

Appendix G – Literature Review of Consultancy Services for Research on Evaluating
the Pilot Scheme on On-site Pre-school Rehabilitation Services
Comparison Table

Australia	US	Taiwan
1. Brief Background		
1.1. Legislation		
<ul style="list-style-type: none"> ● The Disability Standards for Education 2005 under the Disability Discrimination Act 1992, which includes early childhood education settings such as kindergartens. ● In 2008, all Australian governments made a commitment through the Council of Australian Governments (COAG) that by 2013, all pre-school children will have access to high quality early childhood education programs delivered by degree qualified early childhood teachers. ● Early Childhood Intervention Australia (ECIA) National Guidelines for Best Practice in Early Childhood Intervention outlines the framework for practitioners in the field in pursuing excellence in service delivery and complying with the National Disability Insurance Scheme (NDIS). ● Legislation may diverse in different states, for instance, Child Wellbeing and Safety Act 2005 in the state of Victoria. 	<p><u>Individuals with Disabilities Education Act (IDEA)</u></p> <ul style="list-style-type: none"> ● A federal law that protects the rights of students with disabilities ● Part B- For preschoolers (ages 3-5) and children in K-12. ● Part C- For 0-3 ● IDEA mandates child should be in the Least Restrictive Environment (LRE) ● Children with disabilities should be educated in classroom with other children "to the maximum extent possible" <p><u>Child Find</u></p> <ul style="list-style-type: none"> ● A legal requirement that requires the Local Education Agencies (LEA) to identify and evaluate children who may be eligible for special education services 	<ul style="list-style-type: none"> ● Various laws related to the education, welfare and health services of people with disabilities have been enacted in Taiwan since 1980: ● Physically and Mentally Disabled Citizens Protection Act ● Special Education Act ● Children and Adolescents welfare Act ● Since 1997, the government has been implemented “The Early Intervention Service Implementation Program for Children with Developmental Delays” to organize the resources of social welfare, education, health and police administration to promote early intervention for children with developmental delays and their families. ● Early intervention needs assessment is an essential element of the program <p>(Ho, 2008)</p> <ul style="list-style-type: none"> ● Early intervention (EI) resources in Taiwan were around 2 billion NTD (Sun & Chang, 2011). Child Welfare Bureau provided approximately 104 million NTD for local social welfare bureaus and 49 million for EI. ● The programs include:

		<ul style="list-style-type: none"> (a) therapy services (39.49%) (b) home based services (17.23%) (c) itinerant consultation (14.14%) (d) subvented child care (9.27%) (e) professional development (5.9%) (f) facilities and equipment (6.26%) (g) child find and EI promotion (6.01%) (h) parenting education (1.7%). <p>Ministry of Education provided about 2.2 billions NTD on professional team services (physiotherapists, occupational therapist, speech therapists, clinical psychologists, audiologists, social workers, school psychologists, special education assistants.</p>
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1.2. Identification of children with special needs

