

Special Education – Early Childhood Special Education
Endorsement Guidelines

DRAFT #7—**3.19.13** Includes new (2012) CEC Standards

REDLINE VERSION

To Accompany Rule 24

(Adopted by the State Board
of Education on _____/20__)

006.58 Special Education – Early Childhood Special Education

006.58A Grade Levels: Birth through ~~Grade 3~~ Kindergarten

006.58B Endorsement Type: Subject

006.58C Persons with this endorsement may teach, coordinate, or serve as a consultant to programs for ~~infants, toddlers, preprimary, and primary-aged~~ children, ages birth through kindergarten, who have a range of disabilities, with special developmental and/or learning needs as defined in Section 79-1118.01 R.R.S., and services to support families and other personnel with responsibilities for their care and education.

006.58C1 Candidates for this endorsement must hold or have held a valid teaching certificate.

006.58D Certification Endorsement Requirements: This endorsement shall require a minimum of ~~27~~ 30 graduate semester hours ~~related to~~ including a minimum of 12 graduate semester hours in Early Childhood Education and Special Education; and a minimum of 18 graduate semester hours in Early Childhood Special Education; and 100 clock hours of related field experiences.

006.58D1 Field experiences shall consist of a minimum of 100 clock hours ~~(total) working with young children, with a range of disabilities,~~ birth through kindergarten, including those with special developmental and/or learning needs. At least 20 clock hours will be spent ~~with~~ assisting families and children with verified disabilities in each of the following ~~three~~ three age groups: ~~infants/toddlers, preprimary, and primary-preschool (ages 3-5), and kindergarten.~~

006.58E Endorsement Program Requirements: Nebraska teacher education institutions offering this endorsement program must have on file, within the institution, a plan which identifies the courses and the course completion requirements which the institution utilizes to grant credit toward completion of this endorsement.

**THE FOLLOWING ARE RECOMMENDED GUIDELINES
FOR INCLUSION AS PART OF THE INSTITUTION'S PLAN
UNDER THIS ENDORSEMENT.**

Through the courses identified in its plan, the institution must provide Early Childhood Special Education teacher candidates with opportunities to demonstrate the dispositions and competencies required by the following guidelines, based on Council for Exceptional Children (CEC) Standards (2012) and the Special Education Early Childhood Specialty Set, (Draft, 2013).

Initial Standard 1. Learner Development and Individual Learning Differences

Beginning special education professionals understand how disabilities may interact with development and learning and use this knowledge to provide meaningful and challenging learning experiences for individuals with disabilities.

Element 1.1 Beginning special education professionals understand how language, culture, and family background influence the learning of individuals with disabilities.

Element 1.2 Beginning special education professionals use understanding of development and individual differences to respond to the needs of individuals with disabilities.

Indicators include, but are not limited to: (Common Core Indicators are assumed.)

(ECSE1 K1) Theories of typical and atypical early childhood development.

(ECSE1 K2) Biological and environmental factors that affect pre-, peri-, and postnatal development and learning.

(ECSE1 K3) Specific disabilities, including the etiology, characteristics, and classification of common disabilities in infants and young children, and specific implications for development and learning in the first years of life.

(ECSE1 K4) Impact of medical conditions and related care on development and learning.

(ECSE1 K5) Impact of medical conditions on family concerns, resources, and priorities.

(ECSE1 K6) Factors that affect the mental health and social-emotional development of infants and young children.

(ECSE1 K7) Infants and young children develop and learn at varying rates.

(ECSE1 K8) Impact of child's abilities, needs, and characteristics on development and learning.

(ECSE1 K9) Impact of social and physical environments on development and learning.

(ECSE1 K10) Impact of language delays on cognitive, social-emotional, adaptive, play, temperament and motor development.

(ECSE1 K11) Impact of language delays on behavior.

Initial Standard 2. Learning Environments

Beginning special education professionals create safe, inclusive, culturally responsive learning environments so that individuals with disabilities become active and effective learners and develop emotional well-being, positive social interactions, and self-determination.

