## WELCOME TO KINDERGARTEN

# Making the Transition from CPSE to CSE

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The North Side School



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## Dear Parents/Guardians,

This guide contains some valuable information about the process that takes place when a child with a disability, who has been attending a preschool special education program or has been receiving special education or related services in a general education preschool, nursery school, child care or at home, is entering kindergarten in his/her local school district.

This guide was prepared by a group of professionals from special education, general education, colleges and universities, and agencies who are involved in the field of education in various ways. This group, known as the Regional Council for Educational Services, was formed through a grant given by the New York State Education Department to Nassau BOCES.

The Council met with educators and parents to explore the transition process from preschool special education to general education. It explored other materials written about the process.

The Council's work led to this guide for parents. The additional information in the guide contains questions and answers about the transition process prepared by the local school districts .This information targets the process of transition from CPSE to CSE. A list of acronyms and commonly used terms is also provided for your use.

The Council also prepared materials for districts and preschools in the hope that all these materials would make the process a smooth one for parents, districts, and most of all, for the children themselves.

There is a lot of information included in the guide. Please keep it so that you can refer to it when needed.



## **Transition as a Process**

Transition from a preschool special education program (or from special education services in another setting, such as nursery school or child care) to a kindergarten program in a district program involves a process.

Transition is more than one meeting with the district's Committee of Special Education (CSE) to decide where your child should go to school.

You should be preparing for transition as your child approaches the age when he or she will be leaving his or her preschool program (or services) and entering the school-age years. When you are prepared and informed, the process should be a smooth one.



# The Transition Process and Your Child

There are many partners in the transition process. This guide identifies each one for you on the following pages.

First and foremost, you should know that all the partners are concerned with your child, who is at the center of the process.

When each partner begins with the interests of the child as most important, the process will go well.



## Partners in the Process:

#### •: • You (the Parents and Family)

- You are the most important participant in the transition process. You know your child. You have valuable information to contribute to the transition process. Come to that process prepared to be a full partner.
- ☐ Both your preschool program or service provider and your school district should be working with you to prepare for the transition.
- Your district wants to develop the same relationship of trust with you. An important thing for you to know is that you can continue to have input into your child's education. Your relationship with teachers or service providers does not end with preschool.
- This booklet should help make the transition to education in your school district a smooth one for you and for your child. The information in this booklet should help you become a full partner in the process.

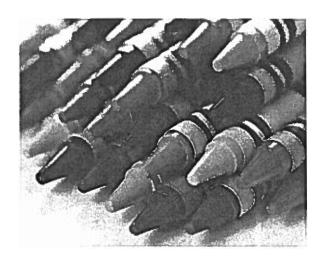
## •!• Your Child's Preschool Special Education Program/Service Provider

- ☐ Your child's program or service providers are also important participants in the transition process. They have participated in the decision to have him or her enter kindergarten in your school district.
- Your preschool program or providers should be working with you and your school district on transition during your child's last year in the program.
- ☐ If you have any questions or concerns that involve your child's program or service providers, you should always ask them.

## **Partners in the Process:**

#### •! • Your School District

- ☐ The school personnel want you to be comfortable with the transition process. You should talk with the school district personnel about your child and his or her needs.
- ☐ You will be formally notified of the date, time and place of the CPSE/CSE transition meeting when the decision about your child's placement will be made. However, you can always contact your school district before or after this meeting.
- Your school district will provide you with information about the district's kindergarten. You will be given information about screenings, busing and about the school's approach to educating your child.
- ☐ The information that is provided on the cover of this guide contains the name and phone number of the person(s) to contact with any questions you may have about your child's new school. The North Side School.



## Moving From Preschool to Kindergarten

Before your child's annual review, school district personnel may visit his or her program and/or they may talk with the providers who deliver special education or related services. During these visits or discussions, the district and preschool personnel review your child's progress and areas for continued growth.

A recommendation for next year will be made at the meeting of your school district's Committee on Preschool Special Education (CPSE)/Committee on Special Education (CSE). You will be part of the discussion that leads to this recommendation, and you should feel comfortable about that recommendation.

