New Mexico Early Childhood Guide for Inclusion Birth-5
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“We are all different in many ways, but sometimes children are afraid to be different because they want to be like the people they love.

Some children may even come to feel there's something wrong with being different. That's why grown-ups need to help children learn that being different is part of what makes them special to the people who love them.”

-Fred Rogers
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Introduction to the Guide for Inclusion
Don’t let what you can’t do interfere with what you can do.

-Gwendolyn Hunt
New Mexico Partnership Guide for Inclusion supports the alliance among early care and education practitioners and administrators in working together to assist young children under the age of five in attaining their joint goal of positive developmental outcomes for children.

It provides a roadmap for direct service delivery partners and administrators in building more coordinated service delivery for children.

This guide can be used by the partners to:

- Communicate effectively with each other and with families.
- Work together in planning and implementing for Individual Family Service Plans (IFSPs) for children birth to three and Individual Educational Programs (IEPs) for children age three to five.
- Work together to support a child’s access and full participation in center-based care, activities, and routines.
- Support individual children and families in developing skills to be active participants in their community.
- Work together to build infrastructure and systems needed to support inclusive services.
“People acting together as a group can accomplish things which no individual acting alone could ever hope to bring about.”

-Franklin D. Roosevelt

**PARENTS:**
The caregiver of the child including guardians, foster parents, grandparents and others who make educational decisions on behalf of the child.

**SERVICE PROVIDERS:**
Anyone providing services from an IFSP or an IEP including Special Education Teachers, Developmental Specialists, Speech and Language Pathologists, Occupational Therapists, Physical Therapists, Family Service Coordinators, or anyone providing specialized services for children and families.

**CLASSROOM STAFF:**
Anyone providing early care and education services including Home Childcare Providers, Lead Teachers, Pre-K Teachers, Early Head Start/Head Start Teachers, Preschool Teachers and other staff working in the classroom environment.

**CLASSROOM:**
The early care setting including an Early Head Start/Head Start Classroom, Home Childcare Provider Setting, Preschool Classroom, or other early care setting.
The inclusion of young children with Individual Family Service Plans (IFSPs) or Individualized Education Programs (IEPs) in early care and education settings requires assistance from a variety of agencies, disciplines, and partners. Partners share responsibility for program implementation and for supporting and guiding a child’s development.

This guide offers an approach to supporting inclusion that creates opportunities for communication and collaboration in joint service delivery. It has value for anyone interested in being a more effective early childhood service delivery partner.

This guide is divided into different sections.
Unlike other guides, it is not necessary to start at the beginning and move sequentially through the document. A user may choose any section and apply the contents of that section to begin the process of building the inclusive partnership or to meet an immediate need.
Understanding Inclusion
Each child is the subject of rights, first and foremost Possessing the right to be respected and valued in his or her own identity, uniqueness, difference, and in his or her own rhythms of growth and development.

-Carla Rinaldi, “Re-imagining Childhood”
Over the last 30 years, legislative mandates have shaped policies and practices that support full participation of and children in early care and education settings. Inclusion includes the various ways we send the message that “any child is welcome in my program”.

Planning for a child’s full participation in an early care and education center requires an integrated developmental approach based on interventions that take place in the context of daily care, routines, and activities.

Interactions with caregivers familiar with the child, provide a great depth of understanding of his/her growth and learning across developmental domains. These areas of development are interconnected and viewed in relation to each other to present a complete picture of the child.
Inclusion Principles

Inclusion is based on the following principles:

- All children need to feel valued and have a sense of belonging.
- Every child has a unique set of gifts that he/she contribute to the group.
- Supports and services must be family centered.
- All learning takes place in the context of relationships.
- The learning environment and opportunities children receive there are critical for success.

In inclusive settings, these principles are recognized and valued.

All children are welcomed regardless of ethnicity, culture, language, economic status, learning style or ability. Children are accepted for who they are and are encouraged to be all that they can be. They learn as they participate in meaningful activities with high expectations for their success.

Inclusion is supported by vision, teamwork, flexibility, training, and planning.

Every child benefits from inclusion.
The definition, values, and views related to early childhood inclusion have varied over time and across states and programs. The Joint Position Statement (2009) of the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC) highlights three key principles of early childhood inclusion to be utilized collectively to identify high quality early childhood programs and services:

**ACCESS:** Providing access to a wide range of learning opportunities, activities, settings, and environments is a defining feature of high quality early childhood inclusion.

**PARTICIPATION:** Some children will need additional individualized accommodations and supports to participate fully in play and learning activities with peers and adults.

**SUPPORTS:** An infrastructure of systems-level supports must be in place to strengthen the efforts of individuals and organizations providing inclusive services to children and families.
Inclusion Partnership in the Classroom
“He drew a circle that shut me out —
Heretic, rebel, a thing to flout.

But love and I had the wit to win:
We drew a circle that took him in.”

- Edwin Markham
Inclusion of young children with Individual Family Service Plans (IFSP) or Individualized Education Plans/Programs (IEPs) in early care and education settings requires services from a variety of agencies, disciplines and partners. Partners share the responsibility for program implementation and for supporting and guiding a child’s development.

Effective partnerships happen in context of relationship, include ongoing and open communication, and seek to understand the individual perspectives of the partners involved. Partnerships involve interagency coordination which can:

- Enhance the effective use of existing staff and services.
- Allow for efficient use of resources.
- Lessen duplication of services.
- Avoid fragmentation.
- Support inclusive participation of child in all activities.

The effectiveness of the partnership has a positive effect on child growth and progress and parent support. Each partner has a unique role and makes valuable contributions to the team. Although parents may not need to be directly involved in every step of the process, it is important to keep them engaged and to always consider how they can be included in discussions, meetings, communication, planning, and strategy development for their child.