- Element 2.1 Beginning special education professionals through collaboration with general educators and other colleagues create safe, inclusive, culturally responsive learning environments to engage individuals with disabilities in meaningful learning activities and social interactions.
- Element 2.2 Beginning special education professionals use motivational and instructional interventions to teach individuals with disabilities how to adapt to different environments.
- Element 2.3 Beginning special education professionals know how to intervene safely and appropriately with individuals with disabilities in crisis.

Indicators include, but are not limited to:

- (ECSE2 S1) Select, develop, and evaluate developmentally and functionally appropriate materials, equipment, and environments.
- (ECSE2 S2) Organize space, time, materials, peers, and adults to maximize progress in natural and structured environments.
- (ECSE2 S3) Embed learning opportunities in everyday routines, relationships, activities, and places.
- (ECSE2 S4) Structure social environments, using peer models and proximity, and responsive adults, to promote interactions among peers, parents, and caregivers.
- (ECSE2 S5) Provide a stimulus-rich indoor and outdoor environment that employs materials, media, and adaptive and assistive technology, responsive to individual differences.
- (ECSE2 S6) Implement basic health, nutrition and safety management procedures for infants and young children.
- (ECSE2 S7) Use evaluation procedures and recommend referral with ongoing follow-up to community health and social services.

Initial Standard 3. Curricular Content Knowledge

Beginning special education professionals use knowledge of general and specialized curricula to individualize learning for individuals with disabilities.

- Element 3.1 Beginning special education professionals understand the central concepts, structures of the discipline, and tools of inquiry of the content areas they teach, and can organize this knowledge, integrate cross-disciplinary skills, and develop meaningful learning progressions for individuals with disabilities.
- Element 3.2 Beginning special education professionals understand and use general and specialized content knowledge for teaching across

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curricular content areas to individualize learning for individuals with disabilities.

Element 3.3 Beginning special education professionals modify general and specialized curricula to make them accessible to individuals with disabilities.

(No additional Indicators other than Common Core Indicators.)

Initial Standard 4. Assessment

Beginning special education professionals use multiple methods of assessment and data-sources in making educational decisions.

Element 4.1 Beginning special education professionals select and use technically sound formal and informal assessments that minimize bias.

Element 4.2 Beginning special education professionals use knowledge of measurement principles and practices to interpret assessment results and guide educational decisions for individuals with disabilities.

Element 4.3 Beginning special education professionals in collaboration with colleagues and families use multiple types of assessment information in making decisions about individuals with disabilities.

Element 4.4 Beginning special education professionals engage individuals with disabilities (~~to work toward~~) in quality learning and performance and provide feedback to guide them.

Indicators include, but are not limited to:

(ECSE4 K1) Role of the family in the assessment process.

(ECSE4 K2) Legal requirements that distinguish among at-risk, developmental delay and disability.

(ECSE4 K3) Alignment of assessment with curriculum, content standards, and local, state, and federal regulations.

(ECSE4 S1) Assist families in identifying their concerns, resources, and priorities.

(ECSE4 S2) Integrate family priorities and concerns in the assessment process.

(ECSE4 S3) Assess progress in the five developmental domains, play, and temperament.

(ECSE4 S4) Select and administer assessment instruments in compliance with established criteria.

(ECSE4 S5) Use informal and formal assessment to make decisions about infants and young children's development and learning.

(ECSE4 S6) Gather information from multiple sources and environments.

(ECSE4 S7) Use a variety of materials and contexts to maintain the interest of infants and young children in the assessment process.

(ECSE4 S8) Participate as a team member to integrate assessment results in the development and implementation of individualized plans.

(ECSE4 S9) Emphasize child's strengths and needs in assessment reports.

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- (ECSE4 S10) Produce reports that focus on developmental domains and functional concerns; address development across domains and any functional concerns identified in routine natural learning environments.
- (ECSE4 S11) Conduct ongoing formative child, family, and setting assessments to monitor instructional effectiveness.

Initial Standard 5. Instructional Planning and Strategies

Beginning special education professionals select, adapt, and use a repertoire of evidence-based instructional strategies to advance learning of individuals with disabilities.

