



Idaho Standards for Infants, Toddlers, Children, and Youth Who Are Blind or Visually Impaired

This document contains standards for parents, teachers, administrators, governing boards, support personnel, other interagency personnel, and interested community representatives to use in identifying, assessing, planning, and providing appropriate educational services to all children/students who are blind or visually impaired in Idaho. It is also intended to assist in monitoring programs for these students. Because educational services for these students are governed by mandates established in federal and state laws and regulations, the standards in this document were developed to be consistent with these mandates and articulate how the mandates should be implemented.



Idaho Program Standards

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Preface

This document contains recommended standards for quality education programs serving children/students who are blind or visually impaired, including those with additional disabilities and deafblindness. It is designed for use by parents, family members, teachers, administrators, governing boards, support staff and other interagency personnel, and community stakeholders. These standards provide guidance for identifying, referring, assessing, planning, providing, and monitoring education programs that will result in higher academic achievement while supporting the social and emotional development of children/students who are blind or visually impaired.

The Blind Educational Program Standards were developed to be consistent with federal and state laws and regulations that govern educational services for children/students (ages birth – 21) who are blind or visually impaired, including those with additional disabilities and deafblindness, in Idaho.

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The Standards at a Glance

Section One: Identification and Referral

Outcome: Children with vision loss are identified and referred as early as possible to enable the best possible educational, social, emotional, and achievement outcomes.

Identification and Referral

Standard 1: Procedures exist for locating and referring infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness who may require early intervention and/or special education.

Resources

Standard 2: An unbiased, comprehensive resource information packet will be given to parents of recently identified children who are blind or visually impaired regardless of the child's age or other disabilities.

Collaboration

Standard 3: Programs for infants, toddlers, children, and youth, including those with additional disabilities and deafblindness, establish collaborative relationships with health care providers, social services, school districts, and child care programs in order to ensure that infants, toddlers, preschoolers, and school-age children with identified vision loss receive appropriate referral within two (2) days and are contacted by the appropriate agency within fourteen (14) calendar days.

Vision Screening

Standard 4: Qualified personnel conduct vision screenings to identify children who may have a vision loss.

Assessment Referral

Standard 5: Children who fail vision screenings receive appropriate assessment(s).

Additional Screening

Standard 6: Infants, toddlers, children, and youth, including those with additional disabilities and deafblindness, will be screened for hearing and/or additional impairment(s).

Section Two: Assessment of Child's/Student's Needs

Outcome: An individualized intervention or education plan is developed based on assessment that yields valid and reliable information about the child.

Persons Conducting the Assessment

Standard 7: Each assessment of infants, toddlers, children, and youth, including those with additional disabilities and deafblindness, birth – 21, is conducted by qualified personnel who understand the unique nature of vision loss and who are specifically trained to conduct these assessments.

Domains to be Assessed

Standard 8: Qualified professionals assess children/students and collaborate with parents and other professionals on all relevant areas of functioning to provide a comprehensive profile of the child/student with vision loss.

Administration of Assessments

Standard 9: Assessments are provided and administered using the student's primary language and in the appropriate medium/media by professionals proficient in that approach.

Specialized Services, Materials, and Equipment

Standard 10: The assessment report identifies the unique learning needs of the infant, toddler, child, or youth who is blind or visually impaired, including those with additional disabilities and deafblindness, related to the vision loss including needs for specialized services, materials and equipment, and accommodations in the unique developmental and learning environment.

Assessment in the State and District Core Curriculum

Standard 11: Infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, will be assessed using early intervention, state and district core curriculum that are aligned with established state and district standards.

Assessment in the Expanded Core Curriculum

Standard 12: Infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, receive assessment in the expanded core curriculum by qualified personnel. A triennial comprehensive functional vision evaluation and learning media assessment will be conducted by qualified personnel.

Assessment Team

Standard 13: Infants, toddlers, children, and youth, including those with additional disabilities and deafblindness, are referred to a specialized assessment team approved by the State Educational Program for the Blind and Visually Impaired and developed by the local school district or provided by the state program when appropriate.

Eligibility Criteria

Standard 14: Eligibility criteria will be defined by the State of Idaho.

Service/Placement Considerations

Standard 15: A continuum of service/placement options is reviewed with parents and placement is determined by the IFSP/IEP team (including parents) based on valid and reliable assessment data and other information that identifies individual needs across developmental, academic, and social domains.

Appropriate Placement

Standard 16: Determination of appropriate early intervention or educational setting must be based on the identified needs of infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, throughout their developmental and educational experiences. Any appropriate placement option recommended by the IFSP/IEP team must be made available to the infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness.

Section Three: State Program Design

Outcome: Infants, toddlers, children, and youth, including those with additional disabilities and deafblindness share the same learning opportunities as their sighted peers and benefit from programs that support and provide equal opportunities.

Policy on Literacy and Communication

Standard 17: The State Educational Program for the Blind and Visually Impaired has a written policy on the central role of literacy and communication as it relates to the cognitive, academic, social, and emotional development of infants, toddlers, children, and youth, including those with additional disabilities and deafblindness.

Students with Additional Disabilities

Standard 18: Provision is made for appropriate services for infants, toddlers, children, and youth, including those with additional disabilities and deafblindness.

State Educational Program for the Blind and Visually Impaired

Standard 19: The State Educational Program for the Blind and Visually Impaired consists of the Idaho State Board of Education and the program administration advised and assisted by an advisory council appointed by the Idaho State Board of Education.

State Oversight

Standard 20: The State Educational Program for the Blind and Visually Impaired adopts policies that are consistent with the guidelines put forth in this document, delegates implementation of these policies to the administrative staff, and monitors results. These policies support the expected learning outcomes for children/students. These policies are initially reviewed annually for the first five (5) years and at least every five (5) years thereafter.

Continuum of Options

Standard 21: The State Educational Program for the Blind and Visually Impaired provides access to a full continuum of placement, program, service, and literacy options. The agency collaborates with the early intervention and local educational agencies, institutes of higher education, and other agencies to ensure provision of appropriate services for infants, toddlers, children, and youth, including those with additional disabilities and deafblindness.

Instructional Delivery System

Standard 22: The instructional delivery system supports infants, toddlers, children and youth, including those with additional disabilities and deafblindness, learning in a developmentally appropriate context and focuses on the unique learning needs and literacy medium/media in order to support success.

Program Administrator

Standard 23: The Program Administrator is an experienced educator of students who are blind or visually impaired, with skills to ensure that infants, toddlers, children and youth, who are blind or visually impaired, including those with additional disabilities and deafblindness, are provided with appropriate instruction and designated services. The Program Administrator has the skills necessary for facilitating participation of staff, parents, and the blind or visually impaired community in program development related to a continuum of services.

Staff Qualifications

Standard 24: Infants, toddlers, children and youth, who are blind or visually impaired, including those with additional disabilities and deafblindness, birth-21, are instructed by early intervention providers, teachers, and/or specialists who are specifically trained, certified, and/or licensed to teach academic, expanded core curriculum, communication, social, emotional, assistive technology, and transition skills to these individuals.

Paraprofessionals

Standard 25: State Educational Program for the Blind and Visually Impaired and local educational agencies will work collaboratively to train and support paraprofessionals who are providing services to infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness.

Professional Preparation

Standard 26: The Idaho State Board of Education will work toward ensuring that programs are provided through state public post-secondary institutions to prepare specifically trained, certified, and/or licensed early intervention providers, teachers, paraprofessionals, and related service professionals in the continuum of educational options for infants, toddlers, children and youth, who are blind or visually impaired, including those with additional disabilities and deafblindness.

Caseload Management

Standard 27: Class size and/or caseloads of staff support the provision of specialized instruction and services based on the unique educational needs of infants, toddlers, children and youth, who are blind or visually impaired, including those with additional disabilities and deafblindness.

Staff Development

Standard 28: The State Educational Program for the Blind and Visually Impaired provides ongoing training and mentoring for all staff to enhance achievement of infants, toddlers, children and youth, who are blind or visually impaired, including those with additional disabilities and deafblindness. Teachers of the blind or visually impaired will ensure appropriate mentoring and professional development opportunities for teachers of the blind or visually impaired and certified orientation and mobility specialists.

Training for Education Personnel

Standard 29: The State Educational Program for the Blind and Visually Impaired provides training to education personnel serving its infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness regarding accommodations, modifications of the curriculum, and understanding the impact of vision loss on development and learning.

New and Existing Facilities

Standard 30: New facilities are designed and existing facilities are maintained to enhance the provision of instruction and services to meet the unique academic, expanded core curriculum, communication, social, emotional, assistive technology, and transition needs of infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness.

Safe School Environment

Standard 31: The school environment will be a safe and secure setting in which all accommodations can be met. The school environment includes the home, school, and community in which the education and related services are provided.

Program Assessment

Standard 32: The school leadership, program administrators, and staff regularly assess infant's, toddler's, children's, and youth's progress toward accomplishing the expected federal, state, and school-wide learning results, and report program wide progress to the rest of the school community, including parents, and related agencies and organizations.

Program Accountability

Standard 33: As part of the state monitoring process, the program administration conducts a comprehensive triennial assessment for the State Educational Program for the Blind and Visually Impaired using these standards for all areas of program quality, and provides written progress reports to parents, staff, the public, and interested parties.

Compliance

Standard 34: The State Board of Education will adopt an accountability system, including corrective action plans and sanctions for programs that are out of compliance.

Section Four: Curriculum, Expanded Core Curriculum, and Instruction

Outcome: Infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, are provided with equal access to educational opportunities that meet their individual developmental, academic, and social needs.

Curriculum and Instruction—Birth to Three

Standard 35: Curriculum and instruction for infants, toddlers, and preschoolers who are blind or visually impaired, including those with additional disabilities and deafblindness, are family focused and developmentally appropriate to ensure later academic, social, and vocational success.

Curriculum and Instruction—Three to Twenty One

Standard 36: School-aged children, who are blind or visually impaired, including those with additional disabilities and deafblindness, are provided with a challenging, coherent, and relevant core curriculum. An expanded core curriculum for students with visual impairments is necessary and should be provided to insure an equal opportunity for learning in general education. Infants, toddlers, children and youth who are blind or visually impaired, including those with additional disabilities, receive instruction by qualified personnel in the expanded core curriculum as appropriate in the home, school, and community.

State and District Core Curriculum Standards

Standard 37: Children and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, will be instructed using the state and district core curriculum that are aligned with established state and district standards. Infants and toddlers will be instructed using early intervention, developmentally appropriate curriculum specially designed for the blind or visually impaired.

Expanded Core Curriculum

Standard 38: In addition to state and district core standards, infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, will be provided with the expanded core curriculum for the blind or visually impaired coordinated among service providers, which contains well-defined and relevant instruction in the areas of need as identified on the IFSP/IEP.

Multidisciplinary Team

Standard 39: All persons identified on the IFSP/IEP who provide services, including parents, will form a multidisciplinary team that works collaboratively and flexibly to meet the individual needs of infants, toddlers, children, and youth, recognizing the roles and responsibilities of each team member.

Curricular and Extracurricular Activities

Standard 40: The State Educational Program for the Blind and Visually Impaired, in collaboration with early intervention programs and local educational agencies, seeks to provide equal access to all infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, in curricular and extracurricular activities, and designated and related services in the home, school, and community. Educators and early interventionists ensure that children/students receive appropriate opportunities to participate with peers who are blind or visually impaired as well as those who are sighted.

Natural Environment

Standard 41: The infant/toddler who is blind or visually impaired, including those with additional disabilities and deafblindness, is provided services in the child's natural environment(s) in accordance with the child's IFSP.

Focus on Authentic Peer Interactions

Standard 42: The infant, toddler, child, or youth who is blind or visually impaired, including those with additional disabilities and deafblindness, has authentic peer interactions and is able to participate in social and academic activities. Educators will teach the child/student social skills to facilitate independence, self-advocacy, and interaction with peers, through direct instruction, modeling, and peer coaching.