"when you go out into the world, watch out for traffic, hold hands, and stick together.”

- Robert Fulghum
Effective relationships are the foundation of all successful partnerships. Partners who work well together support each other in showing mutual respect, acceptance, safety, and trust.

Healthy partners engage in ways that honor and seek to understand each other’s perspectives, draw on the experience and knowledge of all partners, and commit to working together to create successful outcomes for children and families.

The collaborative nature of partnerships requires ongoing and open communication with a willingness on the part of each individual to be fully present, to listen with an open mind, putting aside a personal agenda, and to commit to keeping the work focused on the family and child.

Relationship-based partnership is demonstrated in the respectful interactions among service providers, classroom staff and parents and their children.

**BUILDING TRUST**

- Relationships take time to build.
- Relationships require continuous nurturing to maintain.
- Communication is an essential component of trust building.
- Remember that acronyms may be confusing to partners; use them only when you know they have meaning to everyone.

The time it takes to understand each other’s words and terminology promotes clear communication.
**Early Care & Education Classroom Partners List**

**Early Childhood Special Educator:** A state licensed professional who is educated in special education and early childhood education and who understands assessment data, goal setting, and curriculum planning and implementation of the IEP/IFSP for preschool children with special needs.

**Developmental Specialist:** A certified professional who provides quality early intervention services and supports the ability of families and other primary caregivers to implement activities outlined in the IFSP for families of eligible infants and toddlers.

**Family Service Coordinator:** A person, employed by an EI agency, who is responsible for coordination of all services and supports listed on the IFSP for eligible infants and toddlers and their families and ensures that they are delivered in a timely manner.

**Speech-Language Pathologist (SLP):** A licensed professional who specializes in communication disorders and eating/swallowing difficulties and has knowledge of communications devices.

**Occupational Therapist (OT):** A licensed professional who specializes in supporting and promoting the development of functional motor skills of infants, toddlers, and preschoolers who have or are at risk for developmental delays and their families or other caregivers in the home, classroom or other natural environments.

**Physical Therapist (PT):** A licensed professional who is primarily concerned with the remediation of impairments and disabilities for the promotion of mobility, functional ability, quality of life and movement.

**NMSBVI (Vision Specialist):** A professional who is trained as a teacher of the visually impaired and/or as an orientation and mobility specialist who has specialized skills in the field of early childhood and serves children in their natural environments.

**NMSD: (Deaf & Hard of Hearing Specialist):** A professional who supports children, age birth to six who have been diagnosed as deaf or hard-of-hearing and are eligible for services, by finding strategies, services, and technologies that will best support their development.

**Classroom Teacher:** An individual who has knowledge of classroom management and early childhood curriculum and is responsible for their implementation in the classroom setting including incorporating individualized strategies for each child as needed.

**Educational Assistant:** An individual who supports the teacher in the classroom.

**Lead Teacher:** An individual, typically in a child care or Head Start classroom setting, who is responsible for the implementation of lesson plans and classroom management.

**Disabilities Manager:** An individual in a Head Start/Early Head Start agency who acts as liaison between special education service agencies and his/her organization to support staff in implementing the IFSP/IEP requirements for young children with special needs enrolled in his/her programs.
Service Providers and Classroom Staff

For service providers and classroom staff who are not in situations where inclusion is being implemented throughout the system, there are still options for practicing inclusion.

This section offers a road map broken into three parts for small-scale inclusion efforts that can be practiced within a classroom. By building strong partnerships and by practicing good communication, service providers can immediately begin inclusion efforts that can be further developed and improved over time.

Before service providers and classroom staff begin their work together, it is suggested that, at the very least, they meet to develop a Classroom Partnership Agreement outlining the unique and individual details of their partnership and working relationship in serving an individual child. The tools on the following pages present considerations and points of negotiation in a question format.

The Classroom Partnership Agreement is not simply a form to be completed, but delineates the process through which partners support the young children with whom they work. This is an interactive and formal experience that includes a conversation about how the partners will work together and meet the agencies’ and individual/s needs and requirements.

The Classroom Partnership Agreement is a fluid and flexible document that is revisited and, at times revised, to address the partnership as needs are revealed. A successful Partnership Agreement process results in the development of relationships among partners that are trusting and respectful.

To develop your Classroom Partnership Agreement, service providers and classroom staff should meet to discuss each of the following items. Capture the decisions on the Classroom Partnership Agreement Template found on the next pages and use the document to formalize the classroom partnership process and maintain a record of your commitment to working together. Once the written Classroom Partnership Agreement is completed (multiple pages), each partner should receive a signed and completed document that can be referred to as needed.

Parental Consent

To begin, ensure that each agency has a signed parental consent form on file for each child who will be included in the discussion. The consent forms will allow Service Providers and Classroom Staff to share the children’s confidential information which is needed for planning and implementing services.
1. Absences/Missed Appointments

- How and when will Service Providers and Classroom Staff communicate with each other about the absence of either the child or the Service Provider?
- How and when will Service Providers and Classroom Staff communicate with each other if an appointment will be cancelled?
- What is the process for rescheduling?
2. Schedules and Calendars
- How and when will calendars of operation and holiday schedules be shared?
- How and when will the daily schedule of the classroom be shared?
- How and when will service delivery schedules be shared?
- What is the flexibility in changing daily schedules or service delivery schedules to support meeting the partner's needs?
- How and when will any needed changes, revisions or modifications to the schedules be shared?
3. Check In
- What is the process for visitors checking in and out of the building?
- Are there any sign in and sign out requirements in the classroom?
4. Communication