- Element 5.1 Beginning special education professionals consider an individual's abilities, interests, learning environments, and cultural and linguistic factors in the selection, development, and adaptation of learning experiences for individual with disabilities.
- Element 5.2 Beginning special education professionals use technologies to support instructional assessment, planning, and delivery for individuals with disabilities.
- Element 5.3 Beginning special education professionals are familiar with augmentative and alternative communication systems and a variety of assistive technologies to support the communication and learning of individuals with disabilities.
- Element 5.4 Beginning special education professionals use strategies to enhance language development and communication skills of individuals with disabilities.
- Element 5.5 Beginning special education professionals develop and implement a variety of education and transition plans for individuals with disabilities across a wide range of settings and different learning experiences in collaboration with individuals, families, and teams.
- Element 5.6 Beginning special education professionals teach to mastery and promote generalization of learning.
- Element 5.7 Beginning special education professionals teach cross-disciplinary knowledge and skills such as critical thinking and problem solving to individuals with disabilities.

Indicators include, but are not limited to:

- (ECSE5 K1) Concept of universal design for learning.
- (ECSE5 K2) Theories and research that form the basis of developmental and academic curricula and instructional strategies for infants and young children.
- (ECSE5 K3) Developmental and academic content.
- (ECSE5 K4) Connection of curriculum to assessment and progress monitoring activities.

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- (ECSE5 S1) Plan, implement, and evaluate developmentally appropriate curricula, instruction, and adaptations based on knowledge of individual children, the family, and the community.
- (ECSE5 S2) Facilitate child-initiated development and learning.
- (ECSE5 S3) Use teacher-scaffolded and initiated instruction to complement child-initiated learning.
- (ECSE5 S4) Link development, learning experiences, and instruction to promote educational transitions.
- (ECSE5 S5) Use individual and group guidance and problem-solving techniques to develop supportive relationships with and among children.
- (ECSE5 S6) Use strategies to teach social skills and conflict resolution.
- (ECSE5 S7) Use a continuum of intervention strategies to support access of young children in the general curriculum and daily routines.
- (ECSE5 S8) Implement and evaluate preventative and reductive strategies to address challenging behaviors.
- (ECSE5 S9) Develop, implement, and evaluate individualized plans, with family members and other professionals, as a member of a team.
- (ECSE5 S10) Plan and implement developmentally and individually appropriate curriculum.
- (ECSE5 S11) Design intervention strategies incorporating information from multiple disciplines.
- (ECSE5 S12) Implement developmentally and functionally appropriate activities, using a variety of formats, based on systematic instruction.
- (ECSE5 S13) Align individualized goals with developmental and academic content.
- (ECSE5 S14) Develop individualized plans that support development and learning as well as caregiver responsiveness.
- (ECSE5 S15) Develop an individualized plan that supports the child's independent functioning in the child's natural environments.
- (ECSE5 S16) Make adaptations for the unique developmental and learning needs of children, including those from diverse backgrounds.

Initial Standard 6. Professional Learning and Ethical Practice

Beginning special education professionals use foundational knowledge of the field and the their professional Ethical Principles and Practice Standards to inform special education practice, to engage in lifelong learning, and to advance the profession.

- Element 6.1 Beginning special education professionals use professional Ethical Principles and Professional Practice Standards to guide their practice.
- Element 6.2 Beginning special education professionals understand how foundational knowledge and current issues influence professional practice.
- Element 6.3 Beginning special education professionals understand that diversity is a part of families, cultures, and schools, and that complex human issues can interact with the delivery of special education services.

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- Element 6.4 Beginning special education professionals understand the significance of lifelong learning and participate in professional activities and learning communities.
- Element 6.5 Beginning special education professionals advance the profession by engaging in activities such as advocacy and mentoring.
- Element 6.6 Beginning special education professionals provide guidance and direction to paraeducators, tutors, and volunteers.

Indicators include, but are not limited to:

- (ECSE6 K1) Legal, ethical, and policy issues related to educational, developmental, and medical services for infants and young children, and their families.
- (ECSE6 K2) Advocacy for professional status and working conditions for those who serve infants and young children, and their families.
- (ECSE6 S1) Recognize signs of emotional distress, neglect, and abuse, and follow reporting procedures.
- (ECSE6 S2) Integrate family systems theories and principles into professional practice.
- (ECSE6 S3) Respect family choices and goals.
- (ECSE6 S4) Apply models of team process in early childhood.
- (ECSE6 S5) Participate in activities of professional organizations relevant to early childhood special education and early intervention.
- (ECSE6 S6) Apply evidence-based and recommended practices for infants and young children including those from diverse backgrounds.
- (ECSE6 S7) Advocate on behalf of infants and young children and their families.