Your school district's Committee on Special Education (CSE) makes the placement decision and develops the IEP (Individual Educational Plan) for the next year with your input and consent.

If you are not in agreement with the placement decision, you have alternatives. Usually, disagreements between parents and districts can be resolved with more discussion. You will be told what your rights are. Remember that everyone wants what is best for your child and no decision is ever a final one. There are always alternatives in the future if needed. Even if you agree with the placement decision, remember there are always alternatives for any child with special needs. Your child's success is the first consideration of everyone involved in his or her education.



# Preschool Special Education vs. Special Education for School-Age Children

Your child received special education services in a particular setting. The service delivery system is somewhat different for preschool special education and special education for students ages 5 to 21. For your information, we have listed below how services are provided on each level. Your school district will provide you with specific information about its special education services.

Preschool (CPSE)	School-Age (CSE)
Services for children with disabilities, ages 3 to 5 years old, are provided in special education programs, nursery schools, Head Start programs, child care settings or in the home.	Students with disabilities, ages 5 to 21 years old, are serviced in a variety of settings depending upon their individual needs.
	Youngsters may be placed in a general education class with the support of supplementary aids and services as needed. If a child cannot be educated in a general education classroom, the district must make available options known as a continuum of alternative placements. Some of these alternative placements are within the school district.
	There are other placements in the continuum outside the district school, but this guide concerns the transition of youngsters to the local school district.  No matter what placement is selected, each

youngster must be educated in the least restrictive environment (LRE) for him or her.

## What Parents Tell Parents

These are some of the thoughts of parents who have made the transition from preschool special education to local district kindergarten or first grade.

- The most important thing to remember is that you are not alone in this process. Everyone involved wants the best for your child. Transition is a cooperative process of real partnership.
- When you are beginning the transition process, your own fears may get in the way of hearing what others on the transition team are saying. Although it's only human, try not to let this happen.
- Try to learn as much about the process and your child's educational needs as you can. Keep notes. This will make you a better contributor to the process.
- If your district sends forms for you to fill out, provide as much information as possible.
- When you communicate with district personnel, tell them about your child's strengths and weaknesses and about the progress he/she made in preschool. Don't be afraid to express what you think contributed to or hindered your child's progress.
- Remember that every child has a unique profile. Knowing your child's learning style, his/her likes and dislikes about school and learning is valuable information. Every child has special needs.
- If you can possibly meet other parents of children who are returning to the district from special education preschool programs or services, it will help you to share your feelings.
- Talk with other parents who have been through the transition process. Share your questions and feelings with them.

- Attend meetings that your district may have on transition or kindergarten issues
- Join the Special Education Parent Council (SEPC).
- Every child responds differently. Don't prejudge how your child will react to his or her new program.
- Visit the school that your child will be attending. Learn as much as you
  can about the school so that you can participate in the transition process.
- Realize that any transition, especially when it involves a young child, is anxiety provoking. Many parents of typical children sending their youngsters off to the first day of kindergarten feel the same anxiety.
- Communication is the key. Communicate with your school district as you start the process. Once your child is in his or her local district school, communicate with his/her teacher. Ask the teacher to communicate regularly with you.
- And please, after your child has been in kindergarten for a little while, take some time to let his/her preschool providers know how he/she is doing in his/her new school. This feedback will be truly helpful to the teacher in preparing others for the transition process.

## Positive Connections from CPSE to CSE

## Questions Commonly Asked by Parents

Prepared by School District Committees on Special Education of Nassau County

With thanks to the parents and to the members of the Regional Council for Educational Services who contributed to the development of this information

The following questions and answers are the result of a concerted effort by district CPSEs/CSEs throughout Nassau County to address the most commonly expressed concerns of parents whose youngsters are transitioning from preschool to school age programs. The goal of this material is to make this transition comfortable for you, the parents, and for your children.

The district representatives who developed this information hope that it clarifies the transition process and encourages you to contact your district PPS office if you have any further questions.

#### 1. What is the CSE?

You have been working with the Committee on Preschool Special Education (CPSE). Now you will be meeting with your district's Committee on Special Education (CSE)

The Committee on Special Education is a multidisciplinary team in your school district that recommends services and programs for school age children with disabilities. According to New York State Regulations, when your child becomes eligible for kindergarten, the decision about his/her program and services becomes the jurisdiction of the CSE.