- When and how will the partners communicate and share information with each other?
- What will the partners do to keep the lines of communication open in ways that strengthen the relationship and partnership?
- How will the partners give each other constructive feedback in ways that will be useful and not perceived as criticism?
- How will parents be involved as team members in the communication process created?
- How will information be shared with parents?
- What is the process for debriefing others (supervisors, assistants, other partners)?
5. Planning

- How and when will the partners plan together to support the full participation of the child in daily routines and activities?
- How and when will the partners plan together to support the child in being able to fully access the indoor and outdoor environments, materials, and all planned activities?
- How and when will the partners plan strategies for addressing IFSP/IEP goals?
- What will be the ground rules about scheduling meetings, attendance, promptness, level of participation, decision making, code of conduct, and rotation of chores needed?
- What are the measure(s) of success for child outcomes/goals? How do members of the team contribute information?
- What are the roles of the Classroom Staff and Service Delivery Staff in insuring lesson plans are appropriate for children with IFSPs/IEPs?
- How will strategies be shared with parents for follow-up at home?
6. Services in the Classroom

- When the Service Provider is providing services, what will be the involvement of the Classroom Staff with the child?
- What will be the role of the Service Provider in the classroom?
- How will the Service Provider support the full inclusion of the child in the routines and activities while providing services for the child?
- How will the Service Provider support the Classroom Staff in understanding and implementing the intervention strategies throughout the day?
- How will the Classroom Staff support the Service Provider in understanding the needs of the child as a member of the classroom community during service delivery?
- How will the child be able to play and interact with his peers in the classroom?
7. Collecting Information on the Child’s Progress

- What data and assessment information needs to be collected by each partner?
- How often and when will this information be collected?
- What are the methods and assessment tools that will be used by each partner?
- Can these be combined to support the needs of all partners?
- If they are combined, what will be the role of each of the partners in collecting the information?
- If they are not combined, what will be the role of each partner?
8. Record Keeping
- What are the record keeping requirements of each partner?
- What will be the role of each of the partners in record keeping?

9. Reporting on a Child’s Progress
- How and when will partners meet to collaborate on documenting a child’s progress?
- How and when will partners meet with parents to report progress?
- What will be the role of each of the partners in the reporting process?
Part 1: CLASSROOM PARTNERSHIP AGREEMENT

10. Disagreement
   - What will be the process for jointly resolving any disagreements/misunderstandings that may arise?
   - What is the chain of command at each agency?

11. Other
   - Is there any other area that needs to be addressed in the Classroom Partnership Agreement?

General Agreement Maintenance

Date: ________________________________
We agree to follow the terms of this agreement and meet to review it no later than _______________________________.

date

Signature

Title

General Agreement Maintenance

Date: ________________________________
We agree to follow the terms of this agreement and meet to review it no later than _______________________________.

date

Signature

Title
Part 2: Webbing Framework

The next step in the process requires Service Providers and Classroom Staff to meet together to plan the implementation of the IFSP/IEP for each child in the inclusive environment.

The following charts present samples of Webbing Frameworks that are designed for use by Service Providers and Classroom Teachers to support working together to individualize for each child. One or more outcomes/goals/objectives taken from the child’s IFSP/IEP are identified and strategies are developed for use in the classroom environment, routines and activities. These ideas which support multiple opportunities to work on achieving the outcomes/goals are documented on the framework form.

The model of integrating services into classroom routines and activities with typical peers can be more effective than traditional “pull-out” therapy models because it:

- Provides opportunities for children to learn in the context of functional routines and activities that are familiar and predictable.
- Provides opportunities to work on outcomes/goals/objectives during naturally occurring events rather than in contrived situations practicing isolated skills.
- Offers multiple daily opportunities for practicing functional skill development and learning.
- Offers opportunities for peer involvement and for children to learn from each other.
- Encourages social skill use.
- Enhances team collaboration.

The classroom teacher would not provide early intervention, special education or therapeutic services, but would use the Webbing Framework as a guide to plan multiple opportunities throughout the child’s day for him/her to practice skills in meaningful ways.

The service provider would not be using a “pull-out” model of service delivery, but would integrate services into classroom routines and activities that the child naturally participates in throughout the classroom day.

On the following pages, you will find:

The Webbing Framework for Infants and Toddlers. In the center of the web is space to include information about the IFSP outcome(s) that is the focus. The web branches out to the various routines, activities or environments that are typical for infants and toddlers. It includes such activities as Floor Time, Diaper/Potty, and Feeding/Eating. Service Providers and Classroom Teachers work together to list and record activities in each box on the web that might support the child in achieving the outcomes.

The Webbing Framework for Preschool. In the center of the web is space to include information about the IEP goal(s) and/or objective(s) that become the focus. The web branches out to various routines, activities or environments that are typical in preschool classrooms. It includes such activities as Dramatic Play, Large Group, and Writing Center. Service Providers and Classroom Teachers work together to list and record activities in each box that might support the child in achieving the identified goals or objectives. A completed sample of the Webbing Framework for Preschool is included as a resource for partners to use as they plan.
Part 2: Webbing Framework for Infants/Toddlers

- Feeding/Eating
- Outdoor
- Singing/Fingerplays
- Language
- Floor Time
- Cuddle Time
- Arrival
- Getting Ready for Nap
- Movement
- Diaper/Potty
- Departure
- Books
- Sensory Exploration
Part 2: Webbing Framework for Preschool

IEP Goal(s):

- Language
- Cognitive
- Science Center or Sensory Table
- Transitions
- Outdoor Environment & Exploration
- Manipulatives
- Class Library Reading
- Meals
- Math Center
- Art
- Blocks
- Large Group
- Self-Care
- Oral Stimulation
- Dramatic Play
- Writing
- Large Group
Example: Webbing Framework Implementation Plan

**ART**
- Put lipstick on the child’s lips and encourage him/her to “kiss” the paper, creating a page of “kisses”
- Blow through straw to “straw paint”