Initial Standard 7. Collaboration

Beginning special education professionals collaborate with families, other educators, related service providers, individuals with disabilities, and personnel from community agencies in culturally responsive ways to address the needs of individuals with exceptionalities across a range of learning experiences.

- Element 7.1 Beginning special education professionals use the theory and elements of effective collaboration.
- Element 7.2 Beginning special education professionals serve as a collaborative resource to colleagues.
- Element 7.3 Beginning special education professionals use collaboration to promote the well-being of individuals with disabilities across a wide range of settings and collaborators.

Indicators include, but are not limited to:

- (ECSE7 K1) Structures supporting interagency collaboration, including interagency agreements, referral, and consultation.
- (ECSE7 S8) Know appropriate ways to assist the family in planning for transition.

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- (ECSE7 S1) Collaborate with caregivers, professionals, and agencies to support children’s development and learning.
- (ECSE7 S2) Support families’ choices and priorities in the development of goals and intervention strategies.
- (ECSE7 S3) Implement family-oriented services based on the family’s identified resources, priorities, and concerns.
- (ECSE7 S4) Provide consultation in settings serving infants and young children.
- (ECSE7 S5) Involve families in evaluation of services.
- (ECSE7 S6) Participate as a team member to identify and enhance team roles, communication, and problem-solving.
- (ECSE7 S7) Employ adult learning principles in consulting and training family members and service providers.
- ~~(ECSE7 S8) Assist the family in planning for transition. (How assessed?)~~
- (ECSE7 S9) Implement processes and strategies that support transitions among settings for infants and young children.

The following standards may be applied to the candidates pursuing advanced degrees in early childhood special education:

Advanced Standard 1. Assessment

Special education specialists use valid and reliable assessment practices to minimize bias.

- Element 1.1 Special education specialists minimize bias in assessment.
- Element 1.2 Special education specialists design and implement assessments to evaluate the effectiveness of practices and programs.

Indicators include, but are not limited to: (Advanced Common Core Indicators are assumed.)

- (AEC1 K1) Policy and research implications that promote recommended practices in assessment and evaluation.
- (AEC1 K2) Systems and theories of child and family assessment.
- (AEC1 S1) Provide leadership in the development and implementation of unbiased assessment and evaluation procedures that include family members as an integral part of the process.
- (AEC1 S2) Provide leadership in the development and implementation of unbiased assessment and evaluation procedures for childcare and early education environments and curricula.
- (AEC1 S3) Provide leadership when selecting effective formal and informal assessment instruments and strategies.

Advanced Standard 2. Curricular Content Knowledge

Special education specialists use their knowledge of general and specialized curricula to improve programs, supports, and services at classroom, school, community, and system levels.

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Element 2.1 Special education specialists align educational standards to provide access to challenging curriculum to meet the needs individuals with disabilities.

Element 2.2 Special educators continuously broaden and deepen professional knowledge, and expand expertise with instructional technologies, curriculum standards, effective teaching strategies, and assistive technologies to support access to and learning of challenging content.

Element 2.3 Special education specialists use understanding of diversity and individual learning differences to inform the selection, development, and implementation of comprehensive curricula for individuals with disabilities.

(No additional indicators other than Advanced Common Core.)

Advanced Standard 3. Programs, Services, and Outcomes

Special education specialists facilitate the continuous improvement of general and special education programs, supports, and services at the classroom, school, and system levels for individuals with disabilities.

Element 3.1 Special education specialists design and implement evaluation activities to improve programs, supports, and services for individuals with disabilities.

Element 3.2 Special education specialists use understanding of cultural, social, and economic diversity and individual learner differences to inform the development and improvement of programs, supports, and services for individuals with disabilities.

Element 3.3 Special education specialists apply knowledge of theories, evidence-based practices, and relevant laws to advocate for programs, supports, and services for individuals with disabilities.

