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# **STARS**

## **Statewide Training and Regional Support**

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Lee Mitchener Tolbert Center for  
Developmental Disabilities - University  
of Oklahoma Health Sciences Center

Annual Report - 2003

Overview - 2004

July, 2003



# STARS

## Statewide Training & Regional Support

### Mission

The mission of STARS is to support the provision of individualized, comprehensive, multidisciplinary, family-centered, community-based programs and services for people with disabilities through a coordinated statewide training system.

### Philosophy

STARS training workshops are built upon the following philosophies and beliefs:

- Training should be focused on the learner, not the person with a disability.
- Services are to be provided in the person's naturally occurring or least restrictive environment and focus on the individual's, family's and care-provider's concerns and needs.
- Interdisciplinary or transdisciplinary are the preferred models of service delivery in which a high degree of interaction and communication occurs among team members and family members and/or care-providers are equal members of the team.
- Person's who attend STARS trainings listen to the desires for the person with a disability, assist the care-providers in identifying strategies to meet their outcomes and supply the technical assistance and coaching the person needs to carry out their plan. Care-providers are acknowledged as the source for information and perspective regarding their child and culture.
- The privacy of people with disabilities and their families is respected and decisions of families are honored.
- Individuals interacting with families recognize , acknowledge, respect and build upon the ethnic, cultural, and socioeconomic diversity of each family. They demonstrate a desire and commitment to learn from the family, care-providers and community as much as they desire to share their knowledge and expertise.
- Persons not present for discussions and interaction are talked about only in ways in which they would be referred if present.
- The people-first philosophy is used in all communication and interactions. People are considered people first and are not identified by their disability, race, background, culture or socioeconomic status. Children are not "CP kids" but are children with cerebral palsy, nor is a mother referred to as "a teenage mom," but rather a mother who is seventeen. The person always comes first and unless pertinent to the topic , the disability, race, etc. need not be automatically attached.

## Beliefs about Personnel Development

- Personnel development should be an integrated part of the early intervention service delivery system.
- Personnel development should assist individuals to achieve expected competencies.
- Personnel development should be ongoing based on individual and team development plans.
- Personnel development opportunities should be provided at the lowest level possible.
- Personnel development occurs through multiple learning opportunities that include coaching by team leaders, mentoring by team leaders or peers, "just in time" learning/training, individual exploration, group training by team leader, and "outside" training.
- Every team needs a leader or leadership team to guide it's development and ensure ongoing superior performance.
- Team leaders are responsible for ongoing development of the team and individual team members.
- Assessment of an individual's professional development should be part of the individual's performance appraisal process.
- Team leaders should be trained how to support teams and individuals through the processes of coaching, mentoring, confronting, training and group process facilitation.
- Team leaders need to receive ongoing coaching and support from state level staff, consultants and other team members.

## Workshop Criteria

- Focus on evidence-based practice.
- May focus on specific age groups while keeping in mind life span issues related to the topic.
- Have an interdisciplinary focus.
- Provide follow-up activities and assignments for participants.
- Require that participants develop a "back home plan" for sharing applying newly learned skills and sharing information with other members of their team.
- Provide "hands on" learning opportunities or have direct applicability to the target population.