**BLOCKS**
- Push car through block bridge and make a car sound
- Add toy animals to block play and make animal sounds

**LARGE GROUP**
- Add mouth movement to songs and finger-plays: smacking, clicking, throwing kisses, imitating mouth movements.
- Add harmonicas, whistles, kazoos, etc. & have children “play” music

**LANGUAGE**
- Imitate words “bye”, etc.
- Imitate sounds
- Encourage child to use words he/she have always used and work on expanding vocabulary

**COGNITIVE**
- Concepts of:
  - Open—Close (Mouth)
  - In—Out (Tongue)
  - (Use Mirrors)

**SELF-CARE**
- Wash face with cloth-cleaning around mouth area
- Brush teeth, rinse tongue, spit

**SCIENCE CENTER OR SENSORY TABLE**
- Blow a straw in water
- Blow a Styrofoam ball across the water
- Blow cotton balls across table to another child
- Blow up balloons, blow pinwheels

**MANIPULATIVES**
- Present vehicle and animal puzzles and encourage making animal and vehicle sounds

**CLASS LIBRARY READING**
- Books that encourage sound making and repetition
- Add a microphone and encourage making sounds into microphone as reading activities are supported

**WRITING CENTER**
- Lick stamp to place on envelope
- Lick envelope

**IEP GOAL(S): Oral Motor**
(Suggested activities developed with therapists)

**DRAMATIC PLAY**
- Imitate “mmm” in cooking
- Kiss baby doll
- Pretend to eat
- “Sh” sounds with finger at lips for sleeping baby

**WRITING CENTER**
- Lick stamp to place on envelope
- Lick envelope

**MEALS**
- Lip closure over spoon
- Wipe mouth with napkin
- Add food to lick, suck, chew, etc.

**OUTDOOR ENVIRONMENT & EXPLORATION**
- “Beep Beep” with a riding toy
- “Wee” while going down the slide
- Blow streamers
- Say “Hop, hop, hop” during hopping, etc.

**TRANSGITIONS**
- Make sounds (clicking, humming, animal sounds during transitions)

**MATH CENTER**
- Blow bubbles and count them

**ORAL STIMULATION**
- Various input around mouth (Cotton balls (soft), vibrating toys, various fabrics in napkins, lotions, etc.)
Parents are important partners and have valuable information that can support the Service Provider and Classroom Teacher in their work. They have knowledge to share on the child’s strengths, preferences, interactions with other children and experiences that are challenging for the child as well as for the family.

Any of the partners can give this form to the parent to complete or it can be included in a conversation between the parents and service and/or classroom partners.

The Parent Report contains information that is helpful in the planning process, and can be found on the next page.
Parent Report

Child’s Name: ___________________________________________ Birthdate: ___________ Date:___________

The hopes and dreams we have for our child include:

The strengths our child has are:

The people who are important in our child’s life are:

Interactions, items, activities and routines at home and in the community that our child enjoys are:

Our child does not like:

We would like to support addressing the following concerns, challenges and difficulties that our child experiences:

We would like support addressing the following concerns, challenges and difficulties that our family experiences in caring for our child:

We would appreciate the center/classroom staff and service providers to communicate with us in the following ways:

Thank you for considering our Parent Report information in planning for our child.

________________________________________
Parent Signature

Adapted from Parents Reaching Out, Spring 2011 document.
“Inclusion means my child doesn’t need to be in a special education classroom for preschool — they get to go to the regular preschool class with the other children from our neighborhood.” -Parent

I want my child to be able to interact with other children — to hear them laugh, talk, and play and to be a part of it.”

-Parent
“Inclusion is not just attending day care and being in the room around other children, but it is about interacting with them in meaningful ways.”
-Parent

“Inclusion means my child is learning and playing with other children all day long.”
-Parent

“How happy my child is to hear the language and laughter of other kids.”
-Parent
ADMINISTRATOR’S GUIDE
BUILDING INFRASTRUCTURE & SYSTEMS WITHIN YOUR AGENCY TO SUPPORT INCLUSIVE SERVICES
Ability is of little account without Opportunity...

-Napoleon Bonaparte
Administrators have an influential role in effective inclusion for young children. They lead staff in collaboration efforts, professional development, and partnership with other agencies. They may include Special Education Directors from school districts, Coordinators of early intervention programs, Principals in elementary schools, Disability Coordinators in Head Start programs, Directors of Pre-K programs and Directors of early care and education centers in the community.

This section of the guide is for Administrators who will find guidance to begin or extend the development of the infrastructure and systems needed in their agency to support inclusive services for young children. It provides strategies and tools to support the process including: self assessment, partnership mapping, vision development, and utilizing the information gathered to develop action plans to move the system forward.

Ideally, the infrastructure and systems will be in place prior to service providers and classroom teachers developing Classroom Partnership Agreements. But, if that is not in place, inclusion teams that support individual children can go back and complete the “Inclusion Partnership in the Classroom” work at any point.

Recruiting An Agency Team
To support your agency in working towards high quality early childhood inclusive services, it is helpful to recruit a team of staff and parents willing to work with you on inclusion. This team will help to establish, review or revise your inclusion vision statement, policies and practices as needed. Developing and sustaining the collaborative partnerships needed to support inclusive services for young children, requires commitment and perseverance from your agency and staff.
Part 1: Inclusion Tools To Build Infrastructure In Your Agency

On the following pages, you will find tools to help build the infrastructure and systems needed to support early childhood inclusion in your agency. Beginning with the tools for self assessment, you and your agency team will review your current status and map the early childhood partnerships that currently exist or that you need to build on.