Element 3.4 Special education specialists use instructional and assistive technologies to improve programs, supports, and services for individuals with disabilities.

Element 3.5 Special education specialists evaluate progress toward achieving the vision, mission, and goals of programs, services, and supports for individuals with disabilities.

Indicators include, but are not limited to:

(AEC3 K1) Range of delivery systems for programs and services available for infants and young children and their families.

(AEC3 S1) Apply various curriculum theories and early learning standards, and evaluate their impact.

(AEC3 S2) Design, implement, and evaluate home and community-based programs and services.

(AEC3 S3) Integrate family and social systems theories to develop, implement, and evaluate family and educational plans.

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- (AEC3 S4) Address medical and mental health issues and concerns when planning, implementing, and evaluating programs and services.
- (AEC3 S5) Incorporate and evaluate the use of universal design and assistive technology in programs and services.
- (AEC3 S6) Use recommended practices to design, implement, and evaluate transition programs and services.
- (AEC3 S7) Design, implement, and evaluate plans to prevent and address challenging behaviors across settings.
- (AEC3 S8) Design, implement, and evaluate developmentally responsive learning environments, preventative strategies, program wide behavior supports, and tiered instruction.

Advanced Standard 4. Research and Inquiry

Special education specialists conduct, evaluate, and use inquiry to guide professional practice.

- Element 4.1 Special education specialists evaluate research and inquiry to identify effective practices.
- Element 4.2 Special education specialists use knowledge of the professional literature to improve practices with individuals with disabilities and their families.
- Element 4.3 Special education specialists foster an environment that is supportive of continuous instructional improvement and engage in the design and implementation of research and inquiry.

Indicators include, but are not limited to:

- (AEC4 S1) Create and/or disseminate new advances and evidence-based practices.
- (AEC4 S2) Apply interdisciplinary knowledge from the social sciences and the allied health fields.
- (AEC4 S3) Help others understand early development and its impact across the life span.
- (AEC4 S4) Interpret and apply research to the provision of quality services and program practices to infants and young children, and their families, in a variety of educational and community settings.

Advanced Standard 5. Leadership and Policy

Special education specialists provide leadership to formulate goals, set and meet high professional expectations, advocate for effective policies and evidence-based practices and create positive and productive work environments.

- Element 5.1 Special education specialists model respect for and ethical practice for all individuals and encourage challenging expectations for individuals with disabilities.
- Element 5.2 Special education specialists support and use linguistically and culturally responsive practices.

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Element 5.3 Special education specialists create and maintain collegial and productive work environments that respect and safeguard the rights of individuals with disabilities and their families.

Element 5.4 Special education specialists advocate for policies and practices that improve programs, services, and outcomes for individuals with disabilities.

Element 5.5 Special education specialists advocate for the allocation of appropriate resources for the preparation and professional development of all personnel who serve individuals with disabilities.

Indicators include, but are not limited to:

(AEC5 K1) Sociocultural, historical, and political forces that influence diverse delivery systems, including mental health.

(AEC5 K2) Policy and emerging trends that affect infants and young children, families, resources, and services.

(AEC5 K3) Community resources on national, state, and local levels that impact program planning and implementation, and the individualized needs of the child and family.

(AEC5 S1) Advocate on behalf of infants and young children with disabilities and their families, at local, state, and national levels.

(AEC5 S2) Provide leadership to help others understand policy and research that guide recommended practices.

(AEC5 S3) Provide leadership in the collaborative development of community-based services and resources.

(AEC5 S4) Provide effective supervision and evaluation.

Advanced Standard 6. Professional and Ethical Practice

Special education specialists use foundational knowledge of the field and professional Ethical Principles and Practice Standards to inform special education practice, engage in lifelong learning, advance the profession, and perform leadership responsibilities to promote the success of professional colleagues and individuals with disabilities.

Element 6.1 A comprehensive understanding of the history of special education, legal policies, ethical standards, and emerging issues informs special education specialist leadership.

Element 6.2 Special education specialists model high professional expectations and ethical practice, and create supportive environments that safeguard the legal rights and improve outcomes for individuals with disabilities and their families.

Element 6.3 Special education specialists model and promote respect for all individuals and facilitate ethical professional practice.