Student Achievement Standards

Standard 43: The State Educational Program for the Blind and Visually Impaired will facilitate the development of student achievement standards and expanded core curriculum standards that will be reviewed and revised at least every five (5) years.

Equal Access

Standard 44: Educators must provide equal access to materials and resources to ensure equal education opportunities for infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, in a timely manner.

Transitions

Standard 45: Transitions occur periodically throughout a blind or visually impaired infant's, toddler's, child's, or youth's education: early intervention to school services, preschool to elementary school, elementary school to middle school/high school, and high school to vocational, independent living, and/or post-secondary education. Planning and implementing support services must occur and be documented in a timely manner prior to each transition.

Assistive Technology

Standards 46: Early interventionists and educators must ensure the availability and use of assistive technology for infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness. Trained and qualified personnel will provide training and support to personnel and children/students.

Section Five: Parent Training and Family and Community Involvement

Outcome: Family and community members are active, informed, and involved participants in the education process of children and youth who are blind or visually impaired.

Parent Training and Support

Standard 47: The State Educational Program for the Blind and Visually Impaired, local educational agencies, and/or other agencies provide orientation and a continuum of training opportunities for parents to acquire the necessary skills/information to support the implementation of their infant's, toddler's, child's, or youth's developmental, educational, vocational, and social achievement.

Community Involvement

Standard 48: The State Educational Program for the Blind and Visually Impaired has an ongoing process for involving parents and the blind or visually impaired community in program development and encourages strong collaboration between school staff, parents, members of the blind or visually impaired community, and the business community. The program leadership employs a wide range of strategies to ensure that parental and community involvement is integral to the program's established support system for students.



Program Guidelines

Section One: Identification and Referral

Outcome: Children with vision loss are identified and referred as early as possible to enable the best possible educational, social, emotional, and achievement outcomes.

Idaho children/students who are blind or visually impaired are eligible for early intervention services (birth to three) when vision loss is present and for special education services (3 to 21) when vision loss is present, the vision loss adversely affects developmental and/or educational performance, and the child/student needs specially designed instruction.

Specific criteria for vision loss are described below:

Birth to three:

Refer to the current Infant Toddler Program Implementation Manual.

Three to Twenty One:

Refer to the current Idaho Special Education Manual.

Under the Individuals with Disabilities Education Act (IDEA) 2004 visual impairment, including blindness, is defined as impairment in vision that, even with correction, adversely affects a child's educational performance. The term includes both partial sight and blindness.

Identification – Child Find

Identification is the process of seeking out and locating all infants, toddlers, children, and students who are blind or visually impaired from birth – 21.

The Child Find process for children under 36 months of age is described in the regulations of Part C of IDEA. For children 3 to 21 years, the process is defined in Part B of IDEA.

Identification and Referral

Standard 1: Procedures exist for locating and referring infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, who may require early intervention and/or special education.

All primary referral sources (hospitals, child care providers, physicians, etc.) are responsible for referring all infants and toddlers identified with a vision loss first to the Infant Toddler Program and then the State Educational Program for the Blind and Visually Impaired for services within two (2) working days.

For specific information regarding Child Find for children birth to three, see the current Infant Toddler Program Implementation Manual.

For specific information regarding Child Find for children 3 to 21, refer to the current Idaho Special Education Manual.

Child Find activities may include but are not limited to:

- Producing and distributing public service announcements
- Producing pamphlets, brochures, and other written communications
- Making presentations and distributing information regarding vision loss to local hospitals and other medical care providers and agencies, child care providers, social service agencies, educational agencies, parent organizations and support groups, professional organizations, philanthropic and service organizations, and other organizations established to inform or serve culturally diverse populations
- Providing community-wide vision screening in collaboration with hospitals, health departments, Infant Toddler Programs, Head Start Programs, center-based programs, and school districts
- Tracking, follow up, and referral
- Developmental monitoring

Resources

Standard 2: An unbiased, comprehensive resource information packet will be given to parents of recently identified infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, regardless of child's age or other disabilities.

The program will distribute a resource guide is distributed to every family of a newly identified child/student who is blind or visually impaired. These packets should include, but not limited to, information regarding:

- A summary of the current federal and state laws pertaining to the education of children who are blind or visually impaired
- Providers of educational opportunities for children who are blind or visually impaired
- Description of library services for children who are blind or visually impaired (e.g., the Idaho Talking Book Library and Utah State Library for the Blind and Disabled)
- Description of rehabilitation services for children who are blind or visually impaired
- Description of the role of Health and Welfare in the education of children who are blind or visually impaired
- Role of parents in the education of their children who are blind or visually impaired
- Role of school districts and state-wide services in the education of children who are blind or visually impaired
- Currently contracted advocacy group(s)
- 504, Individual Family Service Plan (IFSP), Individualized Education Plan (IEP) process

- A one-page document from consumer organizations as submitted by each organization
- Special skills used by the blind or visually impaired
- Reasonable expectations for students and adults who are blind or visually impaired

If the parent is blind or visually impaired this information packet shall be provided in the accessible format of their choice. All parents will be offered an appointment with state blind program staff to review and discuss the information in this packet upon child/student identification.

The State Educational Program for the Blind and Visually Impaired shall designate a regional parent information coordinator in each region with email and/or toll free phone number contact information provided to parents upon identification and posted on the agency website.

Collaboration

Standard 3: Programs for infants, toddlers, children, and youth, including those with additional disabilities and deafblindness, establish collaborative relationships with health care providers, social services, school districts, and child care programs in order to ensure that infants, toddlers, preschoolers, and school-age children with identified vision loss receive appropriate referral within two (2) days and are contacted by the appropriate agency within fourteen (14) calendar days.

Infant Toddler Programs', State Educational Program for the Blind and Visually Impaired's, and school districts' Child Find programs cooperate to identify:

- Potentially eligible children/students who may need early intervention or special education services
- Types of programs and services available for individuals who are blind or visually impaired, birth – 21
- Contact persons and telephone numbers for regional resources and public school programs and services for students who are blind or visually impaired

Vision Screening

Standard 4: Qualified personnel conduct vision screenings to identify children who may have a vision loss.

Refer to the Idaho State Vision Screening law, upon its establishment. The law will be established within two years of implementation of the State Educational Program Standards for Infants, Toddlers, Children, and Youth Who Are Blind or Visually Impaired.

Assessment Referral

Standard 5: Children who fail vision screenings receive appropriate assessment(s).

Upon confirmation of vision loss, the child should be referred to the lead agency's multidisciplinary team (Infant Toddler Programs or school districts) to determine developmental and/or educational implications of vision loss and the possible need for early intervention evaluation for special education and related services. The multidisciplinary team must include a certified teacher of the blind or visually impaired. All relevant persons in the child's environment should be counseled about the implications of vision loss. These persons include family members, service providers, teachers, and child care providers.

Appropriate assessments include, but are not limited to:

- Functional Vision Evaluation – conducted by a TVI or a Certified Orientation and Mobility Specialist
- Learning Media Assessment – conducted by a TVI
- Orientation and Mobility Screening/Evaluation – conducted by a Certified Orientation and Mobility Specialist
- Clinical Low Vision Evaluation – conducted by a Certified Low Vision Therapist
- Technology Evaluation – conducted by a TVI/Technology Specialist for the Blind/VI

Determination of Etiology

The etiology of a child's vision loss provides information regarding potential needs and services based on characteristics of that condition. Due to various etiologies that involve neurological components, students with a vision loss are at greater risk for secondary disorders, such as learning disabilities and attention deficits. Diseases and accidents that cause vision loss may often cause physical disabilities as well as neurological and developmental disorders. Genetic origins may result in vision loss or other disabilities long after birth. The etiology for each child's vision loss should be identified when possible.

Additional Screening

Standard 6: Infants, toddlers, children, and youth, including those with additional disabilities and deafblindness, will be screened for hearing and/or additional impairment(s).

Hearing screening procedures for all children who are blind or visually impaired must be conducted prior to the child's first Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP) or when they enroll in school. In addition, annual hearing screening is advised for all children who are blind or visually impaired receiving special education services.

Section Two: Assessment of Child's/Student's Needs

Outcome: An individualized intervention or education plan is developed based on assessment that yields valid and reliable information about the child.

Purposes and Procedures of the Assessment Plan

Students who are blind or visually impaired are provided an assessment of their unique needs when they are initially identified and ongoing assessment completed at regular intervals. The first goal of the assessment process is to gather valid information about the child's present level of functioning/performance in the school and/or home setting in order to construct a service/educational plan to meet the special needs of the child. The second goal is to obtain data for program accountability.

In assessing and identifying the unique needs of children with vision loss or blindness, including those with additional disabilities and deafblindness, consideration of conditions that may affect individual performance is required. These include:

- Family history
- Health and developmental history
- Age of onset and age of diagnosis
- Type and severity of vision loss
- Etiology of vision loss
- Stability of visual condition
- Cognitive ability
- Hearing ability
- Additional disabling conditions
- Potential benefit of residual vision
- Primary language used in the home
- Educational history
- Parent values, goals, and philosophy

Assessment data may be collected through:

- Functional vision evaluation
- Learning media assessment
- Play assessment
- Observations
- Parent interviews and/or questionnaires
- Medical history
- Ophthalmologic history and evaluations
- Developmental scales
- Gathering of educational information
- Norm and criterion-referenced tests
- Performance-based assessments
- Career/vocational interests/skills inventories

- Videotape & associated analyses

Standardized vs. Non-standardized Assessments

The nature of vision loss can affect the administration and scoring of assessment tools. Although very few instruments have been standardized for populations who are blind or visually impaired, this form of assessment is useful for some children. In addition, it is important to use assessments that are normed on sighted children. These assessments allow professionals to compare the development of children who are blind or visually impaired to children who are sighted. The ultimate goal of early intervention and education for children with vision loss is to develop at a commensurate level to their sighted peers. At some point, assessors need to decide whether to use a standardized instrument, to adapt standardized instruments developed for populations who are sighted, or to use instruments that have been standardized for the populations who are blind or visually impaired. The use of adaptations may affect the validity of the standardized procedures. But the appropriate interpretation of assessment data under these conditions may justify the use of adaptations. Adaptations may include, but are not limited to, braille, description of charts verbally or tactually, assistive technology, hands-on objects. Accommodations may include, but are not limited to, using a different method to present the test, and/or rephrasing questions. Documentation regarding the specific accommodations to the test will be noted in the assessment report.

When a standardized test, even with accommodations or adaptations, is determined by the evaluation team to be invalid for a specific student, alternative assessments are used, as specified in the IFSP/IEP. The results of the alternative assessments are then included in the assessment report.

Persons Conducting the Assessment

Standard 7: Each assessment of infants, toddlers, children, and youth, including those with additional disabilities and deafblindness, birth – 21, is conducted by qualified personnel who understand the unique nature of vision loss and who are specifically trained to conduct these assessments.

The assessment of children/students, including those with additional disabilities and deafblindness, must be conducted by persons who are knowledgeable about vision loss. They must be skilled in administering the assessment tools, be skilled in interpreting the results to ensure non-discriminatory testing, be knowledgeable about assistive technology, and have the requisite communication and literacy skills. In addition, the parents perform a vital role in providing information to the assessment team.

For children birth to three, the Infant Toddler Program is responsible for the assessment process in collaboration with the State Educational Program for the Blind and Visually Impaired. A certified teacher of the blind or visually impaired will be included as part of the assessment process.

For school-age children, 3 – 21, the local educational agencies are responsible for the assessment process in collaboration with the State Educational Program for the Blind and Visually Impaired.

A certified teacher of the blind or visually impaired will be included as part of the assessment process.

To determine eligibility for early intervention under the categories of blindness and visual impairment, refer to the current Infant Toddler Program Implementation Manual.

To determine eligibility for special education under the categories of blindness and visual impairment, refer to the current Idaho Special Education Manual.

Domains to be Assessed

Standard 8: Qualified professionals assess children/students and collaborate with parents and other professionals on all relevant areas of functioning to provide a comprehensive profile of the child/student with vision loss.