Utilizing the results of your agency’s self assessment, you and your team will summarize the current reality. This includes a description of your efforts, defining your strengths and identifying areas of growth in enhancing and building capacity for high quality early childhood inclusion.

As you continue your agency team work, you will clarify your values as the first step towards creating or revising a vision statement for early childhood inclusion.

The next step will be to revise as needed, or develop a vision statement for inclusive practices that will guide your agency’s future efforts.

Working from your vision, you will utilize the results of the self-assessment to guide you in developing an action plan to improve the quality of services you provide.

The final tool presented is the Cause to Pause Worksheet to assist with problem solving.

The following self-assessment tool provides a framework for discussion and will help you and your team determine your agencies’ current status of inclusive practices for young children and families. Once your team has completed the tool, take some time to review the data, and reflect on your areas of strength and the areas you want to work on to improve the quality of services you provide.
Part 1: Early Childhood Inclusive Practices Self-Assessment Tool

Directions: With your team, reflect on past experiences and discuss the following statements to come to consensus on the rating. Mark an X in the appropriate column.

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not Yet Implemented</td>
<td>Partially Implemented</td>
<td>Fully Implemented</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Self-Assessment Statement

1. **Sense of Belonging**—Ensure that children with disabilities experience a sense of belonging and have optimal opportunities to learn, develop and form positive relationships alongside their peer models.

2. **Integrated Service Delivery**—Assessment is on-going, done within the context of routines and has input of all the partners. IFSP/IEP outcomes/goals are written in functional terms, with input from all the partners and are supported by a functionally based, age appropriate curriculum. They are embedded into daily routines and activities that are planned for jointly.

3. **Reciprocal Consultation**—The knowledge base and skill level of everyone is honored. Service Providers and Classroom Staff share knowledge, learn from and communicate with one another. Reciprocal consultation between Classroom Staff and Service Providers is on-going to determine needs, develop strategies, assess progress and maximize learning opportunities within the context of the routines of the child’s day.

4. **Therapies**—Therapeutic and specialized services and approaches are integrated into the child’s routines within the context of the daily routines of the classroom. Classroom Staff and Service Providers share their respective expertise and explore routines-based strategies within the natural settings. These strategies and approaches reduce and eliminate the need for “pullout” therapy services.

5. **Materials**—Materials that are already present in a typical classroom are used. Accommodations and adaptations to these materials and the environment are made when appropriate. The use of specialized toys and materials is minimized. Learning materials are age appropriate and accessible to all children.

6. **Professional Development**—Service Providers and Classroom Staff have professional development opportunities that raise their level of knowledge and skill over time. They have access to the latest research, resources and technical assistance and are supported to explore new approaches.

7. **Community Partnerships**—Partnerships are established with other early care and education programs within the community, providing a variety of inclusive options for young children and families. Partners collaborate to embed IFSP/IEP outcomes/goals and strategies into the daily routines and activities of the program and child.

8. **Collaborative Agreements**—Administrators of partnering agencies meet together to develop and sign collaborative agreements (i.e. Memorandum of Understanding) to establish the working relationship and commitments of their individual agencies.

9. **Program Philosophy, Policies and Procedures**—Policies and procedures are in place and aligned which support inclusion and the use of inclusive practices. Policies and procedures are supported by a strong, well-understood, well-articulated position and philosophy statement on inclusion (refer to Policy & Procedure Checklist for more information).

10. **Parent-School Partnership**—Practices are in place that provide a welcoming environment for families which in turn sets the tone for the parent/agency partnership.

11. **Transition**—Children and families are supported in transition in and out of early care and education settings and services. Families are fully informed about all options for inclusion. Sending and receiving Families, Service Providers and Classroom Staff meet to plan for transition.
Reflection on Inclusive Practices

1. What do you see as your areas of strength related to inclusive practices?

2. What areas do you want to work on to improve the quality of services you provide?
For Promoting Community Collaboration & Partnership

DIRECTIONS: Think about the current policies and procedures of your program or agency. Review the following questions to determine if they are in need of revision to clarify your commitment to providing inclusive services and supports.

Policies:

___ Do you have a written policy articulating your program’s value and priority for the inclusion of young children in early care and education settings?

___ Do your policies address collaboration and partnership with other early care and education entities in providing services for young children?

___ Do your policies address collaboration and communication with other agencies and community partners in meeting the needs of young children with IFSPs/IEPs?

___ Do your policies address the development and signing of written collaborative agreements with early care and education agencies on inclusion?

*Is there a systematic way that these policies are shared with staff?

Procedures:

___ Do your procedures support creating shared goals, objectives and/or outcomes for young children to be implemented by agency partners?

___ Do your procedures support integrating specialized services documented on IFSPs/IEPs into daily routines and activities?

___ Do your procedures address providing time and resources for collaborative activities?

___ Do your procedures promote mutual trust, respect and open communication between other early care and education programs in your community as part of your collaborative endeavors to provide inclusive services?

___ Do your procedures support parent participation in meetings, communication, planning and strategies for inclusion?
Take a moment to think about your agency in relation to other early childhood agencies in your community. Identify community agencies you interact with or could potentially interact with in serving young children with developmental delays and/or disabilities and their families. Write the names of those agencies in the circles. Using the Key, indicate the type of connection that currently exists between your agency and the partners. If the Key does not have an accurate descriptor that characterizes the relationship, please devise one. (More than one Key item can be used to characterize the connection.) As you discuss the nature of this relationship, note any ideas that may emerge on how to strengthen the connection, build a more cohesive partnership, improve a process, work with a stressful situation, leverage the strengths that exist, resolve a conflict, and any other areas of concern and/or potential growth.
Causes to Pause are the things we need to consider (that make us stop and think) when we have encountered a challenge or barrier in our inclusion efforts. Causes to Pause are inevitable in our work and in our lives.