Element 6.4 Special education specialists actively participate in professional development and learning communities to increase professional knowledge and expertise.

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Element 6.5 Special education specialists plan, present, and evaluate professional development focusing on effective and ethical practice at all organizational levels.

Element 6.6 Special education specialists actively facilitate and participate in the preparation and induction of prospective special educators.

Element 6.7 Special education specialists actively promote the advancement of the profession.

Indicators include, but are not limited to:

(AEC6 K1) Specialized knowledge in at least one developmental period or one particular area of disability or delay.

(AEC6 S1) Engage in reflective inquiry and professional self-assessment.

(AEC6 S2) Participate in professional mentoring and other types of reciprocal professional development activities.

(AEC6 S3) Participate actively in organizations that represent recommended practices of early intervention and early childhood special education on a national, state, and local level.

Advanced Standard 7. Collaboration

Special education specialists collaborate with stakeholders to improve programs, services, and outcomes for individuals with disabilities and their families.

Element 7.1 Special education specialists use culturally responsive practices to enhance collaboration.

Element 7.2 Special education specialists use collaborative skills to improve programs, services, and outcomes for individuals with disabilities.

Element 7.3 Special education specialists collaborate to promote understanding, resolve conflicts, and build consensus for improving program, services, and outcomes for individuals with disabilities.

Indicators include, but are not limited to:

(AEC7 K1) Roles and responsibilities of personnel in the development and implementation of team-based early childhood special education and early intervention services.

(AEC7 K2) Theories, models, and research that support collaborative relationships.

(AEC7 S1) Implement and evaluate leadership and models of collaborative relationships.

(AEC7 S2) Collaborate with stakeholders in developing and implementing positive behavior support plans to prevent and address challenging behavior.

~~Through the courses identified in its plan, the institution should prepare teachers to:~~

~~A. Demonstrate knowledge and understanding of and be able to teach the concepts,~~

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~~skills, and processes of reading and writing, mathematics, science, and social studies as defined in the Nebraska Content Standards for first and fourth grades.~~

~~B. Child Development and Learning. The program should prepare prospective teachers to:~~

- ~~1. use knowledge of how children develop and learn to provide opportunities that support child growth and development for infants and toddlers, preprimary, and primary school children, with a range of abilities and disabilities, in the intellectual, communicative, physical-motor, social-emotional, aesthetic, and adaptive behavioral areas of development and learning;~~
- ~~2. use knowledge of how children develop and learn to provide opportunities that support individual differences in development and learning, with special attention to risk factors, developmental variations, and developmental patterns of specific disabilities and special abilities;~~
- ~~3. recognize that children are best understood in the contexts of family, culture and society and that cultural and linguistic diversity influence development and learning;~~
- ~~4. identify pre-, peri-, and postnatal development and factors such as biological and environmental conditions that affect children's development and learning; and~~
- ~~5. identify specific disabilities, including the etiology, characteristics, and classification of common disabilities in young children, and describe specific implications for development and learning in the first years of life.~~

~~C. Assessment and Evaluation. The program should prepare prospective teachers to:~~

- ~~1. assess and analyze children's developmental needs and the intervention strategies best suited to design an individualized program;~~
- ~~2. select and use a variety of informal and formal assessment instruments and procedures, including observational methods, to make decisions about children's learning and development;~~
- ~~3. select and administer assessment instruments and procedures based on the purpose of the assessment being conducted and in compliance with established criteria and standards;~~
- ~~4. develop and use authentic, performance-based assessments of children's learning to assist in planning, to communicate with children and parents, and to engage children in self-assessment;~~
- ~~5. involve families as active participants in the assessment process;~~
- ~~6. participate and collaborate as a team member with other professionals in conducting family-centered assessments;~~
- ~~7. communicate assessment results and integrate assessment results from others as an active team participant in the development and implementation of the individual education program (IEP) and individual family service plan (IFSP);~~
- ~~8. monitor, summarize, and evaluate the acquisition of child and family outcomes as outlined on the IFSP or IEP;~~
- ~~9. select, adapt, and administer assessment instruments and procedures for specific sensory and motor disabilities;~~
- ~~10. communicate options for programs and services at the next educational level and~~