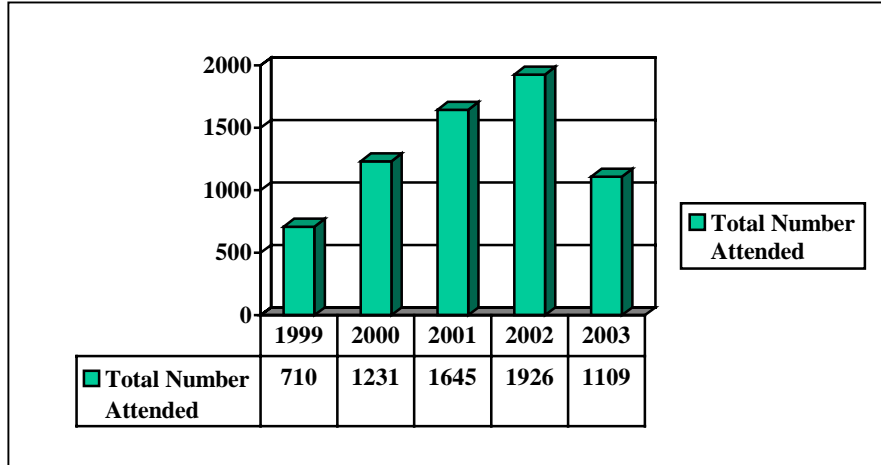
- Feature instructors who have familiarity with the target audience(s) and how to apply the content to those intervention settings
- Provide information that is directed to the learner, not the child or person with a disability.
- Provide information that is applicable in least restrictive or natural environments.

## Advisory Board

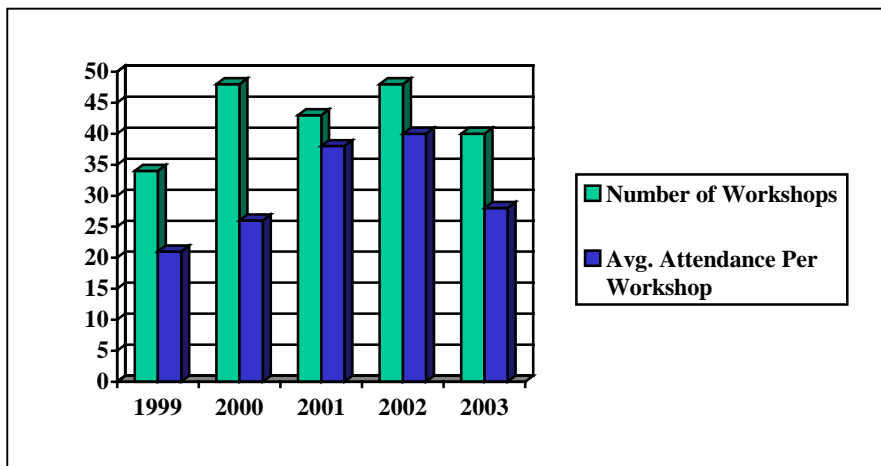
Julie Smith	STARS Training Coordinator	Tolbert Center
April Bennett	Parent - Early Intervention	
Margaret Bergant	Associate Director – Alternate Assessment, CSPD, and Grants	OSDE
Sherry Blazi	Social Worker	SoonerStart
Traci Castles	Family Services Coordinator	Tolbert Center
Caroline Clark	State Plan Grant Coordinator	OCCY
Danette Daniels	Child Development Specialist	SoonerStart
Carol Johnson	Nurse	SoonerStart
Treasa Lansdowne	Early Intervention Administrator	OSDE
Stephanie Littleton	Resource Coordinator	SoonerStart
Lynne McElroy	Nutritionist	OSDH
Beth Martin	Speech Services Supervisor	OSDH
Earlene Mason	Vision Consultant	SoonerStart
Michele Presley	Regional Coordinator	SoonerStart
Glenda Rogers	Early Intervention Coordinator	OSDH
Paula Brown	Disabilities / Mental Health Manager	Head Start
Lou Scott	Regional Coordinator	SoonerStart
Mark Sharp	Associate Director, Special Education Services	OSDE
Michelle Simon	Resource Coordinator	SoonerStart
Shannon Thomas	Resource Coordinator	SoonerStart
Angie Valdez	Lead Clinician	SoonerStart
Amber Villines-Hackney	619 Coordinator	OSDE
VACANT	Local School Teacher	
VACANT	Local School Related Service Provider	
VACANT	Parent – Preschool	
VACANT	Parent - School-age	