Careful consideration should be given to the selection of the assessment tools used to evaluate children with vision loss. Those conducting the initial and subsequent assessments of a student who is blind or visually impaired will assess in the relevant areas outlined in the current Idaho Special Education Manual.

Administration of Assessments

Standard 9: Assessments are provided and administered using the student's primary language and in the appropriate medium/media by professionals proficient in that approach.

When an assessment plan is being developed, the special language needs of the student who is blind or visually impaired should be recognized. When there is a primary language other than English, assessments must be conducted in that language. The preferred medium/media of the student who is blind or visually impaired must be utilized in the assessment. This practice assures that assessments are an accurate measure of abilities regardless of mastery of spoken or written English.

Specialized Services, Materials, and Equipment

Standard 10: The assessment report identifies the unique learning needs of the infant, toddler, child, or youth who is blind or visually impaired, including those with additional disabilities and deafblindness, related to the vision loss including needs for specialized services, materials and equipment, and accommodations in the unique developmental and learning environment.

The report specifies what the IFSP/IEP team must identify as the unique developmental educational needs of the child/student, including those with additional disabilities and deafblindness in order to have access to an appropriate early intervention or education program.

Assessment in the State and District Core Curriculum

Standard 11: Infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, will be assessed using the early intervention, state and district core curriculum that are aligned with established state and district standards.

Children/students who are blind or visually impaired, including those with additional disabilities and deafblindness, are included in state and district assessments with the accommodations and adaptations that have been outlined in the IEP, including assistive technology. Decisions regarding the level of participation must be made by the IFSP/IEP team. Results of these assessments are used to identify the child's/student's skills, to monitor child's/student's progress over time, and to determine goals for the intervention program.

Assessment in the Expanded Core Curriculum

Standard 12: Infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, receive assessment in the expanded core curriculum by qualified personnel. A triennial comprehensive functional vision evaluation and learning media assessment will be conducted by qualified personnel.

Assessment in the expanded core curriculum as needed includes:

- Braille reading and writing (e.g., Perkins braille writer, slate and stylus)
- Compensatory skills (abacus, tactile map, and recorded materials)
- Use of low vision devices
- Orientation and mobility
- Social interaction skills
- Independent living skills
- Recreation and leisure skills
- Career education and exploration
- Use of assistive technology
- Visual efficiency skills

A learning media assessment is conducted to determine:

- Primary/secondary sensory channel
- Primary/secondary learning medium/media
- Primary/secondary literacy medium/media (e.g., braille or print)

For information regarding use of braille materials and braille instruction refer to current Idaho braille legislation and IDEA.

Assessment Team

Standard 13: Infants, toddlers, children, and youth, including those with additional disabilities and deafblindness, are referred to a specialized assessment team approved by the State Educational Program for the Blind and Visually Impaired and developed by the local school district or provided by the state program when appropriate.

Early intervention programs and local educational agencies may refer to an assessment team for infants, children, and students who are blind or visually impaired (a multidisciplinary team of professionals with the necessary expertise to assess children with vision loss). Referrals to the team may be made for a variety of reasons, including but not limited to program placement

concerns, lack of qualified assessment personnel in the local school district, concerns over lack of progress, or a need for further instructional programming guidance.

The team collects information through formal and informal testing, observation, and parent interviews. At the end of the assessment, the team meets with the parents and appropriate early intervention or the IFSP/IEP personnel to discuss the findings and to outline a program for inclusion of the child/student.

Eligibility Criteria

Standard 14: Eligibility criteria will be defined by the State of Idaho.

In order to qualify for early intervention or special education services children/students, including those with additional disabilities and deafblindness, must meet criteria determined by the state of Idaho based upon federal standards.

Service/Placement Considerations

Standard 15: A continuum of service/placement options is reviewed with parents and placement is determined by the IFSP/IEP team (including parents) based on valid and reliable assessment data and other information that identifies individual needs across developmental, academic, and social domains.

Placement options may include but are not limited to:

Birth to three:

The preferred setting for intervention is a natural environment as outlined in Part C of IDEA.

Preschool and school-age children:

The State Educational Program for the Blind and Visually Impaired provides a continuum of services in a variety of school settings.

Appropriate Placement

Standard 16: Determination of appropriate early intervention or educational setting must be based on the identified needs of infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, throughout their developmental and educational experiences. Any appropriate placement option recommended by the IFSP/IEP team must be made available to the infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness.

For specific information regarding appropriate placement, refer to the natural environment or least restrictive environment (LRE) as defined by IDEA.

Section Three: State Program Design

Outcome: Infants, toddlers, children, and youth, including those with additional disabilities and deafblindness share the same learning opportunities as their sighted peers and benefit from programs that support and provide equal opportunities.

It is essential for the well-being and growth of children/students who are blind or visually impaired that educational programs recognize the unique nature of vision loss and ensure that all children who are blind or visually impaired have appropriate, ongoing, and fully accessible educational opportunities.

Policy on Literacy and Communication

Standard 17: The State Educational Program for the Blind and Visually Impaired has a written policy on the central role of literacy and communication as it relates to the cognitive, academic, social, and emotional development of infants, toddlers, children, and youth, including those with additional disabilities and deafblindness.

The development of literacy skills, receptive, and expressive language is fundamental to any educational experience, and is particularly crucial for children/students who are blind or visually impaired. Communication and educational growth depend on inclusion in a multi-sensory environment; an environment with consistent, direct, and age-appropriate learning opportunities.

Students with Additional Disabilities

Standard 18: Provision is made for appropriate services for infants, toddlers, children, and youth, including those with additional disabilities and deafblindness.

The unique needs resulting from additional disabilities and deafblindness are so varied and complex that they should be dealt with on an individual basis through a collaborative effort among parents, educators, support personnel and other professionals in direct contact with the child.

Support services, such as orientation and mobility, instruction, the use of Braille, adaptive devices, and/or training in prescribed low vision devices by a teacher certified in the area of visual impairment, may be required to meet the child's educational needs.

The program provides appropriate services to children/students with vision loss and additional disabilities and children/students with deafblindness to ensure:

- Access to quality programs and services
- Functional age-appropriate curricula
- Services from professionals with expertise in the development and education of children/students who are blind or visually impaired and also in the other areas of the suspected or identified disabilities
- The required level of expertise and experience for professionals that are commensurate with the significance of the level of disability(s) present in the child/student

Programs and services are provided through or coordinated with the State Educational Program for the Blind and Visually Impaired to more effectively serve children/students who are blind or visually impaired with additional disabilities.

State Educational Program for the Blind and Visually Impaired

Standard 19: The State Educational Program for the Blind and Visually Impaired consists of the Idaho State Board of Education and the program administration advised and assisted by an advisory council appointed by the Idaho State Board of Education.

State Oversight

Standard 20: The State Educational Program for the Blind and Visually Impaired adopts policies that are consistent with the guidelines put forth in this document, delegates implementation of these policies to the administrative staff, and monitors results. These policies support the expected learning outcomes for children/students. These policies are initially reviewed annually for the first five (5) years and at least every five (5) years thereafter.

Effective governance calls for policies that require programs to have a clear statement of purpose, a statement of expected developmental outcomes (birth to three) and a statement of expected learning results for students (preschool to high school). These policies include a commitment to increased child outcomes and student achievement. Outcomes and achievement are documented through the development of content and performance standards and systems of assessment and accountability. The implementation of these policies is delegated to the professional staff of the State Educational Program for the Blind and Visually Impaired.

Continuum of Options

Standard 21: The State Educational Program for the Blind and Visually Impaired provides access to a full continuum of placement, program, service, and literacy options. The agency collaborates with the early intervention and local educational agencies, institutes of higher education, and other agencies to ensure provision of appropriate services for infants, toddlers, children, and youth, including those with additional disabilities and deafblindness.

When determining placement, it is important to adhere to the concept of least restrictive environment (LRE) as defined by the current Idaho Special Education Manual and IDEA.

For more information about Continuum of Options, refer to Appendix A.

Instructional Delivery System

Standard 22: The instructional delivery system supports infants, toddlers, children and youth, including those with additional disabilities and deafblindness, learning in a developmentally appropriate context and focuses on the unique learning needs and literacy medium/media in order to support success.

Program Administrator

Standard 23: The Program Administrator is an experienced educator of students who are blind or visually impaired, with skills to ensure that infants, toddlers, children and youth, who are blind or visually impaired including those with additional disabilities and deafblindness are provided with appropriate instruction and designated services. The Program Administrator has the skills necessary for facilitating participation of staff, parents, and the blind or visually impaired community in program development related to a continuum of services.

The Program Administrator must:

- Hold a VI endorsement
- Have a minimum of three years experience teaching students who are blind or visually impaired in an itinerant model or special education administration
- Have a working knowledge of federal general education and special education law

The program administration has a number of responsibilities that may include:

- Collaborating with agencies in Child Find activities for the purpose of identifying students who may have vision loss
- Ensuring that appropriate assessment procedures and personnel trained to use these procedures are used in the evaluation of children/students who are blind or visually impaired including those with additional disabilities and deafblindness
- Coordinating appropriate personnel (e.g., teachers of the blind or visually impaired, certified orientation and mobility specialists, paraprofessionals, braillists, early childhood specialists, school psychologists) to provide direct and indirect services to children/students who are blind or visually impaired
- Evaluating staff employed in the blind or visually impaired program
- Providing specialized training and staff development to parents, administrators, teachers, support staff, and paraprofessionals regarding the unique needs of children/students who are blind or visually impaired
- Ensuring that a full continuum of services, program options, and specialized equipment and materials are available to all children/students who are blind or visually impaired
- Establishing and coordinating an advisory committee composed of parents, consumers who are blind or visually impaired, and professionals
- Advocating for programs serving children/students who are blind or visually impaired
- Ensuring that resources are secured and effectively disseminated in a timely manner and utilized within the blind or visually impaired program

Staff Qualifications

Standard 24: Infants, toddlers, children and youth, who are blind or visually impaired, including those with additional disabilities and deafblindness, birth-21, are instructed by early intervention providers, teachers, and/or specialists who are specifically trained, certified, and/or licensed to teach academic, expanded core curriculum, communication, social, emotional, assistive technology, and transition skills to these individuals.

Teacher of the Blind or Visually Impaired (TVI)

Refer to TVI as defined by IDEA.

Refer to Idaho Certification Manual's current VI endorsement.

Orientation and Mobility Specialist (O & M)

Refer to IDEA Regulations for information about orientation and mobility as a related service.

Teacher of the Blind or Visually Impaired Early Intervention Provider

The development of positive family-child relationships during a child's early years is critical to the child's literacy, motor, developmental, social-emotional, cognitive, and linguistic growth. Therefore, it is critical that providers in early education blind or visually impaired programs focus their service delivery on the family as well as on the child. Early intervention providers must be certified teachers of the blind or visually impaired and must also have the competencies related to the provision of services to infants, toddlers, preschoolers, and their families.

Early intervention providers who provide orientation and mobility services must be certified orientation and mobility specialists and have a good knowledge of early childhood development.

Refer to current Infant Toddler Program Implementation Manual.

Itinerant Teacher of the Blind or Visually Impaired

Itinerant teachers of the blind or visually impaired will provide direct instruction and consultative services for children/students who are blind or visually impaired for whom they serve enrolled in general education classes, charter school programs, or home or hospital programs.

Caseloads for itinerant teachers must be considered. Factors such as travel, age of students, number of students with additional disabilities, and dynamics of the school climate should be taken into consideration.

Braillist

Braillists will hold National Library of Congress braille transcription certification. The type of certification required depends on the subject matter being produced (e.g., for the production of advanced Nemeth materials, NLS Nemeth certification is required).

Teacher of the Blind or Visually Impaired/Technology Specialist

TVI is specifically trained in the area of assistive technology for the blind or visually impaired.

Paraprofessionals

Standard 25: State Educational Program for the Blind and Visually Impaired and local educational agencies will work collaboratively to train and support paraprofessionals who are providing services to infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness.