Teams can reflect on and use problem-solving strategies to address their challenges and issues, to identify possible resources (e.g., colleagues, consultants, families, or the Internet) and to gather input, insight and information to address their Causes to Pause.

There can be many underlying causes that make you pause. They can be categorized as follows:

- Systems Issues
- Relationship Issues
- Environmental/Curricular Issues
- Attitudinal Issues

The following questions for each category of issues can help your team identify the underlying Cause to the Pause.
# Part 1: Cause To Pause Worksheet

<table>
<thead>
<tr>
<th>Type of Issue</th>
<th>Team-based Assessment Questions</th>
<th>What could your team do to overcome this challenge/barrier?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Systems Issues</strong></td>
<td>Is the issue caused by . . .</td>
<td></td>
</tr>
<tr>
<td>1. A program’s rules and regulations?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• <em>Is it in the law?</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• <em>Is it policy dictated by federal or state regulations, local interagency agreements, or local procedures?</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• <em>Is it “past practice”?</em></td>
<td></td>
<td></td>
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<tr>
<td>• <em>Is it negotiable?</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. A lack of a procedure?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. People doing things the way they have always done them?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. A need for an interagency agreement?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. An interagency agreement that has been written and filed but not understood and implemented at all levels of the organizations involved?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Adapted from: SpecialQuest Multimedia Training Library (Collaboration and Teaming Volume; Session 6 Handout #2 pp. 41-43)
Part 1: Cause To Pause Worksheet

<table>
<thead>
<tr>
<th>Type of Issue</th>
<th>Team-based Assessment Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Attitudinal Issues</strong></td>
<td></td>
</tr>
<tr>
<td>Is the issue caused by . . .</td>
<td></td>
</tr>
<tr>
<td>1. Service Providers and Classroom Staff and/or decision makers doing things the way they have always been done?</td>
<td></td>
</tr>
<tr>
<td>2. People operating out of fear or lack of information?</td>
<td></td>
</tr>
<tr>
<td>3. Lack of understanding that it is the law?</td>
<td></td>
</tr>
<tr>
<td>4. People worrying that they weren’t “trained to do this” (i.e., work with children with disabilities and/or work with children without disabilities)?</td>
<td></td>
</tr>
<tr>
<td>5. Discomfort…</td>
<td></td>
</tr>
<tr>
<td>- being in someone else’s classroom?</td>
<td></td>
</tr>
<tr>
<td>- having someone in your classroom?</td>
<td></td>
</tr>
<tr>
<td>6. People working from stereotypes or prejudices that interfere with their abilities to collaborate?</td>
<td></td>
</tr>
<tr>
<td>What could your team do to overcome this challenge/barrier?</td>
<td></td>
</tr>
</tbody>
</table>

Adapted from: SpecialQuest Multimedia Training Library (Collaboration and Teaming Volume; Session 6 Handout #2 pp. 41-43)
Part 2: Defining Our Current Reality

Utilizing the results of self-assessment and community partnership mapping, work together as a team to summarize inclusion efforts and to identify some of your strengths and your areas for growth.

What Does Our Inclusion Effort Look Like Now?
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Strengths:
1. _______________________________________________________________________________________________
__________________________________________________________________________________________________
2. _______________________________________________________________________________________________
__________________________________________________________________________________________________
3. _______________________________________________________________________________________________
__________________________________________________________________________________________________

Areas for Growth:
1. _______________________________________________________________________________________________
__________________________________________________________________________________________________
2. _______________________________________________________________________________________________
__________________________________________________________________________________________________
3. _______________________________________________________________________________________________
__________________________________________________________________________________________________
In starting to think about collaboration and partnerships, it is important to create a vision for how you would like to evolve in your journey towards providing inclusive services and supports to young children with disabilities and their families. Clarifying your values as an agency is a first step in establishing a foundation for creating a vision towards this effort.

We believe the following ideas, concepts, and values are important in designing and implementing our inclusion effort:

<table>
<thead>
<tr>
<th>IDEAS</th>
<th>CONCEPTS</th>
<th>VALUES</th>
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</table>
Part 3: Establishing Our Vision

developing a vision statement for inclusion will help guide you in designing and implementing your efforts towards more inclusive practices. As you reflect on the ideas, concepts and values that you have identified and the mission your agency follows, develop a written vision statement on inclusion.

OUR VISION
Use the results of the information you have gathered as guidance in developing an action plan. This action planning tool will assist your program in moving forward toward implementing inclusive practices. It is designed to help you think about specific strategies needed to meet your goals; decide who will take the lead on each strategy; how you will measure success; record your anticipated date of completion; and note any progress made. It is suggested that you focus on a limited number of actions at a time to be completed over a 3-month period.

<table>
<thead>
<tr>
<th>Strategies/Steps/Actions</th>
<th>Person(s) Responsible</th>
<th>How will we know if we are successful?</th>
<th>Date &amp; Progress</th>
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</tbody>
</table>

These are the actions we will accomplish in the next 3 months. Start Date ____________
INCLUSION
PARTNERSHIP
IN THE COMMUNITY

COLLABORATION WITH OTHER AGENCIES TO SUPPORT INCLUSIVE SERVICES
The need for change bulldozed a road down the center of my mind.

-Maya Angelou
Creating Collaborative Community Partnerships

As an early intervention program, preschool special education program, Early Head Start, Head Start, child care, private school, or other entity, you are faced with developing relationships with multiple agencies in order to provide inclusive services for young children with developmental delays and/or disabilities.

It is important that each agency and service it provides fit the community, context and needs of the children and families it serves. Looking at the ways agencies and services interact and influence each other will help you in creating a collaborative comprehensive system to support inclusion that fits your community. If you have clarified your values, done a self-assessment and developed an action plan, you are on your way.