# STARS Attendance Report July 2002 – June 2003

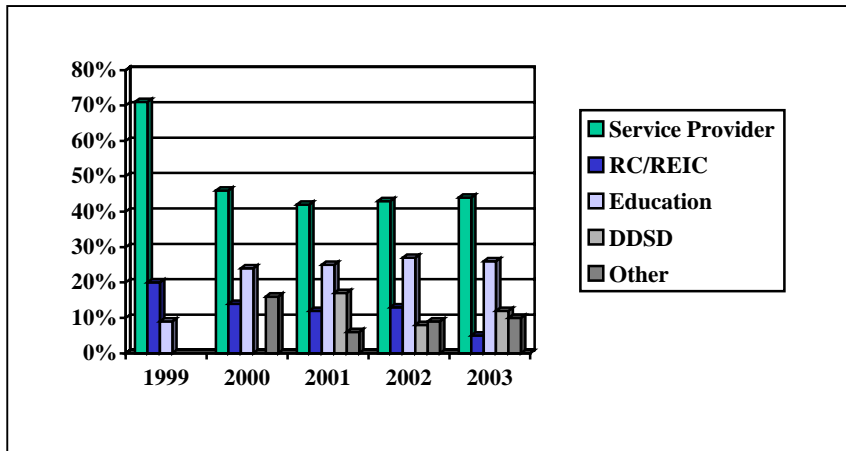
## Total Attendance



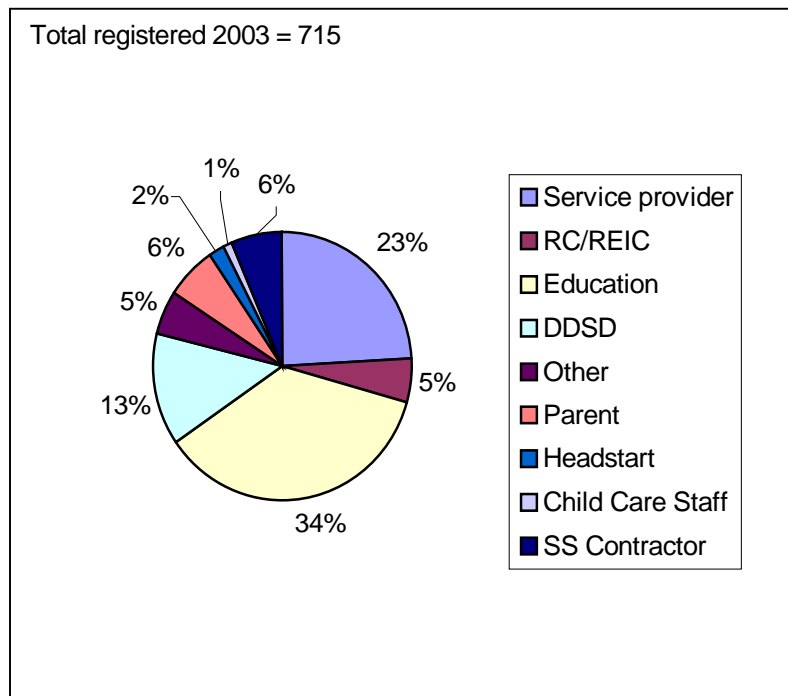
## Number of Workshops & Average Workshop Attendance



## Attendance By Type of Participant



## Registrations for 2003



# STARS Needs Assessment Results 2004

STARS consists of basic and intermediate level workshops organized in five different areas: development and intervention, evaluation and assessment, assistive technology, medical concerns, and professional topics. Annually, a needs assessment is sent to all service providers and service coordinators, Section 619 Preschool providers, Part B special education teachers and related service providers, Head Start, childcare providers, and Department of Human Services – Developmental Disabilities Services Division related service providers. Priorities are set and technical assistance planned primarily based on the results of the needs assessment, on results from program monitoring, and on current best practices. The information below summarizes the results of the STARS Needs Assessment for 2004.