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~~assist the family in planning for transition; and~~

~~11. implement culturally unbiased assessment instruments and procedures.~~

~~D. Curriculum Development and Implementation. The program should prepare prospective teachers to:~~

- ~~1. plan and implement developmental, functional, and individual curricular and instructional practices based on knowledge of individual children, the family, the community, and on-going assessment;~~
- ~~2. make specific adaptations for the special needs of children who have unique talents, learning and developmental needs, or specific disabilities;~~
- ~~3. develop an IFSP or IEP, incorporating both child and family outcomes, in partnership with family members and other professionals;~~
- ~~4. incorporate information and strategies from multiple disciplines in the design of intervention strategies;~~
- ~~5. design and implement plans that incorporate the use of technology, including adaptive and assistive technology;~~
- ~~6. develop intervention curricula and methods for children with specific disabilities including areas related to: motor, sensory, health, communication and literacy, social-emotional, and cognitive development;~~
- ~~7. encourage parent-child interactions as primary contexts for learning and development;~~
- ~~8. implement developmentally and functionally appropriate individual and group activities using a variety of formats, including play, environmental routines, parent-mediated activities, small group projects, cooperative learning, inquiry experiences, and systematic instruction;~~
- ~~9. develop and implement an integrated curriculum that focuses on children's needs and interests and takes into account culturally valued content and children's home experiences;~~
- ~~10. select and implement methods of behavior support and management appropriate for young children with special needs, including a range of strategies from less directive, less structured methods (e.g., verbal support and modeling) to more directive, more structured methods (e.g., applied behavior analysis);~~
- ~~11. design adaptations for a child's access to a stimulus-rich indoor and outdoor environment that employs materials, media, and technology, including adaptive and assistive technology;~~
- ~~12. implement nutrition and feeding strategies for children with special needs;~~
- ~~13. use appropriate health appraisal procedures and recommend referral and ongoing follow-up to appropriate community health and social services; and~~
- ~~14. integrate aspects of medical care for children who have a history of significant low birth weight, or have other complex medical needs, including methods for care of young children dependent on technology with programs focused on overall child development and family resources, concerns, and priorities.~~

~~E. Family and Community Relationships. The program should prepare prospective teachers to:~~

- ~~1. establish and maintain positive, collaborative relationships with families;~~

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- ~~a. engage in mutual problem solving with families and other professionals to design adaptations necessary for daily routine and care;~~
 - ~~b. implement a range of family-oriented services based on the family's identified resources, priorities, and concerns;~~
 - ~~c. implement family services consistent with due process safeguards;~~
 - ~~d. evaluate services with families;~~
 - ~~e. incorporate use of family-centered service coordination and provide options and choices enabling family members to advocate for the needs of their child and family;~~
 - ~~2. collaborate/consult with other professionals and with agencies in the larger community to support children's development, learning, and well-being;~~
 - ~~a. apply models of team process in diverse service delivery settings;~~
 - ~~b. participate as a team member to identify dynamics of team roles, interaction, communication, team-building, problem-solving, and conflict resolution;~~
 - ~~c. identify structures supporting interagency collaboration, including interagency agreements, referral, and consultation;~~
 - ~~d. evaluate and design processes and strategies that support transitions among hospital, home, infant/toddler, preprimary, and primary programs;~~
 - ~~3. administer, supervise, and consult with/instruct staff and other adults;~~
 - ~~a. employ adult learning principles in supervising and training staff and other adults;~~
 - ~~b. facilitate the identification of staff development needs and strategies for professional growth;~~
 - ~~c. apply various models of consultation in diverse settings;~~
 - ~~d. provide consultation and training in content areas specific to services for children and families and organization/development of programs; and~~
 - ~~e. provide staff with feedback and performance evaluations in collaboration with family members and other professionals.~~
- ~~F. Professionalism. The program should prepare prospective teachers to:~~
- ~~1. articulate the historical, philosophical, and legal basis of services for young children with special needs;~~
 - ~~2. identify ethical and policy issues related to educational, social, and medical services for young children with disabilities and their families;~~
 - ~~3. identify current trends and issues in Early Childhood Special Education, and Special Education;~~
 - ~~4. adhere to the profession's code of ethical conduct related to Early Childhood Special Education;~~
 - ~~5. serve as advocates on behalf of young children with disabilities and their families, improved quality of programs and services for young children, and enhanced professional status and working conditions for early childhood special educators; and~~
 - ~~6. read and critically apply research and recommended practices.~~
- ~~G. Field Experiences. The program should provide prospective teachers with opportunities to:~~