This next section of the guide supports your efforts to move beyond the work you have done in your agency with your agency team, and bridge to other community partners in building the infrastructure to support inclusive options for children and families in your community.
Early Intervention (EI): EI are services provided to infants and toddlers (0 to 3 years), who have or are at risk for developmental delays, and their families by the Family Infant Toddler Program, a division of the NM Department of Health.

Preschool Special Education Services: The services provided to preschool age children (3 to 5 years) who are found eligible for special education by the local school district following IDEA (Individuals with Disabilities Education Act), Part B, Section 619 and state regulations.

Early Head Start: A Head Start funded program for children birth to 3 years of age that may offer Home-based and/or Center-based options.

Head Start: A federally funded program for children of low income families 3 to 5 years of age, designed to meet children’s emotional, social, health, nutritional, educational, and physical needs.

New Mexico PreK: New Mexico Pre-Kindergarten (PreK) Initiative programs, funded through either the Children Youth and Family Department (CYFD) or the State Public Education Department (PED), prepare four-year-old children for success in school by exposing them to language, literacy, and math foundational skills.

Child Care: State licensed/registered settings that provide for the care and supervision of children from newborn to age thirteen outside the home environment.

Family Home (Care) Providers: Individuals who provide care and supervision for young children in a home environment that is licensed by CYFD.

Private Preschool: A setting that provides an educational curriculum for children under the age of 5 and that charges families for its services.

Parent: The primary caregiver is the expert on his/her child and has primary responsibility for educational decisions.
Before early care and education administrators begin their partnership, they should meet together to develop an MOU outlining the specifics of the partnership and working relationships.

Developing an MOU is a process of ongoing meetings and dialogue between collaborating community partners to gain an understanding of the requirements each partner is obligated to meet, the internal procedures each agency follows to meet those requirements, and the agreement each partner makes to support efforts to provide inclusive services.

It is important to be specific and as detailed as possible when writing the MOU. This document will guide all parties in implementing inclusive shared service delivery and supports.

The MOU would be the responsibility of the administrators from each agency and would be signed by those who have the responsibility for services and oversight of the contract.

This responsibility might involve a board, a director, and/or other agency leadership roles.
In order to establish a working relationship and discuss commitments of their individual agencies, administrators, who make decisions for their agencies, need to come together at an initial meeting. The agreed upon items are then documented in a formal Memorandum of Understanding (MOU). When planning the first meeting, it is valuable for organizers to have given some thought to the following:

- Who should be present at the first meeting?
- Do the administrative partners understand the purpose of this meeting?
- How will you orient your administrative partners to your agency and services?
- What questions do you have for your administrative partners?
- What are the main goals you want to accomplish in this initial meeting?
- Do you need to develop an agenda?
- Who will facilitate this meeting?
- Are you clear on the purpose of the MOU?
- Are there any concerns you have about the MOU process?
- Have you identified the components that need to be addressed in the MOU?
- Who needs to sign off on the final written MOU?
- Who will receive copies of the final agreement?

Planning and preparation are critical in beginning to establish a positive relationship with your community administrative partners.
Use the following checklist to guide you in thinking about all of the important information you want to capture in the Memorandum of Understanding. You may use some or all of the items on the checklist.

___ Stated purpose
___ Parties involved
___ Establish agency responsibilities (who, what, when, etc.)
___ Define areas of service provision for each agency
   - Child/Find screening and evaluation
   - Referral for evaluation and eligibility determination
   - IEP/IFSP development, implementation, and review
   - Placement
___ Specific program service delivery
___ Procedures for review/ monitoring child’s progress
___ Training and technical assistance
___ Working with parents
___ Transition
___ Dispute resolution
___ Issues of confidentiality
___ Procedures for ongoing communication (daily, weekly, monthly)
___ Review/Revision/Termination process for written agreement
RESOURCES & ADDITIONAL INFORMATION
“The capacity to build and maintain collaborative partnerships between families and professionals is often considered the single most important factor to the successful inclusion of children with disabilities in community child care settings.”

-Project Exceptional
In the fall of 2007, New Mexico was supported through the national SpecialQuest effort to gather representatives from state agencies, parent groups, commissions, universities, and Head Start communities to form the New Mexico SpecialQuest Leadership Team. The team has formulated plans and strategies and has continued to learn and work together to increase inclusive opportunities for children with special needs from birth-five in early care settings.

All families of young children (birth through five) receive quality supports, services and systems of care that are accessible to every group, respectful of individual and family choice, child and family centered, culturally competent, and within community-based systems, which work together to enhance positive outcomes for families and children in New Mexico.

Key Concepts:

Belonging: Every human being has the right to be part of the ebb and flow of community life, regardless of his or her unique needs and gifts.

Family Leadership: Family involvement is essential. Developing family leadership is critical to successful delivery of quality services.

Collaboration & Teaming: Different disciplines working together benefits families and communities.

Life-Long Learning & Continuous Improvement: Issues can be solved, challenges met, and barriers overcome when those involved in inclusive efforts continue to learn from their experiences and consciously pursue opportunities for ongoing growth.
Every child in New Mexico has diverse strengths rooted in his or her family’s unique culture, heritage, language, beliefs, and circumstances. Early learning programs that support the full participation of every child build on these strengths by promoting a sense of belonging, supporting positive social relationships, and enabling families and professionals to gain advocacy skills that positively impact the life of every child.

2010 New Mexico Summit: Early Childhood Inclusion

We will:

Promote every New Mexico citizen’s understanding of the importance of high quality inclusive early childhood programs and practices.

Support interactions and relationships that foster self reflection.

Utilize information about the growth, development, and experiences of individual children and families for program and curriculum development and improvement.