Recognizing that paraprofessionals working with children who are blind or visually impaired need enhanced skills in the expanded core curriculum (e.g., braille, orientation and mobility, and advocacy skills), the program administration will provide training at least annually. The local educational agencies will support their paraprofessionals who are participating in training.

Training may include, but is not limited to:

- Distance education
- University preparation programs
- Direct instruction (e.g., TVI, COMS)

Professional Preparation

Standard 26: The Idaho State Board of Education will work toward ensuring that programs are provided through state public post-secondary institutions to prepare specifically trained, certified, and/or licensed early intervention providers, teachers, paraprofessionals, and related service professionals in the continuum of educational options for infants, toddlers, children and youth, who are blind or visually impaired, including those with additional disabilities and deafblindness.

Caseload Management

Standard 27: Class size and/or caseloads of staff support the provision of specialized instruction and services based on the unique educational needs of infants, toddlers, children and youth, who are blind or visually impaired including those with additional disabilities and deafblindness.

For Caseload Analysis Guidelines, refer to Appendix B.

Staff Development

Standard 28: The State Educational Program for the Blind and Visually Impaired provides ongoing training and mentoring for all staff to enhance achievement of infants, toddlers, children and youth, who are blind or visually impaired, including those with additional disabilities and deafblindness. Teachers of the blind or visually impaired and/or certified orientation and mobility specialists will ensure appropriate mentoring and professional development opportunities for teachers of the blind or visually impaired and certified orientation and mobility specialists.

Instructional quality is paramount to improve outcomes for all children/students who are blind or visually impaired. Therefore, staff development must be relevant, focused on techniques and strategies that are research-based and known to improve outcomes for these individuals. Staff development should also include mentoring activities to ensure appropriate follow through and implementation of effective strategies into the instructional process.

Specialized staff development is critical for personnel working in programs for children/students who are blind or visually impaired.

The quality of educational programs serving children/students who are blind or visually impaired depends upon the specialized knowledge, skills, and attributes of all administrators, teachers, certificated personnel, and support service personnel (e.g., paraprofessionals and braillists). Historically there has been a shortage of qualified providers to work with children who are blind or visually impaired. Activities that support the goal of staff development include recruitment, pre-service training, ongoing in-service training, and mentoring activities.

An annual needs assessment shall be created and used to identify and plan staff development needs. Depending on the needs of the program and the staff, program planners should provide opportunities for a variety of training activities.

Examples of staff development topics include, but are not limited to:

- Refresher braille course
- Continued education of technology for the blind and visually impaired
- The use of technology to enhance child/student learning and networking
- Assessments for children/students who are blind or visually impaired
- Services for children/students who are blind or visually impaired with special needs
- Literacy skills (e.g., braille, Nemeth)
- Orientation and mobility
- Curricular adaptations and teaching strategies known to benefit children/students who are blind or visually impaired

Administrators should support and facilitate networking through regionalized staff development activities, video conferencing, and computer networking. Networking is important to provide staff with disability-specific resources and to allow for the exchange of ideas and experiences. Networking may alleviate anxiety for isolated providers and provide motivation for innovative practices and high standards.

The State Educational Program for the Blind and Visually Impaired, the Program Administrator, and the administration will facilitate and support mentoring activities for teachers of the visually impaired and other service providers (e.g. certified orientation and mobility specialists, and braillists) among professionals, parents, and the blind community.

Training for Educational Personnel

Standard 29: The State Educational Program for the Blind and Visually Impaired provides training to education personnel serving its infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, regarding accommodations, modifications of the curriculum, and understanding the impact of vision loss on development and learning.

Early intervention providers, preschool and K-12 teachers, and special education teachers (other than teachers for the blind or visually impaired) who provide instruction to infants, toddlers, children, and youth who are blind or visually impaired should be given in-service training by qualified personnel. Training should occur prior to the placement of children/students who are blind or visually impaired in those situations. In-service training should include but not be limited to:

- Understanding vision loss and specifically, the implications of vision loss relative to the children/students who are blind or visually impaired they serve
- Modifying the environment based on the needs of the child/student who is blind or visually impaired to maximize participation in the learning environment (e.g., increased/decreased lighting, positioning based on best visual efficiency)
- Collaborating and/or team teaching with support personnel (e.g., early intervention provider, itinerant teacher of the blind or visually impaired, certified orientation and mobility specialist)
- Working with educational staff, including paraprofessionals
- Ensuring that children/students who are blind or visually impaired will have access to and will be included in community activities and in all classroom and school-related activities

New and Existing Facilities

Standard 30: New facilities are designed and existing facilities are maintained to enhance the provision of instruction and services to meet the unique academic, expanded core curriculum, communication, social, emotional, assistive technology, and transition needs of infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness.

Refer to current Americans with Disabilities Act.

Safe School Environment

Standard 31: The school environment will be a safe and secure setting in which all accommodations can be met. The school environment includes the home, school, and community in which the education and related services are provided.

The program has policies and procedures that ensure a safe, secure, and teaching and learning environment for its students and staff.

These policies address the following:

- Collaborative interagency and community partnerships to support and ensure the safety and security of all students and staff through an effective safe program planning process, which includes background checks
- Staff development activities that emphasize safe school strategies
- Standards for school lighting that provides a visually appropriate environment supportive of the learning process

- Regular maintenance of the program’s facilities to ensure the safety and well-being of all students and staff members
- Evaluation of the effectiveness of the program’s safety plan

Program Assessment

Standard 32: The school leadership, program administrators, and staff regularly assess infant’s, toddler’s, children’s, and youth’s progress toward accomplishing the expected federal, state, and school-wide learning results and report program wide progress to the rest of the school community, including parents, and related agencies and organizations.

The program has established an assessment process that reports the extent to which every child/student is meeting content and performance standards and expected child’s/student’s development and learning results. The process includes the development of an assessment plan that provides valid and reliable information for:

- Student-based indicators including the achievement of every child/student related to developmental milestones, content, and performance standards
- School-based (program-based for early intervention) indicators that include what the program plans to do to increase the level of each student’s achievement over time
- Parent input

The assessment plan includes a description of the following:

- The assessment formats and the types of information used to determine whether every child/student is meeting the developmental milestones and content standards
- The method employed to ensure the validity, reliability, and consistency of the evaluations of the child’s/student’s development and achievement
- The method employed to combine various types of information about child/student development and achievement
- The method employed to ensure that all children/students are assessed appropriately on developmental/content standards (e.g., what accommodations are made for the child/student)
- The program’s staff development process in the area of assessment, ensuring that staff can reliably evaluate the child’s/student’s achievement relative to developmental milestones/content standards

Program Accountability

Standard 33: As part of the state monitoring process, the program administration conducts a comprehensive triennial assessment for the State Educational Program for the Blind and Visually Impaired using these standards for all areas of program quality, and provides written progress reports to parents, staff, the public, and interested parties.

The State Educational Program for the Blind and Visually Impaired has approved a comprehensive program accountability plan, including a self-review process, using these standards. The plan provides appropriate information about the program and child’s/student’s

achievement to school/program staff, students, parents, administrators, the local advisory board, the community, and the Idaho State Department of Education.

The plan includes the following:

- A description of the types of information to be gathered and presented to school/program staff, students, parents, administrators, the advisory board, the community, and the Idaho State Department of Education
- A timeline for reporting information about child/student achievement and compliance with these standards
- A timeline for the improvement of child/student development and achievement
- A timeline for program standard compliance, including targets for improvement and for interventions if those targets are not met
- Procedures for the development and submittal of periodic reports to the advisory board, school/program staff, parents, and community

Compliance

Standard 34: The State Board of Education will adopt an accountability system including corrective action plans and sanctions for programs that are out of compliance.
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Refer to Idaho Statute.

Section Four: Curriculum, Expanded Core Curriculum, and Instruction

Outcome: Infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, are provided with equal access to educational opportunities that meet their individual developmental, academic, and social needs.

Curriculum and instruction are guided by educational standards. In addition to program, district, and state core standards, direct instruction to children/students who are blind or visually impaired frequently utilizes specialized curricula. These curricula help children/students who are blind or visually impaired to acquire skills in areas specifically impacted by vision loss. By aligning research-based curricula and appropriate assessment, educators determine effective methods of instruction in order to show adequate yearly progress (AYP) for all students as per No Child Left Behind (NCLB).

Curriculum and Instruction—Birth to Three

Standard 35: Curriculum and instruction for infants, toddlers, and preschoolers who are blind or visually impaired, including those with additional disabilities and deafblindness, are family focused and developmentally appropriate to ensure later academic, social, and vocational success.

Curricula for families of infants who are blind or visually impaired focus on teaching parents skills they need to use to develop their child's communication, visual efficiency, tactile, pre-literacy, and concept development skills, and to maintain skills in other developmental domains commensurate with the child's cognitive development. Early intervention services are family-centered and are provided as outlined in the IFSP. Curriculum for infants, toddlers, and preschoolers who are blind or visually impaired focuses on the development of tactile, visual efficiency, pre-literacy, concept development, and communication skills to help ensure later academic, social, and vocational success. These direct instructional services are family-centered and are provided in accordance with the IFSP. Training and support for parents and family members result in an enriched educational environment in the home.

Examples of curricula commonly used with infants, toddlers and preschoolers who are visually impaired or blind including those with additional disabilities and deaf-blindness include, but are not limited to:

- The Oregon Project
- Vision
- Teaching Age Appropriate Purposeful Skills: An Orientation and Mobility Curriculum for Students with Visual Impairments (TAPS)
- Hawaii Early Learning Project (HELP)
- Braille Requisite Skills Inventory
- Braille Readiness Skills Grid
- INSITE

Curriculum and Instruction—Three to Twenty One

Standard 36: School-aged children, who are blind or visually impaired, including those with additional disabilities and deafblindness, are provided with a challenging, coherent, and relevant core curriculum. An expanded core curriculum for students with visual impairments is necessary and should be provided to insure an equal opportunity for learning in general education. Infants, toddlers, children and youth who are blind or visually impaired, including those with additional disabilities, receive instruction by qualified personnel in the expanded core curriculum as appropriate in the home, school, and community.

Refer to the State of Idaho educational standards and other research-based curricula specifically designed for use with students who are blind or visually impaired.

State and District Core Curriculum Standards

Standard 37: Children and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, will be instructed using the state and district core curriculum that are aligned with established state and district standards. Infants and toddlers will be instructed using early intervention, developmentally appropriate curriculum specially designed for the blind or visually impaired.

In order to access the state and district core curriculum, specialized services, instructional strategies, materials, equipment, assistive technology, curricular modifications, adaptations, and accommodations to the educational environment must be identified and implemented. The IFSP/IEP for each child/student who is blind or visually impaired will be written in accordance with developmental milestones or the state/district core curriculum which may also include expansion of core curriculum benchmarks. This may include setting goals and objectives based on the findings of the child's/student's functional vision evaluation and/or learning media assessment.

Examples of early intervention, developmentally appropriate curriculum include, but are not limited to:

- The Oregon Project for Preschoolers
- The Hawaii Early Learning Project (HELP)

Expanded Core Curriculum

Standard 38: In addition to state and district core standards, infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, will be provided with the expanded core curriculum for the blind or visually impaired coordinated among service providers, which contains well-defined and relevant instruction in the areas of need as identified on the IFSP/IEP.

Expanded core curricula in areas not included in the state and district core curriculum are required by many students who are blind or visually impaired.

Developmentally appropriate instruction in the expanded core curriculum as needed includes:

- Braille reading and writing (e.g., Perkins braille writer, slate and stylus)
- Compensatory skills (abacus, tactile map, and recorded materials)
- Use of low vision devices
- Orientation and mobility
- Social interaction skills
- Independent living skills
- Recreation and leisure skills
- Career education and exploration
- Use of assistive technology
- Visual efficiency skills
- Developmentally appropriate instruction (e.g., tactile awareness, preliteracy skills, concept development)

The State Educational Program for the Blind and Visually Impaired, in collaboration with local educational agencies and other agencies, will design and provide programs addressing the expanded core curriculum needs in a variety of settings, time frames and locales.

