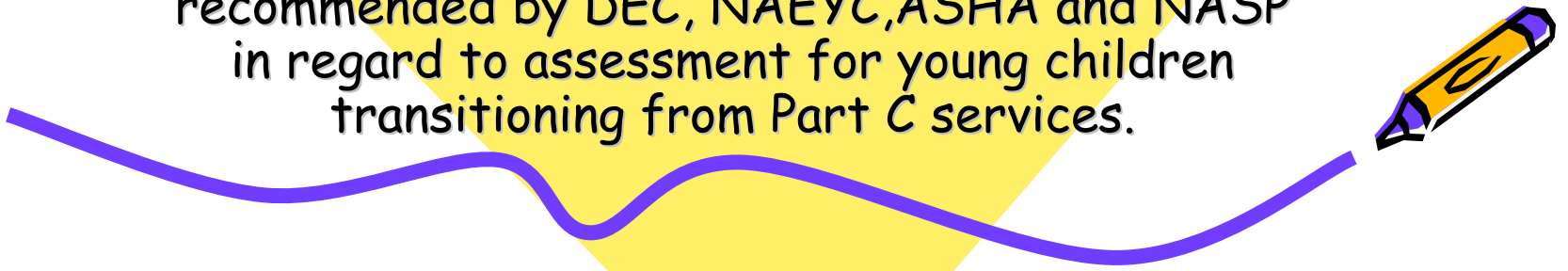




Authentic Assessment

This session will briefly go over the practices recommended by DEC, NAEYC, ASHA and NASP in regard to assessment for young children transitioning from Part C services.



Business As Usual

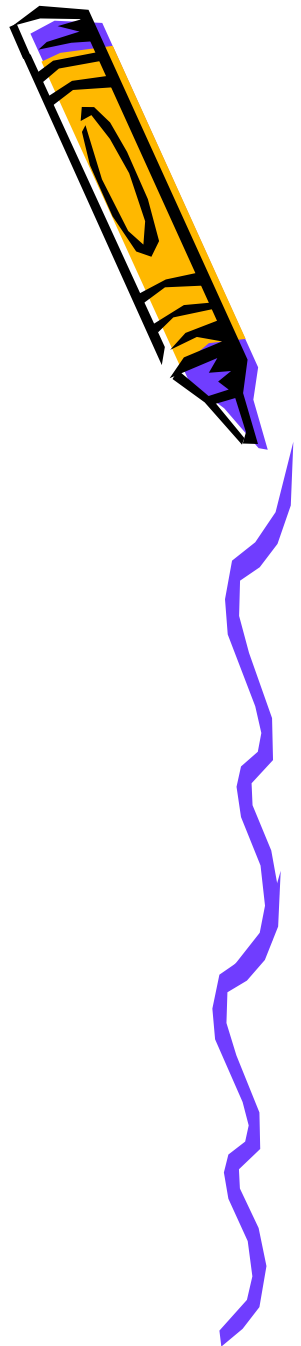


- Settings/services have changed in the last 20 + yrs.
- Minimal change in assessment practices
- Yet the link between assessment and services is critical.
- Extremely sensitive issue in regard to helping parents understand their child's needs
- Erroneous thinking: "I know more than you" and "More services =more progress", focusing on deficits, and getting tied up with previous medical/clinical diagnosis.
- Five basic areas: Physical/Motor, Adaptive/Self-Help, Social-Emotional, Language & Cognition.
- Forgotten areas: learning styles & temperament



Assessment Model

- Restrictive methods
- Contrived developmental tasks
- Various professionals,
- Separate sessions
- Floor/table with parent observing passively
- Outcome used for narrow purposes of classification & eligibility



Authentic Assessment



- Authentic assessment is assessment of the young child's skills in the real life contexts of family, culture and community, rather than in isolation. Results reflect the "whole child".
- Not deficit driven, looks at emerging skills
- Assessment is conducted and interpreted within the framework of how the child functions within these systems. Uses ecological & ethnographic approaches as well as more formal assessment methods.
- Research shows that it yields more valid assessment results.



The Team



- The authentic assessment of infants/toddlers requires specialized training and skills beyond the training and skills needed for older children. Team members should include individuals who have the expertise necessary to assess the unique needs of the young child suspected of having a disability.
- Conducted by a multidisciplinary team, including multiple sources of information, multiple approaches to assessment, multiple settings in order to yield information that links assessment to services, programs and outcomes.



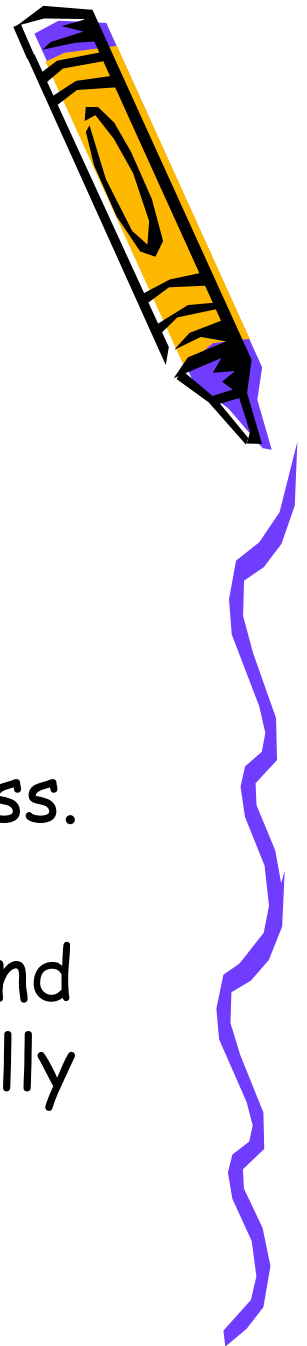
Team can observe and analyze a wide range of tasks/skills. Provide greater sampling of behaviors in real and natural contexts.