Continuously improve services and supports by evaluating current practices and incorporating effective methods, models, and research.

Promote the establishment of aligned services and supports that build on both the unique assets of each child and acknowledge the strengths of children’s and families’ heritage, language, and culture.

We will:

Ensure that services and supports are provided by people who reflect the diversity of the community, are well educated, and are well-compensated.

Establish an integrated, multi-disciplinary system of professional development, training, and technical assistance that supports the design, implementation, and evaluation of practices that are respectful of and responsive to each child and family.
We believe that:

Every child has unique gifts and abilities that are to be celebrated and nurtured.

The early years hold enormous promise for every child to reach his or her full potential.

Every child learns within the context of relationships and through playful interactions within the environment.

Every child and his or her family deserve equitable access to appropriate services and supports that acknowledge their uniqueness and enable them to reach their full potential.

Therefore, we are committed to:

Valuing and embracing all children and their families.

Involving families and communities as partners and decision makers.

Suspending biases to build trust and establish collaborative partnerships that benefit children, their families and the professionals who work with them.

Providing choice, flexibility, and continuity of services and supports for families within communities.

Making a variety of services and supports available so all children have access to and can participate in opportunities that are both respectful of and responsive to their family experiences, culture, beliefs, abilities, and circumstances.

Advancing advocacy efforts for inclusive practices that build upon unique child, family, and community strengths and are accountable to every child and his or her family.

These guiding principles were developed at the NM Summit on EC Inclusion, March 2010.
Resources That Support Inclusion

An Administrator's Guide To Preschool Inclusion:  

CONNECT Modules:  http://community.fpg.unc.edu/connect-modules/

Early Childhood Technical Assistance Center (ECTA):  http://ectacenter.org/

Guiding Principles for Full Participation of Young Children Birth-8 Years in New Mexico’s Early Learning System:  
https://www.newmexicokids.org/content/parents_and_families/resources_for_parents_and_families/docs/Inclusion_Guiding_Principles_Brochure.pdf

NPDCI (2011) Research synthesis points on quality inclusive practices:  http://fpg.unc.edu/node/4504

SpecialQuest Multimedia Training Library  

Preschool Network (PSN)/ Early Childhood Learning Network Division:  
http://www.cdd.unm.edu/ecln/
### Commonly Used Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AT</td>
<td>Assistive Technology</td>
</tr>
<tr>
<td>AYP</td>
<td>Adequate Yearly Progress</td>
</tr>
<tr>
<td>CME</td>
<td>Comprehensive Multidisciplinary Evaluation</td>
</tr>
<tr>
<td>COTA</td>
<td>Certified Occupational Therapist Assistant</td>
</tr>
<tr>
<td>DOH</td>
<td>Department of Health</td>
</tr>
<tr>
<td>EA</td>
<td>Educational Assistant</td>
</tr>
<tr>
<td>ECEP</td>
<td>Early Childhood Evaluation Program</td>
</tr>
<tr>
<td>ECSE</td>
<td>Early Childhood Special Education</td>
</tr>
<tr>
<td>EI</td>
<td>Early Intervention</td>
</tr>
<tr>
<td>ESL</td>
<td>English as a Second Language</td>
</tr>
<tr>
<td>ESY</td>
<td>Extended School Year</td>
</tr>
<tr>
<td>FACE</td>
<td>Family and Child Education</td>
</tr>
<tr>
<td>FAPE</td>
<td>Free Appropriate Public Education</td>
</tr>
<tr>
<td>FERPA</td>
<td>Family Education Rights and Privacy Act</td>
</tr>
<tr>
<td>FIT</td>
<td>Family Infant Toddler Program</td>
</tr>
<tr>
<td>IDEA</td>
<td>Individuals with Disabilities Education Act</td>
</tr>
<tr>
<td>IEP</td>
<td>Individualized Education Plan</td>
</tr>
<tr>
<td>IFSP</td>
<td>Individual Family Service Plan</td>
</tr>
<tr>
<td>LEA</td>
<td>Local Education Agency (Local School District)</td>
</tr>
<tr>
<td>LLP</td>
<td>Limited Language Proficiency</td>
</tr>
<tr>
<td>LRE</td>
<td>Least Restrictive Environment</td>
</tr>
<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
</tr>
<tr>
<td>NMAC</td>
<td>New Mexico Administrative Code</td>
</tr>
<tr>
<td>NMSBVI</td>
<td>New Mexico School for the Blind and Visually Impaired</td>
</tr>
<tr>
<td>NMSD</td>
<td>New Mexico School for the Deaf</td>
</tr>
<tr>
<td>OT</td>
<td>Occupational Therapy</td>
</tr>
<tr>
<td>Part B</td>
<td>A component of IDEA that defines service delivery for children ages 3-21</td>
</tr>
<tr>
<td>Part C</td>
<td>A component of IDEA that defines early intervention service delivery for children ages birth-age 3 and their families</td>
</tr>
<tr>
<td>PED</td>
<td>Public Education Department</td>
</tr>
<tr>
<td>PBS</td>
<td>Positive Behavior Supports</td>
</tr>
<tr>
<td>PLP</td>
<td>Present Levels of Performance</td>
</tr>
<tr>
<td>PT</td>
<td>Physical Therapist</td>
</tr>
<tr>
<td>PWN</td>
<td>Prior Written Notice</td>
</tr>
<tr>
<td>REC</td>
<td>Regional Education Cooperative</td>
</tr>
<tr>
<td>SLP</td>
<td>Speech Language Pathologist</td>
</tr>
<tr>
<td>SPED</td>
<td>Special Education</td>
</tr>
<tr>
<td>T &amp;TA</td>
<td>Training &amp; Technical Assistance</td>
</tr>
</tbody>
</table>