Examples include, but are not limited to the following:

- Intensive, short-term courses
- In-class opportunities
- Summer programs

For information regarding use of braille materials and braille instruction, refer to the current Idaho braille legislation and IDEA.

Multidisciplinary Team

Standard 39: All persons identified on the IFSP/IEP who provide services, including parents, will form a multidisciplinary team that works collaboratively and flexibly to meet the individual needs of infant/toddler/children/and youth, recognizing the roles and responsibilities of each team member.
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Instructional services provided to children/students who are blind or visually impaired will be child/student-centered and family-supported. Parents must be treated as full and equal participants in the developmental/educational program of their child. Each team member provides services in the content area(s) for which they have expertise and shares their knowledge, curricula, and successful techniques and strategies with the other team members.

Members of the multidisciplinary team may include, but are not limited to the:

- Student
- Parents
- Family members

- Early interventionist
- Certified orientation and mobility specialist
- School psychologist
- Teacher for the blind or visually impaired
- Paraprofessional
- Career/Vocational specialist
- General education teacher/Head Start teacher
- Program Administrator

Birth to three:

For specific criteria regarding IFSP team membership as defined by IDEA, refer to current Idaho Infant Toddler Program Implementation Manual.

Three to Twenty One:

For specific criteria regarding IEP team membership as defined by IDEA, refer to current Idaho Special Education Manual.

Curricular and Extracurricular Activities

Standard 40: The State Educational Program for the Blind and Visually Impaired, in collaboration with early intervention programs and local educational agencies, seeks to provide equal access to all infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, in curricular and extracurricular activities, and designated and related services in the home, school, and community. Educators and early interventionists ensure that children/students receive appropriate opportunities to participate with peers who are blind or visually impaired as well as those who are sighted.

With proper training and acceptance, children/students who are blind or visually impaired can participate in virtually any class or activity that children/students who are sighted do. Therefore, the State Educational Program for the Blind and Visually Impaired in collaboration with early intervention programs and local educational agencies will determine tools and techniques for each individual child/student to participate and make achievements according to their interests and abilities.

Access to curricular and extracurricular activities will allow the child/student to maximize his/her interests and skills. Curricular/extracurricular activities include but are not limited to:

- Science labs
- Physical education
- Vocational education (e.g., welding, sewing, mechanics)
- Sports (e.g., football, track and field, soccer)
- Art
- Driver's education
- Field trips

Natural Environment

Standard 41: The infant/toddler who is blind or visually impaired, including those with additional disabilities and deafblindness, is provided services in the child's natural environment(s) in accordance with the child's IFSP.

Policies and procedures ensure, to the maximum extent appropriate, that early intervention services are provided in natural environments. Additionally, the provision of early intervention services for any infant or toddler occurs in a setting other than a natural environment only if early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment.

For more information regarding natural environment, refer to the current Infant Toddler Implementation Manual.

Focus on Authentic Peer Interactions

Standard 42: The infant, toddler, child, or youth who is blind or visually impaired, including those with additional disabilities and deafblindness, has authentic peer interactions and is able to participate in social and academic activities. Educators will teach the child/student social skills to facilitate independence, self-advocacy, and interaction with peers, through direct instruction, modeling, and peer coaching.

The State Educational Program for the Blind and Visually Impaired, in collaboration with local educational agencies, will guide educational staff, peers, parents and community groups to assist the child/student in maximizing his/her access to the community.

Activities include, but are not limited to:

- Winter camp for the blind and visually impaired
- Braille club
- Playground activities
- Lunchroom
- Playgroups
- Clubs (e.g., drama, 4-H, scouts).

Perhaps the most difficult social skills that students with visual impairments need to acquire are those that involve nonverbal communication—that is, actions, gestures, visual gaze, and body posture that have meaning to those who view them (i.e., people who frown and whose body stance is rigid exude anger). Adolescents with visual impairments would not be privy to such information without an auditory cue or a verbal description from another person. Therefore, they must develop alternative strategies to cope with nonverbal communications, such as the following:

- Ask a trusted peer or adult to interpret social situations in which nonverbal information is being communicated
- Use auditory skills to figure out the members of a social group at a party, a dance, or any other social gathering

- Incorporate the use of hand and facial gestures when interacting with others
- Learn to face others when being spoken to and to switch body stance, according to the direction of the speaker’s voices
- Exhibit emotions and feelings when interacting with others using verbal skills—laughter, surprise, anger, and disbelief (i.e., “Oh, John, what a nice surprise. I didn’t know you were here!”)
- Enlist support from others to help interpret nonverbal cues and emotions that can be misinterpreted, especially in a flirting or dating situation
- Enlist a sighted friend, sibling, family member, or teacher to provide descriptive information about flirting—what it is, how to do it, what it accomplishes—and to explain different styles of flirting (i.e., that some females giggle, smile, and purposely ignore and some males simply try to establish eye contact and continue gazing until they receive feedback)¹

Student Achievement Standards

Standard 43: The State Educational Program for the Blind and Visually Impaired will facilitate the development of student achievement standards and expanded core curriculum standards that will be reviewed and revised at least every five (5) years.

The State Educational Program for the Blind and Visually Impaired will develop student achievement standards that align with state standards and address the unique needs of children/students who are blind or visually impaired. Such standards will identify developmentally appropriate benchmarks by which specific skills should be achieved.

Equal Access

Standard 44: The State Educational Program for the Blind and Visually Impaired and/or local educational agencies must provide equal access to materials and resources to ensure equal education opportunities for infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness, in a timely manner.

For information about the production of accessible materials per NIMAC/NIMAS refer to IDEA.

For a definition of “timely manner” refer to IDEA.

Transitions

Standard 45: Transitions occur periodically throughout a blind or visually impaired infant’s, toddler’s, child’s, or youth’s education: early intervention to school services, preschool to elementary school, elementary school to middle school/high school, and high school to vocational, independent living, and/or post-secondary education. Planning and implementing support services must occur and be documented in a timely manner prior to each transition.

IDEA defines transition services as a coordinated set of activities for a student, designed within an outcomes-oriented process, which promotes movement from school to post-secondary education, vocational training, integrated employment (including supported employment),

¹ Zell Sacks & Silberman, 2000

continuing and adult education, adult services, independent living, or community participation. Transition planning occurs for children/students from the time the vision loss is identified until graduation from high school or the age of 21. Written transition plans must be developed prior to the student exiting early intervention services and high school, or upon reaching age 21.

Early Intervention to School Service Transition:

When transitioning from the Part C early intervention program to the Part B preschool/school-age program, members of the IFSP team meet with staff in the preschool program to plan for transition and identify the appropriate preschool services for the child. All appropriate programming options are discussed and considered. The early interventionist maintains a working relationship with the staff in the child’s preschool program for the full duration of this transition process.

Preschool to Elementary School Transition:

When a child completes the preschool program, the IEP team will convene to transition the child who is blind or visually impaired to an elementary school program. The team must ensure that the child will receive instruction in the state/district core curriculum as well as in the expanded core curriculum that is designed to meet the unique needs of the child/student. Extra-curricular activities will be addressed to ensure proper social and emotional development.

Elementary School to Middle/High School Transition:

Transition planning occurs again when a student moves from the elementary school to middle school and from middle school to high school. The IEP team must examine the student’s/young adult’s interests, skills, and desires for the future. An individualized transition plan (ITP) may be developed for students by 14 years of age, and must be in place for students 16 years of age and older. A coordinated set of activities shall be based on the individual student’s needs, taking into account the student’s preferences and interests, and shall include instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and, when appropriate, acquisition of daily living skills and a functional vocational evaluation.

The plan should further identify the agencies (e.g., State Educational Program for the Blind and Visually Impaired, Idaho Division of Vocational Rehabilitation, Idaho Project for Children and Youth with Deafblindness, Idaho Commission for the Blind and Visually Impaired) that will be involved, the services that each agency will provide, and how all of the services will be coordinated. These service plans should be coordinated with the student’s IEP.

Assistive Technology

Standards 46: Early interventionists and educators must ensure the availability and use of assistive technology for infants, toddlers, children, and youth who are blind or visually impaired, including those with additional disabilities and deafblindness. Trained and qualified personnel will provide training and support to personnel and children/students.

Assessment of Instructional Design

Standard 48: The State Educational Program for the Blind and Visually Impaired uses appropriate assessment to measure the achievement of each individual infants, toddlers, children, or youth to determine the efficacy of instructional design.

The instructional design is monitored by ongoing assessment of the student's achievement. Service providers and members of the team will use the continuous cycle of curriculum/instruction/assessment to drive instructional strategies and service delivery for individual children/students who are blind or visually impaired. Information derived from this process of curriculum/instruction/assessment provides the means to measure progress of student achievement at specific intervals.

Progress of children/students who are blind or visually impaired can also be measured with assessments such as performance-based, criterion-referenced, and norm-referenced. Outcomes on these measures support an evidence-based model of instruction and subsequently demonstrate program effectiveness and program accountability.

State Educational Program for the Blind and Visually Impaired will develop an approved assessment process to evaluate efficacy in instructional design.

Section Five: Parent Training and Family and Community Involvement

Outcome: Family and community members are active, informed, and involved participants in the education process of children and youth who are blind or visually impaired.

Although special education and early intervention services are designed with the interest of infants, toddlers, children, and youth who are blind or visually impaired in mind, the path to its achievement is through comprehensive family involvement and community support. With the support of a wide-ranging network of parents, families, adults who are blind or visually impaired, and business communities, the education of infants, toddlers, children, and youth who are blind or visually impaired is enhanced.

Parent participation in education has long been recognized as a key component in improving student performance. The recognition that the family is the constant in a child's life, while the service systems and personnel within those systems vary, is a key element in creating an effective education for infants, toddlers, children, and youth who are blind or visually impaired. It is essential to design an accessible program that is flexible, culturally competent, and responsive to family-identified needs. Programs should view families as a resource of knowledge, expertise, and caring regarding their children's developmental and educational experiences.

When parents are supported, acquisition of further knowledge and skills that promote parent decision making, choice and self-determination occurs. Parents then become important partners in setting high expectations for their children who are blind or visually impaired. The State Educational Program for the Blind and the Visually Impaired recognizes that parents often need training in addition to support during periods of adjusting to life as a parent of a child who is blind or visually impaired. Parents need to learn what to expect of their child, how to foster their child's growth and development, and the opportunity to gain additional skills and knowledge as needed.

The term *families* can mean a variety of individuals such as parents, guardians, foster parents, grandparents, siblings, and extended family members. The term *parent* as used in this section is defined in the IDEA regulations.

Parent Training and Support

Standard 47: The State Educational Program for the Blind and Visually Impaired, local educational agencies, and/or other agencies provide orientation and a continuum of training opportunities for parents to acquire the necessary skills/information to support the implementation of their infant's, toddler's, child's, or youth's developmental, educational, vocational, and social achievement.

Parents of children/students who are blind or visually impaired, including those with additional disabilities and deafblindness, play an extremely important role in the education of their child. Parents, as community members, need the opportunity to learn about special services, programs,

skills, and support. The State Educational Program for the Blind and Visually Impaired, in collaboration with local educational agencies and/or other agencies/groups, offers a variety of opportunities, information, and experiences in an effort to assist parents who choose to participate in monitoring their child's education and remaining active in the educational process.

The State Educational Program for the Blind and Visually Impaired shall provide information to parents about its responsibilities and those of the local school districts. In addition, support to parents should include:

1. Printed materials describing all the materials and groups available to them and their children.
2. Names of parents and children who are blind or visually impaired who may serve as mentors who have agreed to share their names and contact information.
3. Workshops where presentations are made by other parents, orientation and mobility specialists, TVIs, and people from other agencies.
4. On-line information and courses (e.g. courses through the Hadley School for the Blind, university preparation programs, and/or the State Educational Program for the Blind and Visually Impaired).
5. Instruction in special skills used by children/students who are blind or visually impaired including Braille reading and writing, use of adaptive computers for the blind or visually impaired, orientation and mobility, and other low vision aids and devices.
6. Social activities (Family weekends, camps, and enrichment activities).
7. Sports.
8. Independent living techniques.
9. Reasonable expectations for achievements, careers, community involvement.
10. Reasonable accommodations which must be provided.