<ul style="list-style-type: none"> ● No centralized referring mechanism/ institution for identification of preschool children with special needs. ● The general process of pre-school identification procedures of disability in Australia can be divided into two stages: <ul style="list-style-type: none"> (a) From birth to before preschool, the authorized assessments are mainly carried out by medical doctors (General Practitioner). (Raising Children Network (Australia) Limited, 2016) (b) After admitted to pre-school, child’s teachers and psychologists will also be responsible for early assessments, including involvement in gathering and analyzing information of the child’s health, behavior and emotions. Health professionals will then use this 	<p><u>Referral for assessment/ evaluation</u></p> <ul style="list-style-type: none"> ● Any interested persons can initiate a referral ● With parental permission, a service coordinator will be assigned and develop an Individualized Family Service Plan (IFSP) for the families with a child under 3 years old ● An Individualized Education Program (IEP) development shall be completed for children above 3 years old <p><u>Assessment/ Evaluation</u></p> <ul style="list-style-type: none"> ● Assessment is conducted by the state or local educational agency with input from: <ul style="list-style-type: none"> (a) the parents; (b) the regular teacher ; and (c) at least one person qualified to conduct individual diagnostic examinations, such as a speech-language 	<ul style="list-style-type: none"> ● Notifications of young children with special needs can be received by prenatal checkup, newborn screening, children’s clinic, community nurse, hospital polyclinic, public and private kindergartens, preschool, public and private nursery schools, child welfare institution and nursery centre, parents or guardian, nanny, etc. ● Online notification is also available (Taipei City Early Intervention Report & Referral Centre, 2017) ● The Early Intervention Notification, Referral and Case Management Centre for Children with Developmental Delays would receive the notifications and arrange assessments and evaluation from the Centre of Team Evaluation for Children’s Development ● The Centre of Team Evaluation would develop the
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<p>information to design appropriate intervention plans. (Department of Education and Early Childhood Development, State Government of Victoria, 2012)</p> <ul style="list-style-type: none"> ● Observations, functional assessment are carried by team of trans-disciplinary specialists. Some formal or informal tests may be applied during child’s playing or completing task requested by the assessor. The specialists would make use of the results to design the intervention plan. (Department of Community & Disability Services, Government of Western Australia, 2017) 	<p>pathologist, school psychologist or remedial reading teacher.</p> <ul style="list-style-type: none"> ● include formal and informal information from multiple sources in the following domains: Cognitive, physical, communication, social/emotional and must be conducted in the family’s native language ● Adaptive and family-directed voluntary assessment of resources, priorities and concerns will be addressed in IFSP, while IEP would concern child’s educational needs <p>Eligibility</p> <ul style="list-style-type: none"> ● Eligibility criteria vary by states as IDEA does not provide a more specific definition to eligibility ● An individualized education plan is drafted and reviewed every year at school 	<p>individualized intervention plan and relevant recommendations</p> <ul style="list-style-type: none"> ● The Early Intervention Notification, Referral and Case Management Centre for Children with Developmental Delays will take over the case, arranging placement or referral of intervention services. ● If no further placement is required, the case will be closed. ● Placement institutions include rehabilitation department or policlinic, school and educational institution for children with special needs, inclusive nursery school and kindergarten for children with developmental delays, rehabilitation centres in children’s welfare institution and organizations etc. <p>(Ho, 2008)</p>
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2. Key features of the Service Delivery Mode

2.1. Frequency and form of training for children

<ul style="list-style-type: none"> ● Therapy can be provided by a range of different strategies, such as one-on-one sessions at home, school, or at community activities such as swimming lessons. Group therapy would be practiced when small groups of children obtaining similar education goals. (Department of Community & Disability Services, Government of Western Australia, 2017) ● Advisory visiting teachers with a specialization in early childhood special education, hearing impairment, vision impairment or physical impairment provide early 	<p><u>Special education for children</u></p> <ul style="list-style-type: none"> ● Specially designed instructions; related services means developmental and other supportive services required to assist a child with disability to benefit from special and regular education. (Johnson, 2001) ● Services included are: Assistive technology devices and services Audiology Counseling services Early identification and assessment 	<p><u>Itinerant service</u></p> <ul style="list-style-type: none"> ● 22 counties in Taiwan have established itinerant service classes, 78 classes and 156 teachers in total, serving 3,147 children with special needs. (Yeh, 2009) ● Therapists would assess the abilities of the children and design the individualized education programs (IEP) ● According to the service model proposed by Syin-Lu Social Welfare Foundation, each assessment would be 60 mins
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<p>intervention to children who require intensive, multidisciplinary programs develop skills and behaviours to maximise their participation in schooling. (Queensland Government, Department of Education, 2017)</p> <ul style="list-style-type: none"> ● The training is carried out by Speech Pathologist, Occupational Therapist, Psychologist or Early Childhood Special Educator according to the specific training goal and the need of the child. 	<p>Medical services (diagnosis and evaluation) Occupational therapy Orientation and mobility Physical therapy Psychology services Recreation School health services Social work services Speech language pathology Transportation</p> <p><u>Individualized Service Model</u></p> <p>Odom et al. (1999) conducted a review on the organizational contexts and individualized services model of preschool inclusion program in the United States. -The individualized services were mainly delivered through six models:</p> <ul style="list-style-type: none"> (a) itinerant teaching-direct service model, (b) itinerant teaching-collaborative/consultative model, (c) team teaching model, (d) early childhood teacher model, (e) early childhood special education model, (f) integrative / inclusion activities model. <p><u>Integrated Service Delivery</u></p> <p>Delivering therapy services in the classroom: (Case-Smith and Holland, 2009)</p> <ul style="list-style-type: none"> ● the therapists learn the routines of the classroom and the performance demands on the child 	<ul style="list-style-type: none"> ● May involve teachers and parents to give recommendations on the design of IEP ● Direct service to children with disabilities includes individual training, group training, demonstrative teaching, co-teaching, class observation (Chen & Chung, 2010) ● Each participating child may receive 2-4 sessions of service every semester (Taipei City South Special Education Resource Centre, 2017)
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- the therapists model for the teachers with the goal that the therapeutic strategies will be implemented when the therapist is not present
- the child remains in the natural environment everyday environment. OTs, PTs and STs provide direct services one-on-one, in dyads, in small groups or in large groups and the individualized service is a hallmark of high quality
- therapists also provide consultations to teachers based on the expressed interests of the teachers in addition to the needs of the child during the course of the child's learning
- therapists in consultation are to support teachers in providing optimal instruction to students