## 2. Do I have to register my child in the district?

Yes, registration is required. Contact the Business Office at (516) 333-1707 and complete the registration packet by clicking <u>HERE</u>.

## 3. Will my child be screened for kindergarten?

Yes, all districts are required to do screenings. The timelines and screening instruments may vary from district to district. Screenings usually include brief evaluations of your child's language, cognitive and physical abilities.

#### 4. How does the CSE make decisions about my child's placement?

It is important to understand that this process is required by State regulations. Be assured that districts are concerned about each child and his or her unique needs. To understand these needs, districts utilize a variety of strategies that may include:

- Reviewing your child's preschool records and evaluations
- Visiting your child at his/her current program and discussions with the staff of that program
- Inviting your child to participate in a screening
- Inviting you and/or your child to visit school
- Gaining information from you, the parent, about your child's needs.

#### 5. Will I be notified of the CSE Meetings?

Just as in the CPSE process, you will be notified by mail of the date, time and place of the meeting. The letter will also provide information about who will attend the meeting.

#### 6. Should I bring someone with me to the CSE meeting?

Parents may choose to come alone or they may bring anyone they wish to the meeting. There is also a parent who can serve as a member of the CSE at your request.

## 7. Who will be invited to the CSE meeting?

When you meet with the CSE to discuss your child, the members who will be present will include:

- CSE Chairperson (or other district designee)
- A psychologist from the school district
- Your child's special education teacher or related service provider
- A general education teacher
- The parent member and physician member are optional and will attend only when necessary. You should contact the CSE office at least 72 hours prior to the meeting to request the attendance of a parent member and/or a physician.
- Other persons may be invited as necessary

#### 8. Will my child's classification change?

As a preschooler, your child was classified by the CPSE as a Preschool Child with a Disability. If your child still requires special education as a school-age child, state regulations stipulate that the classification be more specific. There are 13 possible classifications. (See **Appendix B** for definitions of each classification)

- Autism
- Deafness
- Deaf-blindness
- Emotional Disturbance
- Hearing Impairment
- Intellectual Disability
- · Learning Disability

- Multiple Disabilities
- Orthopedic Impairment
- Other Health Impairment
- · Speech or Language Impairment
- Traumatic Brain Injury
- Visual Impairment including Blindness

Your child must meet the eligibility criteria for one or more of these classifications.

#### 9. Will my child continue to have an IEP?

If your child is classified by the CSE, an IEP will be developed with your input that will describe the recommendations of the CSE.

## 10. What types of programs and related services are available in the school district?

District programs may vary. However, all districts have a continuum of available services. The specific program and/or related services for your child will be determined with your input at the CSE meeting.

State regulations require that the CSE in making placement recommendations, consider the Least Restrictive Environment appropriate for your child. The needs of most children with disabilities can be met in a public school setting with peers who are not disabled. Alternative programs should be considered only when the student's needs cannot be met within the regular school setting even with supplementary aids and services. (From a Parent's Guide to Special Education, a New York State Education Department publication that is available from the PPS office).

## Appendix A

Specialists and Their Role in Helping Your Child Audiologists are trained to do the following: identify and measure types and degrees of hearing loss; assess the extent of the hearing disability; recommend rehabilitation; fit hearing aids; and counsel parents on how to help their child adjust to a hearing loss.

Occupational Therapists in the educational setting, focus on the impact a student's disability has on his/her ability to learn and to meet the demands of the school environment. They work on helping the student receive and integrate the sensory information that is used in coordination with the needed gross and fine motor skills.

*Neurologists* are physicians who evaluate the neurology of the central nervous system and who are involved in diagnosis and treatment of disorders of the nervous system.

*Ophthalmologists* are physicians who specialize in the branch of medicine concerned with the structure, function, and diseases of the eye and their correction.

*Optometrists* are trained and licensed to examine and test eyes and to treat defects by prescribing lenses and by developing programs of eye exercise.

*Pediatricians* are physicians who specialize in the treatment of children, their development and care, and their diseases.