Community Involvement

Standard 48: The State Educational Program for the Blind and Visually Impaired has an ongoing process for involving parents and the blind or visually impaired community in program development and encourages strong collaboration between school staff, parents, members of the blind or visually impaired community, and the business community. The program leadership employs a wide range of strategies to ensure that parental and community involvement is integral to the program's established support system for students.

Appendix A

“Full Inclusion,” a philosophical concept currently advanced by a number of educators, is not a federal requirement of special education law. Proponents of “full inclusion” nevertheless take the position that all students with disabilities must receive their total instruction in the regular public school classroom regardless of individual needs. Unfortunately, “full inclusion” would eliminate all special placements, including “pull out” services, resource rooms and specialized schools. Such an arrangement would be seriously detrimental to the educational development of many students with disabilities.

- If provided with timely and adequate specialized services by appropriately certified teachers, students who are blind or visually impaired can develop skills that will enable them to achieve success and independence as responsible citizens in a fully integrated society. If these students do not receive appropriate instruction designed to develop competencies that meet the sensory deficits of blindness and low vision, critical learning opportunities will be lost, thus diminishing the potential for future accomplishments. In this context, ample opportunities for instruction in such areas as braille, abacus, orientation and mobility, and use of prescribed optical devices must be made available to students, as needed.
- Educational decisions must be made on a case by case basis consistent with the Individuals with Disabilities Education Act (IDEA) which guarantees a Free Appropriate Public Education in the “Least Restrictive Environment” (LRE) from among a “Full Continuum of Alternative Placements,” based on the Individual Education Plan for each student. Educational decisions should not be made simply on the basis of philosophy, limited school budgets, administrative convenience, or concerns about socialization.
- Full inclusion in regular education classrooms for all students with disabilities irrespective of individual needs is in sharp conflict with procedural guarantees of IDEA.
- Least Restrictive Environment and Full Continuum of Alternative Placements are critically important IDEA provisions. LRE is not one sole physical location. It is, rather, a principle, which if properly applied, matches the need of the student with an appropriate school setting which provides meaningful challenges, realistic expectations, and maximum opportunities for achievement and development of healthy self-esteem.
- The regular education classroom may be considered the LRE if the student possesses sufficient readiness and survival skills and can be provided adequate supports, specialized services (from personnel trained in education of the visually impaired), and opportunities to develop skills commensurate with his or her potential. Extreme caution must be exercised so that full inclusion does not result in “full submersion,” social isolation, “lowered” self-esteem, poor performance, or a setting in which services are unavailable.
- In cases where the needs of the student cannot be met in the regular classrooms, an alternative education placement must be provided and be recognized as the LRE for that

particular student. Such alternative placements should not be negatively viewed as discriminatory or as “segregated” settings when legitimately warranted to develop the needed skill for future integration in school and society.

- Since it has been clearly demonstrated that blind children benefit from interacting with disabled and non-disabled children, both interaction opportunities should be fully encouraged in whatever setting that is considered appropriate. We believe that the mandate in IDEA which states that, “to the maximum extent appropriate, children with disabilities [should be] educated with children who are non-disabled,” does not intend that blind children avoid interaction with each other.

Excerpt from Blind and Visually Impaired Students: Educational Service Guidelines. “***Full Inclusion of Students Who Are Blind or Visually Impaired: A Position Statement.***”

Appendix B

Caseload Analysis Guidelines

What is a caseload analysis?

A caseload analysis is a one-week or one-month snapshot of how professionals working with students who are blind or visually impaired allocate time. These professionals usually work one-to-one with a student and must travel to several campuses, homes, and/or districts to carry out required duties as an itinerant professional.* A caseload analysis looks at several factors inherent in the professional itinerant's responsibilities to clarify staffing patterns. These factors include assessment, travel, and direct/consultative instruction. There are many different tools (or methods) developed to conduct this analysis, but generally the results of various approaches are comparable.

*In this document, "professional" is defined as all professionals working with students who are blind or visually impaired including teachers of students who are blind or visually impaired (TVI), certified orientation and mobility specialists (COMS), TVI early intervention providers, technology specialists, and braillists.

Assumptions:

- Caseload analysis is an important part of program management.
- Among the most influential factors for job retention cited by professionals working with students who are blind or visually impaired are caseload size and composition.
- Caseload analyses are conducted on a regular, periodic basis and when the district (or service area) has a significant change in student population or professional services.
- A caseload analysis is based on verifiable data, not just verbal comments or recollections.
- A caseload analysis is conducted collaboratively by a member of the administration and professional staff.
- Changes made to professional staffing patterns will be preceded by an updated caseload analysis.
- The data gathered in a caseload analysis reflects what students need, not just what the district is currently able to provide.

Why should I conduct a caseload analysis?

Caseload analysis is a critical procedure for the pro-active administrator. It translates program practices into hard data which can be used for program evaluation. This data is useful when

communicating with people who are not familiar with the program, such as special education directors or superintendents.

Whenever you are considering adding, deleting, or modifying a professional position, the information gleaned from a caseload analysis helps you justify your actions by providing concrete data. Caseload analysis can also be used to make sure your TVI's caseload is not so large that quality services cannot be provided.

As districts change, grow and respond to new district and statewide initiatives, the amount of time that the professionals working with students who are blind or visually impaired spends with (or on behalf of) each student may more closely reflect the many demands placed on the professionals working with students who are blind or visually impaired and less accurately reflect what students need. As a result, it is beneficial for the students, professionals working with students who are blind or visually impaired and administrators to review data on how vision-related resources are being used. If changes are needed, the data from the caseload analysis will reflect the nature of the needed changes.

What does a caseload analysis take into consideration?

Most caseload analyses consider categories of students and how they receive services. A caseload analysis includes how professionals working with students who are blind or visually impaired are currently spending their time AND the amount of time that students need (which may or may not be currently provided).

Other factors include:

- Hours for direct/consultative time
- Severity of the impairment
- Age of the student
- Amount of time needed to reach each student and the distance traveled
- Planning time
- The degree to which materials must be modified (e.g., braille and enlarging print materials)
- The amount of time spent consulting with professionals, parents, agencies, and others.

Also considered are the educational needs of each student that extend beyond the general education curricula (e.g., learning to use special technology, social skills, daily living skills, braille) and direct or consultative service hours as per IEP specifications. In order for students to optimize their independence, the professionals working with students who are blind or visually impaired may need to work with students beyond school hours, in nontraditional settings, and with a broad array of community resources.

Why don't we just pick a number of students, say 15, and use that as a "cap" for a professional's caseload?

There are many reasons why this would not be an equitable solution. The range of ages and severity of the students' impairment dictate a multitude of intervention options. Students with total blindness require extensive intervention and modification from birth through graduation. Generally speaking, with a caseload of 12 students, it would be *very* labor intensive for a professional working with students who are blind or visually impaired to carry more than two functionally blind students, especially if either of the students were in the primary grades, or in high school with a heavy math and science load. In such situations, either the caseload should be modified, a braillist hired, or another solution implemented which would not compromise the quality of services to the students.

Infants and toddlers with low vision are at a critical developmental stage. During this time, consistent and frequent intervention may mean the difference between using vision to its fullest, and functioning at a lower level. Students with multiple impairments including a visual impairment require frequent consultation with the educational team in order for intervention to have its greatest affect.

Caseloads are made up of various types of students requiring different kinds of assistance at different stages of their lives. This makes "picking a number" an unsatisfactory approach.

Who should conduct the caseload analysis?

A member of the districts' administrative staff and the professionals working with students who are blind or visually impaired can best complete the analysis. The professionals working with students who are blind or visually impaired are able to provide information about the students. The administrator is able to translate program data into formats which can be communicated beyond the special education program, such as to superintendents or co-op/SSA boards.

It may also be desirable to include someone from outside the district, especially if the program staff is fairly new or inexperienced (either in vision-related services or conducting a caseload analysis). Contact the State Educational Program for the Blind and Visually Impaired.

When is the best time of the year to conduct a caseload analysis?

Caseload analyses are most useful when completed in time to make budget recommendations to the school or the State Educational Program for the Blind and Visually Impaired. Allow enough time to introduce the process to the professionals working with students who are blind or visually impaired, let them provide information, and to discuss the results once the process is nearing completion.

While student populations and schedules are always subject to change, there are times when changes tend to be less frequent, usually starting in October. If you are using a model that requires the teachers to keep a daily log for one week, select a week that does not have holidays or class parties.

If you currently do not have a full-time TVI, but will be using the caseload analysis to justify a new or expanded position, the analysis can be done at any time before the budget is due. In districts with more than one teacher or O&M specialist, the caseload analysis may help allocate students between teachers/specialists to most efficiently and effectively meet the needs of students.

Special Considerations: Several sensitive issues may arise in caseload analyses. These include, but are not limited to, the issues listed below:

- Students may not have access to instruction in the expanded core curriculum. (See Goal 8 of the National Agenda in the *Resources* Section)
- Professionals working with students who are blind or visually impaired may not have the skills needed to assess and/or provide instruction in the expanded core curriculum.
- TVI and O&M consultant(s) from the State Educational Program for the Blind and Visually Impaired may provide technical assistance in conducting the caseload analysis, assessing needs in the expanded core curriculum, or arranging for professional development in areas not yet fully developed.
- Some professionals working with students who are blind or visually impaired may view the caseload analysis process as a questioning of their professional expertise, the use of district resources, or other personal factors.

What do I do with the information?

Depending on the method you use, you should start to see patterns emerge related to time spent working with students, traveling, preparing materials, attending meetings, consulting with others, etc. Remember that typically there are 37.5 hours in the work week (if you discount lunch). Compare the totals of time spent against the 37.5 hour work week and you should get an idea of how much time your professionals working with students who are blind or visually impaired are taking to get the job done. If more than 37.5 hours per week per professionals working with students who are blind or visually impaired is needed, then evaluate the following factors:

- **The number of schools served.** This impacts time spent traveling and the number of working relationships required for each campus.
- **The ages and grade levels of students.** Infants require immediate intervention with frequent training for families and ECI personnel specific to development of infants with visual impairments. Emergent readers, both tactile and low vision, require intensive intervention and coordination with general education personnel. As students' get older and curriculum become more visually challenging, coordination of modifications and direct instruction become critical. For example, once students enter middle school, professionals working with students who are blind or visually impaired must meet and plan with approximately 5 new teachers per semester to provide curricular adaptations and recommendations for modifications.

- **Direct vs. Consult Service Delivery.** Students receiving direct service require individualized lesson planning for vision-related goals, in addition to classroom consultations with all staff. The consult model requires frequent meetings with related service and instructional personnel, providing specialized methods and materials as needed.
- **The amount of time spent in travel.** Travel for professionals working with students who are blind or visually impaired is a critical part of the job. It is also time- and budget-consuming. Are the travel patterns for the professionals working with students who are blind or visually impaired(s) efficient and workable?
- **The number of hours per week spent performing activities in support of instruction.** Sufficient time should be allotted for materials procurement and preparation, lesson preparation, research, and consultation with agencies. Remember, each student's program is individualized. If there are 15 students, there are at least 15 separate preparations.
- **The number of braille students.** Braille students require a tremendous amount of preparation, planning, and consultation for them to be integrated smoothly into general education classes. Braille readers in pre-kindergarten through 2nd grade may need three hours each day of the TVI's time (in instruction and preparation). Older braille readers should receive approximately five hours of direct service weekly, not counting the amount of time needed for preparation and consultation. If the TVI is responsible for braille, the amount of time needed for braille materials (especially math and science materials) may be significant, even with computerized programs. These are the major factors you will consider. Once you have collected the data and discussed it with your teacher, you will have a much clearer picture of the itinerant position and its demands. The data you collect will help move the decision to hire additional staff beyond the realm of conjecture.