Special Education Itinerant Service for Preschool Children with Disabilities in the State of New York

- The Committees on Preschool Special Education (CPSE) are responsible to determine eligibility for special education services for preschool students with disabilities and to develop the IEP for each student (see the assessment from above)
- CPSE determines that a preschool child has a disability and requires special education services, it must recommend appropriate services and/or special programs and the frequency (how often), duration (length of session), location (where) and intensity (group or individual) of such services
- CPSEs must first consider the appropriateness of

	<p>providing related services only; or Special Education Itinerant Service (SEIS); or related services in combination with SEIS; or a half day special class or special class in an integrated setting; or a full day special class or special class in an integrated setting</p> <ul style="list-style-type: none"> ● If the CPSE recommends related services in combination with SEIS, the SEIS provider is responsible for the coordination of such services. <p>(Department of Education, New York State, 2017)</p>	
<p>2.2. Involvement of parents/carers in the rehabilitation plan</p>		
<ul style="list-style-type: none"> ● Parent/ carers are invited to have an interview with the assessor during the assessment to acquire the child’s medical history, current health and level of functioning with various skills and interactions in various settings. (Department of Community & Disability Services, Government of Western Australia, 2017) 	<ul style="list-style-type: none"> ● Families must be involved in the IFSP and IEP process ● Written parental consent is necessary for child’s evaluation and delivery of services ● Parents regularly informed of their child’s progress towards annual goals (Johnson, 2001) 	<ul style="list-style-type: none"> ● As suggested by Chang (2009) ● The team will discuss with the family about the assessment result, the recommendations of rehabilitation service and family service ● The interdisciplinary team would then design the Individualized Family Service Plan (IFSP) with the family ● To empower and enable family as a supporting system for the children with special needs
<p>2.3. Frequency and form of training for parents</p>		
<p><u>Noah’s Kids Together Program</u></p> <ul style="list-style-type: none"> ● Noah’s Kids Together Program supplies training tools and strategies to parents that they could implement them in the Early Childhood Education and Care Centre and at home. ● The key worker of Noah’s Kids Together Program provides coaching for parents during home visits which assists parents to develop skills and help them work better with external therapists. ● Parents reported of building knowledge and skills to 	<p><u>Parent Training and Information Centre & Community Parent Resource Centre</u></p> <ul style="list-style-type: none"> ● provides families information about the disability of their child, early intervention services (for babies and toddlers), school services (for school-aged children), therapy, local policies, transportation, etc. while Community Parent Resource Centre offer parents similar type of support and training (Centre for Parent Information and Resources, 2017). 	<p><u>Itinerant service</u></p> <ul style="list-style-type: none"> ● The team would assist parents in applying subsidies and encourage them to do training with children at home ● Counselling for parents would also be provided (Yeh, 2009)