## General Information

### Completed Surveys: 308

111	SoonerStart	53	School Personnel
3	OSDH Guidance	1	Preschool Teacher
62	Service Providers	1	Regular Teacher
25	Regional/Resource Coord	13	Related Service Personnel
21	Contract Service Provider	36	Special Education Teacher
71	DDSD	1	Oklahoma School for the Blind
2	Headstart	9	Other
18	Parent	44	No response

### Years working with people with disabilities

20	less than 2 years	150	10+ years
50	2-5 years	47	No response
41	6-9 years		

### Length of training time preferred:

One full day

### Preferred training days:

48	Monday	95	Friday
49	Tuesday	6	Weekend
47	Wednesday	46	No response
17	Thursday		



Topic	#	Audience	Attend		
			Any-where	OKC	Tulsa
Challenging behaviors	92	EI, PS, S	6	48	38
Stress reduction techniques for families	90	EI, PS, S, DDSD	6	39	45
Autism and spectrum disorders	86	EI	6	41	39
Common syndromes and conditions overview	80	EI, PS, S, DDSD	2	38	40
Mental health: anxiety in early childhood	76	EI, PS, S, DDSD	6	35	35
Brain development	66	EI, PS, S, DDSD	7	27	32
Mental health: bi-polar disorder in early childhood	61	EI, PS, S, DDSD	2	33	26
Autism and spectrum disorders	60	PS, S, DDSD	4	29	27
Feeding: Oral motor and feeding skills	58	EI, PS, S, DDSD	7	31	20
Alternative therapeutic interventions	55	EI, PS, S, DDSD	4	29	22
Community-based interventions	55	PS, S, DDSD	6	26	23
Sensory Processing	55	EI, PS, S, DDSD	5	30	20
Age-appropriate functional interventions	54	S, DDSD	4	27	23
Seizure disorders	53	EI, PS, S, DDSD	2	26	25
Poverty and its effects on the family	51	EI, PS, S, DDSD	2	23	26
Medical terminology: Understanding and explaining	49	EI, PS, S, DDSD	6	16	27
Conflict resolution in a win-win way	47	EI, PS, S, DDSD	1	28	18
Evidence based practices	46	EI, PS, S, DDSD	2	24	20
Families and crisis	46	EI, PS, S, DDSD	1	21	24
Basic Spanish	45	EI, PS, S, DDSD	2	25	18
Grant-writing and identifying alternative funding for school needs	44	PS, S	3	26	15
Issues and strategies for working with children with severe and multiple disabilities	44	EI, PS, S	2	23	19
Mental health: families and depression	44	EI, PS, S, DDSD	1	23	20
Parenting issues	43	EI, PS, S	4	22	17
Learner directed intervention	42	EI, PS, S, DDSD	4	17	21
Advocacy and caregiver organizations	39	EI, PS, S, DDSD	1	21	17
Hearing: Functional sign language – introduction	39	EI, PS, S, DDSD	1	13	25
Prematurity: Medical issues in the Neonatal Intensive Care Unit	39	EI	5	15	19
Feeding: Infants born prematurely	38	EI	4	17	17
Battelle Developmental Inventory: Administration and scoring	36	EI, PS	3	18	15