Conducting a Professional Staff Caseload Analysis

[The caseload analysis method from Quality Programs for the Visually Impaired (QPVI) was developed by Nancy Toelle and sponsored by the Texas Education Agency. For more information about the entire QPVI program, see the *Resources* Section of the Toolbox (<http://www.tsbvi.edu/programs/resources.htm>.)]

Excessive caseloads often contribute to feelings of ineffectiveness for professionals working with students who are blind or visually impaired. If there is insufficient staff to meet the needs of all students, poor services are often the result. Without an objective view of caseloads, appropriate staffing is difficult. Examples of practices that result in inappropriate caseloads and staffing are: random allocation of students among staff members, the addition of students to caseloads without evaluating their impact on the caseload, the absence of supervisory participation in assigning students to caseloads, and ineffective scheduling. Another common practice is that of the teacher who fills a part-time position as well as another part-time position, but who is actually given the workload of a two full-time positions. Because of the many complex issues involved, the question of what constitutes an equitable caseload is not an easy one to answer. If no process is in place to guide this activity, the outcome is often unsatisfactory.

It is important to note where caseload analysis occurs during the course of the QPVI Self-Study. A full caseload analysis is conducted as the seventh key component after many other aspects have been considered, discussed and decided upon. Consultants conducting the QPVI process are frequently asked to address caseloads at the onset of the Self-Study, as caseload problems frequently exist. A cursory look at caseloads to detect any emergency situations is often helpful, but conducting a full fledged caseload analysis at the beginning of the Self-Study can be counterproductive. To do the analysis prior to making preliminary program decisions would be to base the analysis on information that is subject to revision. A great deal of effort may be wasted with little benefit to the program.

Professional Staff Caseload Analysis Materials

The following is a description of materials and suggestions for using them to analyze staff caseloads. These suggestions are intended to address those situations commonly found. The resulting data can be used to make staffing and other caseload allocation decisions.

Equitable Caseloads, Guidelines for Assigning Caseloads: Sample, Efficient Use of Staff, and Estimating the Need for Professional Staff

Professional Staff Member Schedule form, Completing the Professional Staff Member Schedule, and Sample Schedule: This form provides professional staff and supervisors with a method for viewing individual schedules in an objective manner. If color coded, the time allocated for various activities is easily identified.

Professional Staff Member Caseload Profile form, Directions for Completion and Sample Profile, Evaluation of Data: This form is used to collect many pieces of information regarding the nature of an individual staff member's caseload of students. Directions for completing the form and evaluating the data follow the form.

Professional Staff Member Caseload Review form, Directions for Completion, and Sample Review: This form is used to summarize the information regarding an individual staff member's caseload as entered on the "Professional Staff Member Caseload Profile." It is useful if that data is wanted on a separate sheet for each individual. If data on the group is preferred, this form may be omitted in favor of the "Program Caseload Summary", which summarizes the data of the entire staff on one sheet.

Program Caseload Summary form and Sample Summary: Pertinent information regarding each staff member's caseload, taken from the "Professional Staff Member Caseload Profile" or the "Professional Staff Member Caseload Review", is entered on this form. It is used to make a comparison of all caseloads and to assist in determining the equitable allocation of students to professional staff. Information from the summary is useful in determining numbers of professional staff needed to serve the population of students. Directions for entering information are included on the form.

Equitable Caseloads

The following are factors to consider in determining equitable caseloads. This allocation should be reevaluated periodically, especially when students enter or leave the program and at the beginning and end of the school year. The professional staff and a member of administration should be involved. This activity should be addressed from the point of view of meeting student needs, NOT as an exercise in dividing available teacher time among students.

Determine the number of hours per day worked by each teacher or O&M. This should include planning time but exclude lunch.

Assure that each student on the Master List is in need of vision-related services.

Develop proposed ranges for amount of services to students: i.e., direct service, consultative service, service to braille students, service to infants. Determine how many students there are in each category of service delivery.

Consider the amount of time required to serve each child appropriately, including instruction time, consultation time, travel time, IFSP/IEP, planning & testing, etc. One method is to: (1) determine the amount of instruction or consultation time needed according to the IFSP/IEP recommendation, (2) add to that an appropriate amount of time to include planning, IFSP/IEP's, etc.- consider doubling the amount of time for instruction and/or consultation, and (3) add time for travel to (4) arrive at an estimate of the total amount of time required for each student.

Allow time to complete other duties as assigned, (i.e., lead teacher duties and other jobs if TVI is employed part-time in another job.)

Consider the total numbers of students in need of services and their geographic locations.

Determine the number of schools to be visited; keep numbers equitable and assign one teacher per school.

The scheduling of students into a TVI's caseload should give priority to the TVI's schedule, otherwise travel time and costs are excessive and TVI time is wasted.

Allocate students to teachers based on the above referenced considerations.

Assure that staffing is adequate to meet student needs including instructional staff, related service personnel and support staff.

Guidelines for Assigning Caseloads: Sample

The staff will meet as a group to develop three maps of the region indicating:

- the location of each student
- the campuses assigned to each teacher
- the campuses assigned to each O&M

Guidelines for assigning students to teacher caseloads:

- Each TVI will work with at least one braille student, if possible, to maintain proficiency in braille and non-academic compensatory skills. This will be the first division of students.
- Only one TVI will work on a specific campus, if possible, to ensure efficient travel and allow staff members to develop relationships with other school personnel on campuses. On campuses where the students who are blind or visually impaired population is very large, more than one teacher may be assigned.
- Efforts will be made to equalize hours of service, with consideration for a mixture of direct and consultative student assignments.
- The geographic location of schools will be considered when assigning students to caseloads, to minimize travel time.
- One TVI will be assigned to the year-round schools to serve students with visual impairments in that program. The O&M staff works an extended year and can serve year-round students as needed. Staff will be assigned, as appropriate, to meet the needs of that program.
- The professional staff has proposed assigning students across age and ability levels to each teacher starting in the upcoming school year. This will allow more flexibility among district staff and is desirable from the standpoint of individual professional development. The staff acknowledged the need to share expertise with each other for mutual support as they learn about students with different abilities and needs.
- Students will be assigned to a new TVI and O&M specialist at least every three years, when possible.
- New students and referrals will be assigned by the professional staff and supervisor. The staff and supervisor will review caseloads at least quarterly.

Efficient Use of Staff

Efforts must be made to make the most efficient use of staff time. There can be many ways of using staff to meet student needs. This is an area where creative thinking may be necessary.

Ideas for efficient use of staff time:

- Reduce or eliminate any non-instruction related tasks by providing clerical and/or brailist assistance. A well trained brailist or teacher assistant can greatly reduce the amount of time professional staff spends in material preparation and follow-up to instruction.
- Evaluate whether the staff is providing appropriate amounts and types of services. If possible, reduce the frequency and increase the time per lesson, to eliminate unnecessary travel.
- Reduce amount of travel by scheduling student service efficiently. Assign caseloads geographically.
- Develop a "cancellation system" to inform the TVI of absent students.
- Conduct periodic supervisory reviews of staff schedules to assist staff in maintaining an efficient schedule.
- Consider establishing "cluster schools" to meet high intensity, short term needs of selected students, such as beginning braille students.
- Train other school personnel to perform some tasks which would enhance their capabilities and reduce the need for professional staff time. This might include instructing school nurses in vision screening of students with multiple impairments and early childhood students, and training teachers of students with multiple impairments in increasing student's functional use of vision.
- Creative use of flexible work hours and/or "comp" time can make a difference in the staff's ability to provide needed services. Examples of services often provided during non-school hours are: night orientation and mobility evaluation and instruction, and recreation and leisure programming.

Estimating the Need for Professional Staff

When all options for the most effective use of staff time have been explored, determine how best to meet identified needs and to propose caseloads and staff needed. Use of dually certified staff, employment of braillists, teacher assistants, and/or clerical staff, and staff who are trained to serve all grades and abilities are all options for efficient service provision. Use the "Proposed Professional Staff Caseloads" form to develop proposed, equitable caseloads.

Factors to consider:

- Numbers of students determined to need vision-related services, and the amount, frequency, and type of service required.
- Geographic location of students, distances to be traveled, numbers of schools to be served.
- Numbers, certifications, and abilities of existing staff and the hours they are available to serve students who are blind or visually impaired.

Completing the Professional Staff Member Schedule

Definition of terms:

Direct instruction: Instruction provided directly to the child as outlined in the student's individual educational plan. The purpose of the instruction is for the student to acquire knowledge or learn skills and assumes teacher interaction with the student. Others may participate in the instructional session, but the student must be present and be the focus of the teacher's activity. Lesson plans are completed for each instructional session, in accordance with district requirements.

Consultation Only: This refers to services provided to students who do not usually receive direct instruction from the professional staff. Some instruction may occur, generally to model procedures for other school personnel, but instruction is not the main purpose of consultation. Services may include: collaborative assessment and planning, provision of materials and technology, etc. For a more comprehensive list see the sample Roles and Responsibilities in the *Guide*.

Activities in Support of Instruction: This term is used primarily to indicate those activities required of the professional staff to support instructional services to students. These activities may vary in relation to each caseload but may include: lesson planning; ARD meetings; preparation of materials; acquisition, familiarization, and distribution of technological devices; staff development; and team participation.

Travel: Time spent traveling to or from students or in the course of performing other job related tasks.

Lunch: Daily lunch period.

Completing the form:

Entering information: The staff member should enter information regarding time spent on various activities throughout the week. If their schedule varies markedly from one week to the next it may be preferable to complete more than one schedule.

Time increments: Each line on the form represents a quarter hour increment of time. Four lines represent an hour. Enter any appropriate information into the space, such as: student name, location of service, purpose of visit.

Color coding: Color coding is a tool that is useful in analyzing staff time usage and requirements. All forms should be color coded uniformly so comparisons can be made. Directions for color coding are written on the form.

Professional Staff Member Caseload Profile:

Directions for Completion

Completion of this form provides the Work Group with a format for analyzing and comparing caseloads. This form may be completed by TVIs, O&M specialists and paraprofessionals prior to the meeting on caseload analysis. **Names of referrals should be added at the end of each staff members' caseload list and clearly marked as such.** Information requested includes:

Staff Name: Each staff member should complete a separate form listing students served.

Number of Schools Served: Enter the total number of schools or sites visited by this staff member, including home visits to infants.

Number of Hours in Work Week: Enter the number of hours in the work week, excluding lunch.

Date: Always enter the date this form is completed, as caseload changes can be tracked by looking for the most current date.

Student Name: List names alphabetically, last name first.

School/Grade: Enter the name of school and grade level of each student.

Direct/Consult: Indicate if student receives direct instruction or consultation only.

% Regular/Special Education Setting: Indicate the percentage of time spent in regular and special education settings. Example: 80% regular, 20% special education.

Hours/week per IFSP/IEP: Indicate the number of hours of service (direct or consultation only) to be provided to each student **as per IFSP/IEP decision**. Include the frequency of service, if more than once a week. Example: 1 hour 3x/week = 3 hours/week. Translate monthly, semester or yearly hours into a weekly equivalent for the sake of comparison. Example: 1 hour per month is written 15 minutes per week. These hours should not include any teacher activities in support of instruction (planning, preparation, IFSP/IEP meetings, inservices, etc.).

NOTE: For the sake of analyzing the time commitment required to meet students needs, as determined by IFSP/IEP committee decision, it is requested that times for service be calculated on a weekly basis. This is not to suggest that all students should be seen weekly. Whatever the decision of the IFSP/IEP committee, that time and frequency of services should be provided.

This is an aid to converting times from monthly to weekly.