<p>support their child over the year (Clapham, Manning, Williams, O'Brien, & Sutherland, 2017)</p>	<p><u>Parent-to-Parent Program</u></p> <ul style="list-style-type: none"> ● provides platform to match novice parents of children with special needs (i.e. referred parents) with experienced and trained parents having children with similar disabilities (i.e. support parents). <p><u>Resources for parents in the state of New York</u></p> <ul style="list-style-type: none"> ● There are many publications available as resources for parents of students with disabilities ● Special Education Parents Centres ● Programs and services are provided for parents and families of children with disabilities by 14 parent centres located across New York State ● Technical Assistance Alliance for Parent Centers (Department of Education, New York State, 2017) 	
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2.4. The mode of communication and collaboration with teaching personnel

<ul style="list-style-type: none"> ● The teaching personnel receive itinerant and telephone consultation from specialist workers. It may include one-to-one consultation. (Department of Education and Training, Australian Government, 2017) ● Meeting is held at least once per term to identify resources and staffing options in the Program Support Group (PSG) in Kindergarten Inclusion Support (KIS) package of Victoria, Australia. (Department of Education and Training, Australian Government, 2017) ● An additional assistant is allocated for each funded kindergarten in Kindergarten Inclusion Support (KIS) 	<p><u>Multi-disciplinary team components:</u></p> <p>The team is responsible to determine eligibility for special education services for preschool students with disabilities and to develop the IEP for each student. The team includes:</p> <ul style="list-style-type: none"> ● The parent or guardian ● A district designee ● A special education provider (such as a special education teacher, speech pathologist, etc.) ● A general education teacher ● The staff who have assessed to the child, or someone who understands the assessment procedures used with the child 	<ul style="list-style-type: none"> ● Digitization of special education administration and establishment of administrative support networks are available (Ministry of Education, 2014). The system is accessible for teachers and case managers to keep track of the progress of the students and inform teachers of the next learning stage to enhance transition.
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package of Victoria, Australia as a member of the team delivering the kindergarten program. (Department of Education and Training, Australian Government, 2017)

and is familiar with the results

- Other members may include those determined by the school (e.g., interpreter, psychologist, counselor)
 - Other individuals you invite to the meeting who have knowledge of the child (e.g., friend of parents, or a Regional Centre representative if the child is a Regional Centre client)
- (Exceptional Family Resource Centre, 2013)

Designated service coordinator

- As stated in IDEA Part C, each eligible child and their family must be provided with one service coordinator.
- He/ She is responsible for: coordinating all services across agency lines, facilitating connections between families and potential supports and serving as the single point of contact in helping parents obtain the services and assistance they need.
- Child Find coordination includes many components which are a part of service coordination.

Eligibility of service coordinator

- In many areas, early childhood special education teachers may be expected to become service coordinators. Those who have not had training in family systems theory, in understanding the requirements of federal and state legislation, and in local service delivery systems must seek this training before accepting such a responsibility
- Flexibility in the choice of service coordinator and in the

model of service coordination implemented

- Older children or children (older than 3) whose disabilities are not severe enough to be deemed eligible for service coordination will look elsewhere for assistance in navigating the service delivery maze.