Physical Therapists in the educational setting, direct their efforts to the development and maintenance of the student's physical potential for independence in all education related activities. Their focus is on large muscle and gross motor activities. *Psychiatrists* are physicians who specialize in the diagnosis and treatment of emotional problems and mental disorders. They are trained in psychotherapy.

*Psychologists* are trained in the assessment and treatment of people with emotional, interpersonal, or behavioral problems. They work in a variety of settings - schools, clinics, mental health centers, and hospitals.

School psychologists specialize in counseling school children and their families and work with teachers and other school staff to improve the child's ability to function in a school setting. Psychological testing done in schools is done only by the psychologist.

Behavioral consultants specialize in the objective observation and analysis of behavior and in developing behavior management programs.

*Neuropsychologists* specialize in the integration of psychological observations on behavior and the mind with neurological observations of the brain and nervous system.

Speech Pathologists in the school setting are involved in human communication, its normal development, and its disorders. They evaluate the reception, integration, and expression of speech and language of children or adults, and assist in treating whatever problems exit.

## Appendix B

## Committee on Special Education CLASSIFICATIONS FOR STUDENTS WITH DISABILITIES

Student with a disability means a student with a disability as defined in section 4401(1) of Education Law, who has not attained the age of 21 prior to September 1 and who is entitled to attend public schools pursuant to section 3202 of the Education Law and who because of mental, physical or emotional reasons, has been identified as having a disability and who requires special services and programs approved by the department.

<u>Autism</u> means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age 3 that adversely affects a student's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a student's educational performance is adversely affected primarily because the student has an emotional disturbance as defined below (iv). A student who manifests the characteristics of autism after age 3 could be diagnosed as having autism if the criteria in this paragraph are otherwise satisfied.

<u>Deafness</u> means a hearing impairment that is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification that adversely affects a students' educational performance.

<u>Deaf-blindness</u> means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for students with deafness or students with blindness

<u>Emotional Disturbance</u> means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects the student's education performance:

- 1. An inability to learn that cannot be explained by intellectual, sensory, or health factors;
- ii. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
- iii. Inappropriate types of behavior or feelings under normal circumstances:
- iv. A generally pervasive mood of unhappiness or depression; or
- v. A tendency to develop physical symptoms or fears associated with personal or schools

The term includes schizophrenia. The term does not apply to students who are socially maladjusted, unless it is determined that they have an emotional disturbance.

<u>Hearing Impairment</u> means an impairment in hearing, whether permanent or fluctuating, that adversely affects the child's educational performance but that is not included under the definition of deafness in this section.

<u>Intellectual Disability</u> means significantly subaverage general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a student's educational performance.

<u>Learning Disability</u> means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, as determined in accordance with section 200.4(c)(6). The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing or motor disabilities, of intellectual disability, or emotional disturbance, or of environmental, cultural or economic disadvantage.

<u>Multiple Disabilities</u> means concomitant impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which cause such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include deaf-blindness.

Orthopedic Impairment means a severe orthopedic impairment that adversely affects a student's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.) and impairments from other causes (e.g., cerebral palsy, amputation, and fractures or burns which cause contractures).

Other Health Impairment means having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that is due to chronic or acute health problems, including but not limited to a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, attention deficit disorder or attention deficit hyperactivity disorder or Tourette syndrome, which adversely affects a student's educational performance.

<u>Speech or Language Impairment</u> means a communication disorder, such as stuttering, impaired articulation, a language impairment or a voice impairment that adversely affects a student's educational performance.

<u>Traumatic Brain Injury</u> means an acquired injury to the brain caused by an external physical force or by certain medical conditions such as stroke, encephalitis, aneurysm, anoxia or brain tumors with resulting impairments that adversely affect educational performance. The term includes open or closed head injuries or brain injuries from certain medical conditions resulting in mild, moderate or severe impairments in one or more areas, including cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem solving, sensory, perceptual and motor abilities, psychosocial behavior, physical functions, information processing, and speech. The term does not include injuries that are congenital or caused by birth trauma.

<u>Visual Impairment</u> including blindness means an impairment in vision that, even with correction, adversely affects a student's educational performance. The term includes both partial sight and blindness.