- 30 minutes/month = .12 hours/week (7.5 minutes/week)
- 1 hour/month = .25 hours/week (15 minutes/week)
- 2 hours/month = .50 hours/week (30 minutes/week)
- 3 hours/month = .75 hours/week (45 minutes/week)
- 4 hours/month = 1 hour/week (60 minutes/week)

Hours per Week of Activities in Support of Instruction: Estimate the amount of time needed to deliver the services mandated by IFSP/IEP Committee decision. Consider the time commitment for the staff member to fulfill all the roles and responsibilities appropriate to each staff position. Before the professional staff completes these forms, consider a group activity in which a list is made of all possible activities in support of instruction. The results will be more useful if the entire staff is using the same list of activities.

Hours of Travel Per/Week: Estimate the amount of time spent weekly traveling to and from students and to fulfill other professional responsibilities.

Areas of Instruction or Consultation: Indicate the focus or purpose of the direct or consultative services.

Change Needed/Amount or Type of Service: This column may be left blank prior to the QPVI group meeting, to be completed after group discussion of each student. When completed, it should reflect any change needed in the amount or type of services the student currently receives. Enter the addition or deletion of time or frequency of services in weekly terms. Examples: +1hour 2x/week or -30 minutes 1x/week. By indicating only additions or deletions in this column the task of arriving at a grand total will be simplified (See Sample)

Braille/Dual: Enter "B" if a student is a braille or pre-braille student. Write "D" for students performing in print and braille.

O&M: Indicate in this column those students receiving orientation and mobility instruction.

The last row on the page provides space for totaling the figures in the non-shaded columns. These should represent numbers of students or numbers of hours per week, depending on the column.

Professional Staff Member Caseload Profile:

Evaluation of Data

Each piece of information entered on the caseload profile form is considered in developing an overall picture of the status of staff caseloads. The following are suggestions for analyzing that information.

Staff Name: Self-explanatory

Number of Schools Served: Consider how many schools each staff member serves. For each school served, she/he must develop rapport with the principal, teachers, and other staff. If direct instruction is involved, a worksite must be identified in each school. The number of schools served also has implications for the amount of travel time required. Does each staff member serve a roughly equal number of schools?

Number of Hours in Work Week: How many hours are available for the staff member to complete their work? Is part-time staff expected to fill do a full-time job? The thirty minute lunch allowed by the district or program should not be included in this total.

Date: Date each form so that changes over time can be tracked.

Student Name: It is important to have the name of each student served by the staff member completing the form

School/Grade: How many schools does the staff member serve? Is there equity among staff in the amount of travel required for their caseloads? What grades are served? Do all staff members serve all levels or do they allocate caseloads by grades? The answers to these questions have implications for service delivery, efficient use of staff, and scheduling for efficient travel.

Direct/Consult Only: The number of direct and consultation only students served by each staff member is considered for a number of reasons. Direct students require more time and effort than those receiving consultation. Is the caseload all direct or all consultation? If so, is that appropriate? How do staff members decide which students will receive direct and which will receive consultation?

% Regular/Special Education Setting: The student's placement in a regular or special education setting impacts the teacher's caseload. Students in regular education, especially those on the secondary level, generally must function within time and performance constraints. This has implications for what the student is taught by the TVI and the rate at which it must be learned. The student's performance must be comparable to his sighted peers. A student's placement for all or part of the day in special education may signify that they have needs beyond those attributable to a visual impairment. What are the student's additional needs and does the professional staff member feel prepared to address them? If a student spends the majority of time in special education, are compensatory skills taught by other special education staff?

Hours/week per IFSP/IEP: Consider the amount of time needed to provide adequate services to each student. Does time allocated appear appropriate? Is more or less time needed. Are the amount and frequency of services adequate to effect change/learning?

Hours per Week of Activities in Support of Instruction: It is important to note if sufficient time is included in each staff member's schedule to fulfill the roles and responsibilities of their position as it relates to each student. A completed "Professional Staff Member Schedule" is useful in analyzing staff allocation of time. If insufficient time is spent in planning, preparation, staff development, participation on teams, and other duties critical to the maintenance of a program of effective services to students, then good services to students cannot be provided.

Hours of Travel Per Week: Excessive travel can seriously detract from instructional time. A plan for efficient travel may be helpful.

Areas of Instruction or Consultation: What is the purpose of the staff member's service to the student? Is it appropriate? How are the student's needs identified? Are academic and non-academic compensatory skills addressed?

Change Needed: Amount or Type of Service: Are any changes needed in the amount or type of services the student currently receives? Consider student needs and not amount of staff time available.

Braille/Dual: The number of braille and dual media students served by each staff member is important to note. Braille students generally require a great deal of staff time and effort. This should be accounted for in scheduling time to adequately serve each student. In analyzing caseloads determine if any staff member(s) serve all the braille students, or if braille students are divided equally among all staff. It may serve the program better to have all staff members working with all types of students.

O&M: Which students are receiving O&M? Do all students receive evaluations and services as needed, or are services limited to cane travelers? Are services provided to young students and students with multiple impairments? What type of services are provided to secondary students in support of the compensatory skills and transition curricula?

Totals: Total each column that is not shaded. In the Direct/Consult column enter, for example, 5D/3C. In the % Regular/Special Education column count students in the placement where he/she spends more than 50% of his/her time. It is important that all hours be stated in weekly terms, even if delivered monthly or by semester. The total in the Change Needed column should reflect any additions or deletions that will be required of the current hours, if the changes are made. This, then, may be a positive or a negative number. In the Braille/Dual column, indicate, for example: 3B/2D.

Professional Staff Member Caseload Review

Directions for completion

This form is included for those who would like to document each staff member's caseload on a separate sheet. Note: The Program Caseload Summary contains the same information, but lists all staff members on the same form. Use the information from the Professional Staff Member Caseload Profile to complete this form.

Staff Name: self-explanatory

Position: Enter the position for which the analysis is being constructed. If a staff member provides more than one type of service, complete a separate form for each service. Each form should indicate the percentage of staff time allocated to that service. For example: O&M specialist 50%, TVI 50%.

Number of Schools Served: Enter the number of schools visited by the staff member to deliver services to students, including home visits for infants.

Number of Students Served: Enter the total from column 1 of the "Professional Staff Member Caseload Profile." This should reflect the total number of students served by this staff member.

Number of Braille/Dual Students: Enter the total from column 10 of the "Professional Staff Member Caseload Profile." For example: 3 braille/dual students.

Date: Enter the date the form is completed.

Time commitment per caseload

Line (a) **Hours per Week of Direct Instruction:** Indicate the number of hours of direct service provided on a weekly basis and the number of students served.

Line (b) **Hours per Week of Consultation Only:** Indicate the number of hours of consultative services provided on a weekly basis to "consultation only" students; those students who do not receive direct service. Enter the number of students receiving consultative services.

Line (c) **Hours per Week of Activities in Support of Instruction:** Estimate the amount of time spent weekly on those activities necessary to support the provision of both direct and consultant services to students. These activities in support of instruction should include the many activities outlined in the roles and responsibilities of the staff member. Time for planning, preparation, meetings, IFSP/IEPs, evaluations, liaison with other school personnel and outside agencies, and lead teacher activities should all be reflected in this number. A rule of thumb is to double the amount of direct or consultation time the student is receiving. For example, if a staff member is providing 14 hours of ARD mandated services to students on a weekly basis, estimate 14 hours a week of additional staff time to perform those essential tasks listed in the staff member's roles and responsibilities. Please note that, in the case of TVIs, less time in support of instruction is required if braille transcriber or instructional assistant time is available to them.

Line (d) **Hours per Week of Travel:** Enter the amount estimated in the "Professional Staff Member Caseload Profile."

Line (e): **Total Time Commitment/Week:** Add the numbers on the preceding four lines to arrive at this total. This figure should reflect all the time that is needed to provide all services to students, and includes travel time. Time for lunch should be excluded.

Line (1) **Total Number of Hours in the Work Week:** Enter the number of hours the staff member is employed to perform the job in question. This figure should exclude time allotted for lunch.

Line (2) **Time Commitment per Week in Service to Students and Work Related Travel:** Repeat the figure from line (e) above and subtract it from the number of hours in the work week.

Line (3) **Number of Hours Over/Under Hours in Work Week:** Subtract line (2) from line (1) to arrive at this number. This figure indicates if the time commitment of the staff member's caseload is more or less than the time allotted during the work week. If the number on line (3) is a positive number, there is time left in their schedule, which can be allocated to other students of duties. If the number on line (3) is negative, that indicates that the time commitment for their caseload exceeds their work week. In that case, reallocation of duties or students should be considered. Please note that these totals are only as accurate as the input figures. If a high level of accuracy has been maintained, the results should provide a good idea of the time needs of the caseload and staff needs of the program.

Changes Needed, Plans/Concerns: Enter any major changes in the caseload, so the impact can be evaluated. Are there any particular plans or concerns regarding the caseload and how the students are currently served?

Proposed Professional Staff Caseloads

DATE:

COMPLETED BY:

Staff Name and Position	# of students direct & consult	# of schools served	# hours per/wk direct services	# hours per/wk consult. services	# hours per/wk in supp. of inst.	# hours per/wk of travel	# hours in work week	total # hours over or under
# Braille/Dual Students	direct: consult:							
# Braille/Dual Students	direct: consult:							
# Braille/Dual Students	direct: consult:							
# Braille/Dual Students	direct: consult:							
# Braille/Dual Students	direct: consult:							
# Braille/Dual Students	direct: consult:							
# Braille/Dual Students	direct: consult:							
TOTALS: # Braille/ Dual Students	direct: consult:	2	3	4	5	6	7	8
							8	9

Professional Staff Member Schedule

Complete a schedule for a typical week. Color code the completed form: Direct instruction-blue, Consultation only-pink, Activities in support of service-green, Travel-yellow, Lunch-orange. Analyze time spent as it relates to service delivery needs. Developed by C. Arseneau-Mason, Austin ISD.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
7:30 - 7:45					
7:45 - 8:00					
8:00 - 8:15					
8:15 - 8:30					
8:30 - 8:45					
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4:15 - 4:30					

Completing the VI Staff Member Schedule

Definition of terms:

Direct instruction: Instruction provided directly to the child as outlined in the student's individual educational plan. The purpose of the instruction is for the student to acquire knowledge or learn skills and assumes teacher interaction with the student. Others may participate in the instructional session, but the student must be present and be the focus of the teacher's activity. Lesson plans are completed for each instructional session, in accordance with district requirements.

Consultation Only: This refers to services provided to students who do not usually receive direct instruction from the VI staff. Some instruction may occur, generally to model procedures for other school personnel, but instruction is not the main purpose of consultation. Services may include: collaborative assessment and planning, provision of materials and technology, etc. For a more comprehensive list see the sample Roles and Responsibilities in the *Guide*.

Activities in Support of Instruction: This term is used primarily to indicate those activities required of the VI staff to support instructional services to students. These activities may vary in relation to each caseload but may include: lesson planning; ARD meetings; preparation of materials; acquisition, familiarization, and distribution of technological devices; staff development; and team participation.

Travel: Time spent traveling to or from students or in the course of performing other job related tasks.

Lunch: Daily lunch period.

Completing the form:

Entering information: The staff member should enter information regarding time spent on various activities throughout the week. If their schedule varies markedly from one week to the next it may be preferable to complete more than one schedule.

Time increments: Each line on the form represents a quarter hour increment of time. Four lines represent an hour. Enter any appropriate information into the space, such as: student name, location of service, purpose of visit.

Color coding: Color coding is a tool that is useful in analyzing staff time usage and requirements. All forms should be color coded uniformly so comparisons can be made. Directions for color coding are written on the form.

Note: *It may be preferable to show the sample to staff rather than provide each person with a copy.*

Professional Staff Member Caseload Profile

CONFIDENTIAL STUDENT INFORMATION

Staff Name: _____

Date: _____

Number of Schools Served: _____

Number of Hours in Work Week: _____

Student Name	School & Grade	Direct/Consult only	% Reg Sp. Ed. Setting	# Hours/Week ARD	# Hours/Week Activities in Support of Instruction	# Hours of Travel/Week	Areas of Instruction or Consultation	Change Needed: AMT or Type of Services	BRL/Dual B/D	O&M (√ = yes)
Totals:										