(Department of Education, New York State, 2015; US Department of Education, 2017)

Role of IEP facilitator in New York State

- helps members of the committee on special education (CSE) or committee on preschool special education (CPSE) identify the needs of the child and develop an IEP everyone can agree with;
- helps the committee (CSE/CPSE) in solving problems and disagreements about the IEP;
- does not offer legal, regulatory or policy advice, but may need to clarify (explain) when more information is needed;
- helps keep open communication among all members of the committee (CSE/CPSE);
- helps committee (CSE/CPSE) members develop and ask questions for better understanding;
- helps committee (CSE/CPSE) members stay on task and within the time set aside for the meeting;
- maintains fairness and does not take sides, place blame or determine if a particular decision is right or wrong;
- does not force a decision on the group;
- is not a member of the CSE or CPSE; and does not act as

	<p>chairperson of the meeting. (Department of Education, New York State, 2017)</p>	
<p>2.5. Frequency and form of training for teachers</p>		
<ul style="list-style-type: none"> A variety of specialist trainings, including coaching, collaborative consultation, modelling, information sharing and trans-disciplinary team peer learning, are provided to teachers for learning the skills and technique in working with disabled children. (Clapham, Manning, Williams, O'Brien, & Sutherland, 2017) 	<p><u>Itinerant teaching-collaborative/consultative model</u></p> <ul style="list-style-type: none"> Act as the consultant for other adults (i.e. teachers, caregivers, parents, family members) Provide IEP-based instruction and engage in problem solving to implement interventions embedded in everyday learning opportunities (Odom et al., 1999) <p><u>Classroom observation and coaching</u></p> <ul style="list-style-type: none"> therapists are present in the classroom to develop relationships with the teacher, and understand the curriculum so that they can design interventions that easily integrate into the classroom by finding natural learning opportunities to work on a specific child's goal therapist can also coach the teacher and assistants, evaluated the child's performance, and provide one-on-one services (Rainforth & York-Barr, 1997) <p><u>3-and-1 model</u></p> <ul style="list-style-type: none"> therapist dedicates 1 week a month to consultation and collaboration with the teacher indirect service can be spent creating new materials and adapted devices for the child (Annet, 2004). <p><u>National Centres with Resources to Support Professional</u></p>	<p><u>Itinerant service</u></p> <ul style="list-style-type: none"> Consultation for teachers on teaching strategy, implementation of the IEP According to the service model proposed by Syin-Lu Social Welfare Foundation, each consultation would be 60 mins Teaching materials would be designed and provided Therapists and SCCWs (特教老師) would provide 2 case-sharing seminars each year for the KGs receiving itinerant service, sharing on a successful or challenging case Information is provided in school transition by therapists and SCCW and the case information would be transferred to the teachers in the next education stage According to a survey interviewing 25 itinerant teachers, the most significant service provided to KGs/KG-cum-CCCs was "Assessment by therapists team", followed by "in-class counselling", "case conference" and "designing IEP" (Tsai, 2009)

	<p><u>Development on Inclusion</u></p> <ul style="list-style-type: none"> ● Training modules, training kits, researches and practical strategies available for professional development ● Website linked to an archived webinar (Web-based seminar) series with information about supports and resources to promote early childhood inclusion (Early Childhood Technical Assistance Centre, 2017) 	
<p>2.6. Mechanism to track progress of individual cases</p>		
<ul style="list-style-type: none"> ● In Victoria, Australia, Program Support Group (PSG) is set up in each kindergarten as a component of the Kindergarten Inclusion Support (KIS) Program and a teacher serves as a convener. ● The Group brings together key people to support the planning for inclusion of children with disabilities from the time of enrolment in a kindergarten program and it meets at least once per term as a review of education plan. (Department of Education and Training, Australian Government, 2017) 	<ul style="list-style-type: none"> ● When a child was found to be with a “disability” as defined by IDEA, he/ she is eligible for special education and related services ● IEP team has to meet and write an IEP for the child within 30 calendar days ● IEP specifies the roles and responsibilities of each participant ● After an IEP is written, parents are given with a copy of the IEP ● Annual goals will be measured and parents are periodically informed about the progress ● IEP will be reviewed by the IEP team at least once a year, or more often if the parents or school ask for a review ● At least every three years, the child must be reevaluated (Centre for Parent Information and Resources, 2017) 	<p><u>Itinerant service</u></p> <ul style="list-style-type: none"> ● Special teachers would review the implementation of the IEP and evaluate the achievement of the plans. ● They would make necessary adjustments and arrangements for the IEP <p>(Tsai, 2009)</p>
<p>2.7. Other value –added services</p>		
<p><u>Noah’s Kids Together Program</u></p> <ul style="list-style-type: none"> ● Using a key worker transdisciplinary team approach, with the support from the allied health and educational professional, working with children with disabilities 	<p><u>Prevention and Early Intervention Mobile Services Clinics under “Preschool 0-5 program”</u></p> <ul style="list-style-type: none"> ● Implemented by the Riverside County Department of Mental Health 	<ul style="list-style-type: none"> ● The government would assist KGs with the admission of children with special needs, subsidizing teaching materials and equipment ● Promoting outreaching service, including training at home