Decisions

- Teams make multiple decisions including whether or not the child has a disability or delay, is the child eligible for services, whether or not the child needs services and what type of services.
- Assessment is a flexible collaborative decision making process in which teams of parents and professionals repeatedly revise their judgments and reach consensus about the changing developmental, educational, medical and mental health service needs of young children and their families. (Bagnato and Neisworth, 1991).





- Assessment is a shared experience between families and professionals. Assessment teams should implement a child- and family-centered team based, and ecologically valid assessment process. This process should be designed to address each child's unique strengths and needs through authentic, developmentally appropriate, culturally and linguistically responsive assessment methods.



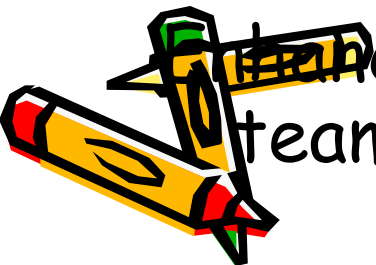
Parents as Partners

"Parents as Partners": the full integration of families in the assessment process.

Family members are equal and contributing team members.

Assessment team gains valuable information when they inquire about the child's preferences for activities, materials, play partners, schedules, detailed health and developmental information.

Assessment team observations and validate team's findings



Parents as Professionals



- Assessment process must be designed to facilitate family inclusion at multiple levels taking into account family values, culture and linguistic preferences
- More than asking questions, or going over questionnaires, and developmental profiles
- Asking parents to provide "hands on" accommodations, suggestions for activities, materials observing how the parent engages the child, setting up play scenarios



Assessment Process



- The assessment process should be initiated through a problem-solving model that seeks to answer specific questions about the child.
- Assessment process begins with conversations with staff and family members.
- Team should provide opportunities to gather information from multiple settings and sources using multiple methods/measures so they can support the child and family's participation in meaningful and authentic routines and





- The evaluation must be sufficiently comprehensive to identify all of the child's special education and related services. The child must be assessed in all areas of suspected disability.
- A variety of assessment tools/strategies must be used to gather relevant functional/developmental information about the child, including information provided by the parent and information related to enabling the child to participate in appropriate activities.



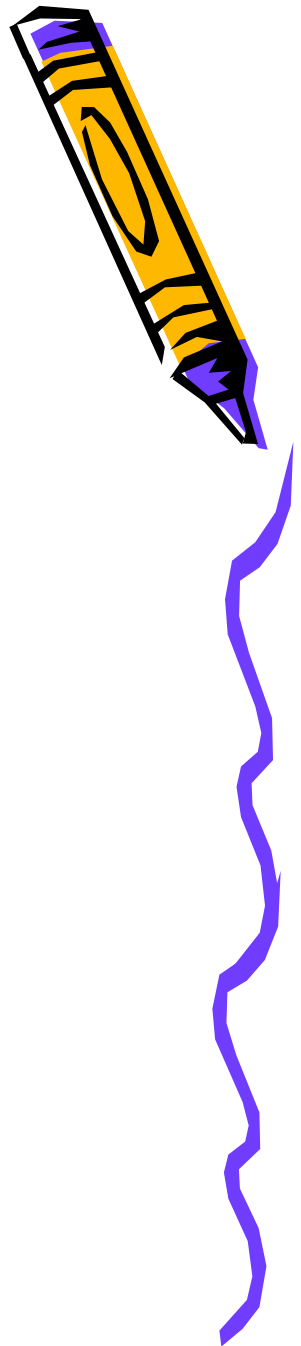


- Categorical identification of infants, toddlers, and young children is ineffective in meeting the special needs of young children. Research/practice in ECE assessment indicates that issues of technical adequacy are more difficult to address with young children. Tools are often inadequate and less predictive and often promotes the identification of isolated deficits



Tools

- Assessment team should select tools/methods that allow family members to participate to the greatest extent possible.
- Record review, developmental history, interviews, observations, checklists/rating scales and tests.



Validity

- Tests may be norm referenced, criterion referenced or curriculum based, however, the most reliable outcomes for young children are generated when these tools are used within an authentic assessment model. Data gathered from more traditional methods is not as effective in providing adequate information for developing IEP's, planning services or goals.



Resources



NASP Position Statement: Early Childhood Assessment

DEC Position Statement: Developmental Delay as an Eligibility Category,
Promoting Positive Outcomes for Children with Disabilities:
Recommendations for Curriculum, Assessment, and Program Evaluation

DEC Recommended Practices: A Comprehensive Guide for Practical Application
(Sandall et.al)

Committee on Developmental Outcomes and Assessment for Young Children:
National Research Council of the National Academies: Early Childhood
Assessment: Why, What and How?

Authentic Assessment as an Approach to Preschool Speech-Language
Screening: Schraeder, Traci; Quinn, Michelle; Stockman, Ida; Miller, Jon
(1999).



More Resources



- Transdisciplinary Play-Based Assessment-2 (TPBA-2) by Toni Linder
- Assessing Infants and Preschoolers with Special Needs- 3rd. Edition by Mary McLane, Mark Woolery, Donald B. Bailey
- Authentic Assessment for Early Childhood Intervention: Best Practices by Stephen J. Bagnato
- Running Head: Authentic Assessment for Early Intervention Eligibility: Marissa May, Stephen Bagnato, Catherine Lehman, Children's Hospital of Pittsburgh, University of Pittsburgh, U.S. Dept. Of Education. OSEP- describes efficacy of various assessment measures such as: ABAS, DOCS, Carolina Curriculum for Preschoolers with Special Needs