**Special Education – Early Childhood Special Education
Endorsement Guidelines**

DRAFT #7—**3.19.13** Includes new (2012) CEC Standards

REDLINE VERSION

To Accompany Rule 24

(Adopted by the State Board

of Education on _____/20__)

- ~~1. observe and participate under the supervision of qualified professionals in a variety of settings (including but not limited to homes, public or private centers, and community agencies) in which young children with disabilities, who reflect diverse family systems, from birth through grade 3 and their families are served;~~
- ~~2. observe and participate under the supervision of qualified professionals in each of the three age groups (infants/toddlers, preprimary, and primary). The experiences should consist of a minimum of 100 clock hours (total) working with young children with a range of disabilities, with at least 20 clock hours with each age group;~~
- ~~3. participate under supervision as an interagency and intra-agency team member; and~~
- ~~4. provide consultation services under supervision of a qualified professional in early childhood special education.~~

AD HOC MEMBERSHIP FORM (Based on Section 17.03 of the NCTE Organizational Policies)

EARLY CHILDHOOD Friday, September 16, 2011—Center for People in Need 10 AM-4 PM

MEMBERSHIP CRITERIA	NOMINEES
17.03A Three practitioners currently endorsed and employed in approved or accredited public or private schools in the endorsement area under consideration	1. Brian Carlson, Wahoo Head Start D5 bcarlso@esu2.org 2. Missy Timmerman, Beatrice D5 mtimmerman@bpsnebr.org 3. Amy LaPoint, Winnebago Head Start D3 lapointe_amy@hotmail.com
17.03B At least two faculty members from a college or department of education who are teaching professional education courses at an approved professional training institution	1. Dawn Mollenkopf, UNK D6 mollenkopfdl@unk.edu 2. Susan McWilliams, UNO D8 smcwilliams@mail.unomaha.edu
17.03C Two specialists in the area which might include academic college professors, learned society officers, or persons drawn from related professions	1. Susan Churchill, UN-L D1 schurchi@unlnotes.unl.edu 2. Jackie Florendo, Doane D5 jackie.florendo@doane.edu
17.03D Two teachers currently employed and endorsed in approved or accredited public or private schools at the grade levels and/or subject matter under consideration	(This category could be covered by appointees to 17.03A)
17.03E Two school administrators currently employed in approved or accredited public or private schools at the grade levels under consideration. At least one of the administrators must represent District Classes 2 or 3	1. Lincoln or Omaha administrators Gladys Haynes, OPS Educare D4 ghaynes@educareomaha.org 2. Classes 2 or 3 Dr. Richard Hasty, Plattsmouth D2 rhasty@pcsd.org 3. Beth Ericson, York Public Schools, D6 Beth.ericson@yorkdukes.org
17.03F One person representing the general public, e.g. PTA member or a school board member	Josie Filipi, Crete D5 josief@creteschools.org
17.03G One member of the Undergraduate or Graduate Committee, whichever is applicable.	Donna Moss, NCTE D6 dross@esu9.org
17.03H One representative of NDE	Melody Hobson, NDE Early Childhood D1 melody.hobson@nebraska.gov Jan Thelen, NDE Special Education Early Childhood D1 jan.thelen@nebraska.gov

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17.03I Additional representatives if it is a field endorsement containing multiple subject endorsements	Chris Marvin, UN-L D1 cmarvin1@unl.edu Kim Madsen, Chadron State D7 kmadsen@csc.edu
17.03J Additional approved or accredited public or private school practitioners or higher education faculty members to equalize the representation between these two groups	Peggy Romshek, Mitchell D7 promshek@panesu.org
17.03K The NDE designee, who will be a non-voting member and serve as a consultant for the committee	Marge Harouff, NDE Consultant Sharon Katt, NDE Pat Madsen, NDE Marlene Beiermann, NDE