<p>within Early Childhood Education and Care centres (ECEC), at home and in the community</p> <ul style="list-style-type: none"> ● Evaluative study on Noah’s Kids Together Program (Clapham et al., 2017) attributed the success to the key worker model as follow: <ol style="list-style-type: none"> 1. The key worker simplified the coordination of therapies, acted as the link to all services, provided benefits for children and families 2. The model worked across all of the environments where children with disabilities lived and played 3. Parents and carers were supported by regular communication and advices about child’s progress 4. ECEC centre staff capacity was built through multiple training opportunities by coaching, modelling, training and information sharing <p><u>Northern Preschool Program in Northern Australia’s Territory</u></p> <ul style="list-style-type: none"> ● offers mobile preschool services to children from indigenous communities in the Northern remote part of Australia. ● includes training local Indigenous community member to deliver preschool programs under the support and supervision of regularly visiting, qualified and registered early childhood teachers from the nearest regional centre ● aimed at providing preschool experiences to from 3-5 years old in very remote communities ● promoted as an access point for health, development, 	<ul style="list-style-type: none"> ● the three mobile recreational vehicles as mental health clinics travelled to three regions of Riverside County ● the units are custom-built recreational vehicles, fitted with a playroom and observation room, with a one-way mirror for observation of therapy sessions, which are monitored in real-time during parent-child clinical treatment ● they travel to school campuses, provide service for families who cannot access assistance due to transportation, financial or health coverage barriers ● aimed at providing an early intervention and treatment services designed to promote social competence and decrease the development of disruptive behavior disorders among children age 0-5 ● the team comprised of two therapists servicing on each mobile unit, with auxiliary support provided by a staff psychologist, mental health services supervisor and psychiatry residents ● they provides counseling, parenting classes and consultations on the mobile unit <p>(Fernandez, 2016)</p>	<p>and at school (Ho, 2009)</p> <p><u>Itinerant service</u></p> <ul style="list-style-type: none"> ● Assist in the case transferal and counselling when the children are promoted to primary schools (Tsai, 2009) <p><u>Home-based rehabilitation service</u></p> <ul style="list-style-type: none"> ● Service Target: <ul style="list-style-type: none"> ● 0-6 yrs old children with developmental delays <ol style="list-style-type: none"> 1. limited abilities, such as poor language proficiency and incapable cognitive ability etc, which may affect the efficacy of the early intervention 2. Cannot receive early intervention service due to poverty, remote location or any other family factors 3. Do not receive any rehabilitation service in kindergartens or rehabilitation centres 4. Any other cases approved by the Child Early Intervention Centre of Taipei County Government ● Service Model: <ul style="list-style-type: none"> ● By applying trans-disciplinary model, the team would provide early intervention assessment and service at children’s home. The team would also recommend and design the home-based intervention plan, with clear instructions to the carers. <p>(Department of Social Welfare, New Taipei City Government, 2017)</p>
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<p>nutrition and parenting information and activities</p> <ul style="list-style-type: none">● a local community member coordinates the day session, typically 10-15 hours a week● they are supported by a travelling early childhood teacher● the teacher is responsible for training local staff, programming, planning and assessment across a maximum of 5 sites <p>(Nutton et al., 2011)</p>		
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