Topic	#	Audience	Attend		
			Any-where	OKC	Tulsa
Curriculum adaptations in the schools for successful inclusion	36	PS, S	3	23	10
Transitioning from hospital to home / IFSP development	36	EI	3	13	20
Vision: Active learning for children with visual impairments	36	EI, PS, S	4	18	14
Vocational placements for people with disabilities	36	S, DDSD	1	16	19
Professional writing skills	35	EI, PS, S, DDSD	2	20	13
The impact of mental health issues on the parent child relationship and child development	34	EI, PS, S	2	14	18
Assistive technology and funding	33	EI, PS, S, DDSD		15	18
Issues in ethics	33	EI, PS, S, DDSD	1	20	12
Parent-child attachment and bonding issues	33	EI, PS	2	16	15
Transitioning from school services	33	S, DDSD	1	18	14
Augmentative communication: Assessment and intervention	32	EI, PS, S, DDSD	2	14	16
Cultural diversity	32	EI, PS, S, DDSD	2	14	16
How to write an effective IEP	32	PS, S	3	20	9
Vision: Cortical visual impairment	32	EI, PS, S	3	11	18
Awareness of Meth Labs	31	EI, DDSD	5	12	14
Early childhood services in childcare settings	31	EI, PS		19	12
Picture exchange communication system: Follow-up	31	EI, PS, S, DDSD		16	15
Bilingual Issues	29	EI, PS, S, DDSD	2	14	13
Families as partners	29	EI, PS, S, DDSD		16	13
Interdisciplinary teaming and decision-making	29	DDSD	1	18	10
Prenatal exposure to chemicals and infectious diseases	29	EI, PS	2	11	16
Transitioning from SoonerStart to Part B services / IEP development	29	EI, PS	3	16	9
Beyond toys and switches	28	EI, PS, S, DDSD	1	6	21
Helping families develop essential skills for navigating systems	28	EI, PS, S	2	14	12
Personal Safety	27	EI, DDSD		15	12
Typical and atypical development across developmental domains	27	EI, PS, S	1	11	15
Beginning communication strategies	26	EI, PS, S, DDSD		11	15
Feeding: Nutrition for infants and toddlers	26	EI, PS	2	10	14
Grief and loss	26	EI, PS, S	2	11	13
Mental health: infant	26	EI, PS	4	12	10

Topic	#	Audience	Attend		
			Any-where	OKC	Tulsa
Prematurity: Integrating neurobehavioral concepts into EI eval and assessment	26	EI	4	9	13
Prematurity: Introduction to reading infant behavioral cues	26	EI	5	8	13
When to report suspected child abuse/neglect	26	EI, PS, S	3	15	8
Computer access: Assessment and introduction	25	EI, PS, S, DDSD	1	12	12
Feeding: Transitioning from gastrostomy to oral feedings	24	EI, PS, S	1	15	8
Architectural modifications	23	EI, PS, S, DDSD		10	13
Grandparents raising grandchildren	23	EI, PS, S, DDSD		10	13
Preschool assessment	23	EI, PS		13	10
Promoting functional use of assistive technology	23	EI, PS, S, DDSD	1	10	12
Hearing: Auditory verbal therapy	22	EI, PS, S, DDSD	2	12	8
Hearing: Functional sign language for community living	22	EI, PS, S, DDSD		11	11
Integrated services in the schools	22	PS, S	2	13	7
How to develop a community resource guide	21	EI, PS, S	1	11	9
Schedule boards/finish boards	21	EI, PS, S, DDSD	2	8	11
Hearing: Functional sign language advanced	20	EI, PS, S, DDSD	1	5	14
Basic movement and body mechanics	19	EI, PS, S, DDSD	2	6	11
Developmentally appropriate practice (DAP)	19	EI, PS		9	10
Early oral/dental health	19	EI, PS	1	7	11
Seating and Positioning: basic	19	EI, PS, S, DDSD		10	9
Adaptive toys and switches	18	EI, PS, S	1	6	11
Family systems	17	EI, PS, S		8	9
Person-centered planning	17	S, DDSD	1	9	7
Seating and Positioning: Intensive	15	EI, PS, S, DDSD		7	8
Use of AT to support literacy development	15	EI, PS, S, DDSD	1	7	7
Hearing: ECHO training for working with children who are hearing impaired or deaf	14	EI, PS		6	8
Splinting: Upper extremity – basic	14	EI, PS, S		7	7
Vision: Screening for infants and young children	14	EI, PS	1	8	5
Vision: VIISA training for working with infants and toddlers with visual impairments	14	EI	2	7	5
Teaming in the public schools	13	PS, S	1	9	3
Hearing: Basic hearing screening I	12	EI, PS, S	2	6	4
Hearing: Communication options for children who are deaf or hearing impaired	12	EI, PS	1	4	7

