is developmentally appropriate and reflects best practices for this age group, including learning opportunities through play, movement, exploration, music, large and small group activities, and outdoor experiences.
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Mental health needs of the children are addressed with a variety of approaches that includes: teacher training, family education, collaboration with the family’s support providers, referral and resource information.

Multi-cultural needs are addressed and an anti-bias approach is used in the classroom and modeled by all staff.

Wherever possible and appropriate, instructional support is provided in the child’s primary language. In most programs, instruction and parent education materials will be available in Spanish.

The classroom environment is appropriate for young children. It is reflective of their interests, welcoming to the children and parents, and has equipment and materials that are appropriate for this age level.

Teaching staff will be trained in and will implement positive behavior management strategies, such as reward systems, preferred activities, environmental modifications, applied behavioral analysis, effective communication systems, etc.

Goals and objectives are functional, support acquisition of developmentally appropriate skills, focused on students’ individual and objectives and consider the steps for transition to the next learning environment.

Progress reports are provided at least two times per year in addition to IEP annual reviews.

Ongoing in-service and training opportunities exist for staff (including paraprofessionals), as well as opportunities to observe colleagues’ instruction and share information and ideas.

Collaboration with regular preschool programs such as Head Start or community preschools may include visits to that setting to model techniques and support the student.

Consultation is available from other professionals such as school psychologists or nurses.

A collaborative and trans disciplinary approach with support staff is used in the classroom with little “pull out” and an emphasis on instruction that takes place within the child’s normal activities (i.e., snack time, play time, etc.).

Opportunities for preschool inclusion or mainstreaming are available. The staff to student ratio provides a safe and instructionally rich environment.

A Student Study Team model, using a multi-disciplinary team approach which includes the parent, is used to problem solve and foster collaboration.
Bus Transportation is provided to those students who require it as part of their special education program.

VII.

Related Services

Related Services and instructional supports such as speech/language therapy, OT, APE, nursing, psychologist, and counseling etc. are provided as determined by IEP team, based on assessment, identified student needs, instructional goals, transition objectives.

Delivery models may include: collaboration with specialists, small group and/or individual instruction in a variety of settings such as special education classes, community settings and the home.

Types of services may include:

- Speech and Language
- OT
- PT
- APE
- Behavioral supports
- Nursing
- DHH/ VI
- Assistive Technology
- Mental Health Services

A certificated administrator, with knowledge of the needs of preschool students provides support to the classroom and represents the district at IEP meetings.

Family Support

Child Find activities include outreach to pediatricians, Regional Center, letters to local agencies providing program and referral information, participation in Infant/Preschool activities such as Preschool Director Meetings, First Five, and local clinic events.

Preschool program staff participate are involved in intake and transition activities i.e.: Individual Family Service Plan (IFSP) and Local Education Agency (LEA) meetings.

Home visits, parent education and training activities are provided on a regular basis. Information is shared regarding parent support groups.

Referral information regarding related services and community activities is offered as appropriate to families.
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Teaching staff has awareness of culturally and linguistically appropriate communication.

VIII.

Parent participation in school programs is encouraged and supported.

IX. Logistics/Program Operation

A directory of preschool services/operators and contact information is available in the Districts and the SELPA for families and community.

Classrooms follow the District calendar for the site where they are located.

Instructional hours for SDC classrooms are consistent throughout programs; generally 3 hours/day for 3 yr olds, 4 hours/day for 4 yr olds, as determined by the IEP team. Students may have hours that are “customized” based on IEP needs. Students in co-enrolled or in community programs may have different hours.

Class size averages between 9-12 students, with one credentialed teacher and one or two instructional assistants.

Extended school year may range from 15 to 25 days.

X. Staff Development

Specialized training is provided in early education/intervention topics; is pertinent to providing services for preschool aged; includes mandatory safety training (CPR, First Aid), and training in areas recommended by Best Practice Guidelines and student’s IEP goals.

XII. Interagency Collaboration

The Preschool staff will collaborate with Early Intervention programs such as North Bay Regional Center (NBRC), Easter Seals, Early Learning Institute, First Five, California Parenting Institute, California Children’s Services, and community preschools.

Collaborative activities may include monthly LEA meetings, IFSPs, joint trainings, and joint program development for individual students.

MOUs with community agencies will be developed as appropriate to foster communication and collaborative service provision.

XIII. Transitions
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Teaching staff, specialists and administrators will work together with the student’s family to ensure a smooth transition from one program to another. Discussion will focus on placements that will be a best match for the student’s learning needs.

Updated assessments and progress information will be provided to assist in developing next steps for the student and determining appropriate placement options (which may include general education, special day class, resource program, full inclusion, or a combination of these).

The sending program staff will meet with staff representing the new setting to review student information, develop the IEP, and share information about the next placement.

The special education team will collaborate with the student’s school of residence or attendance to provide information about Kindergarten registration, orientations, etc.

Preschool providers will develop plans for instruction in the LRE and opportunities for inclusion with non-disabled peers.

XIV. Program Monitoring/Review

Program operators will conduct annual self-reviews to ensure that the standards set forth in this document are being met.

Peer reviews will be scheduled periodically for purposes of monitoring consistency between programs and to share information and ideas.

The Preschool Operators Committee will meet quarterly to review program standards, discuss common issues, engage in problem solving and gather information to share with teaching staff and administrators.