Topic	#	Audience	Attend		
			Any-where	OKC	Tulsa
Picture exchange communication system: Introduction	11	EI, PS, S, DDSD		3	8
Splinting: Upper extremity – advanced	11	EI, PS, S		6	5
Movement facilitation and intervention	10	EI, PS, S		3	7
Splinting: Lower extremity – basic	8	EI, PS, S		4	4
Hearing: Basic hearing screening II – speech pathologists and audiologists only	7	EI, PS, S, DDSD	2	3	2
Vision: VIISA training for working with preschool and children with visual impairments	7	PS, S		4	3
Splinting: Lower extremity – advanced	4	EI, PS, S		2	2
Personal Futures Planning	3	EI, PS		2	1

## STARS Team Development Needs Survey Results 2004

SoonerStart team leaders including lead clinicians, regional coordinators, and technical supervisors were asked to participate in a team development needs survey. The team leaders were asked to indicate topics that they believe are a high need, low need, or no need for team development. They were asked to provide this information for employees with SoonerStart two years or less and for those with SoonerStart more than two years. Their participation was anonymous. Of the 32 responses, 16 were lead clinicians, and 16 others did not indicate their role. The information below summarizes the results for 2004.

Topic	New Employees with SoonerStart two years or less	Employees with SoonerStart more than two years
1. Assessment	High Need	Low Need
2. Community Resources	High Need	Low Need
3. Cultural diversity / cultural competence	High Need	Low Need
4. Developmental / functional activities	High Need	Low Need
5. Evaluation	High Need	Low Need
6. Family interview	High Need	Low Need
7. IFSP development (participation in family routines and community activities)	High Need	Low to High Need
8. Inclusion	High Need	Low Need
9. Natural Environments	High Need	Low Need
10. SoonerStart philosophy, core values and beliefs	High Need	Low Need
11. SoonerStart policies and procedures	High Need	Low Need
12. Team building	High Need	High Need
13. Transdisciplinary Teaming and Services	High Need	High Need
14. Transition Process	High Need	Low Need
15. Working with other community programs including child care and public schools	High Need	Low Need
16. Other Courses	None Listed	None Listed

# STARS Anticipated Projects 2004

## SoonerStart Challenging Behaviors / Autism Training

The Challenging Behaviors / Autism training is being developed for early intervention personnel. It will synthesize information from a variety of sources and methodologies and will incorporate principles and beliefs of SoonerStart, including:

- Focus on supporting both the child and the family with the goal of improving not only the child's skills and abilities, but the overall family's quality of life / participation.
- Implementing supports that fit within the family and child's current routines and environments.
- Providing supports and information for the parents and other caregivers so they become the expert in supporting their child.

The training includes two levels of training:

- Level I – Basic course is a two-day course that will provide an overview of behavior, case-based scenarios, discussion of the relationship of communication, social emotional development and sensory problems related to behavior. Participants will be required to complete a competency exam to receive a certificate of completion for the training.
- Level II – Advanced course includes conducting a Functional Behavior Assessment, web-based modules, participating in case studies and review including gathering baseline and follow-up video, and discussions. Technical support will be provided to participants. Competency will be measured by the participant's ability to successfully implement assessment and intervention strategies as determined by the trainers and the families. The competency exam must be passed before receiving a certificate of completion of the training.

## SoonerStart Web-based Orientation

A subcommittee of the Interagency Coordinating Council Personnel Development Committee is developing a web-based orientation for new and current employees. The orientation will address the history, laws and regulations, and policies and procedures for the SoonerStart early intervention program. SoonerStart core values and beliefs, structure, personnel roles, procedural safeguards, and the SoonerStart process will also be addressed. The project will be maintained at the Tolbert Center.

## 2005 On-line Needs Assessment Survey

The Needs Assessment Survey for 2005 is anticipated to be on-line in April, 2004. Using this format will help reach more STARS participants in a timely and cost-effective manner.

## Questions

For additional information or questions, please contact Julie Smith by telephone at (405) 271-2131, extension 47120 or by email at [julie-smith@ouhsc.edu](mailto:julie-smith@ouhsc.edu).

