

Five Essential Features of Quality Educational Programs for Students with Moderate and Severe Intellectual Disability: A Guide for Administrators

Robert Pennington and
Genevra Courtade
University of Louisville

Melinda Jones Ault
University of Kentucky

Monica Delano
University of Louisville

Abstract: Despite encouraging changes in the expectations of programming for persons with moderate to severe intellectual disability (MSD), data suggest that programs for these individuals are still lacking in several critical areas. Building administrators play a key role in promoting high quality programs for students with MSD within local schools but may have little specialized knowledge in this area. The authors outline five essential features of quality educational programs for this population and provide a framework upon which building administrators can assess and support local programs.

A Call for Change

Since the passing of Public Law 94–142, the Education for All Handicapped Children Act (1975), researchers, practitioners, and parents have worked diligently with the intent to establish effective programs for educating students with moderate and severe intellectual disability (MSD). Early advocates challenged restrictive developmental models and segregationist practices by introducing landmark concepts such as the provision of access to age-appropriate functional curriculum (Brown et al. 1979; Brown, Nietupski, & Hamre-Nietupski, 1976), education alongside peers without disabilities (Brinker & Thorpe, 1984), and the criterion of the least dangerous assumption (i.e., the assumption that poor student performance is due to poor instruction, not student deficits; Donnellan, 1984). Accordingly, legislation was enacted that not only forged these ideas into the fabric of special education policy but through iterative reauthorizations,

shaped these ideas into new paradigms for instructional practice.

The research and disability communities have embraced many of these changes with optimism, but a few have sparked debate concerning their impact on outcomes for individuals with disabilities. For example, recent discourse has revolved around legislation directing the assessment of grade level core content for all students and its potential impact on instructional curriculum for students with MSD (Ayres, Lowrey, Douglas, & Sievers, 2011; Courtade, Spooner, Browder, & Jimenez, 2012). This discourse and others are likely to be in part perpetuated by advocates' competing views of education as policy shifts in the absence of relevant outcome data. These disagreements contribute greatly to the analysis and refinement of our field, but they also may reflect a broader lack of consensus as to the core features of educational programming for persons with MSD.

Recent data suggest that despite these major evolutionary shifts in programming, outcomes for persons with MSD are still less than desirable. For example, students with MSD have minimal contact with their same age peers without disabilities and are at high risk for social isolation in and out of the school

Correspondence concerning this article should be addressed to Robert Pennington, Department of Special Education, University of Louisville, Louisville, KY 40292. E-mail: robert.pennington@louisville.edu

environment (Siperstein, Parker, Bardon, & Widaman, 2007; Smith, 2007). This isolation may be exacerbated by motor, social, and communication deficits associated with MSD and their teachers' lack of training in communication instruction and the use of assistive technology (Zascavage & Keefe, 2004). Even more disheartening are data that suggest that many educators continue to respond to challenging behavior, often the only means of communication for some students with MSD, by using restraints, seclusion, or aversive treatment procedures (Westling, Trader, Smith, & Marshall, 2010).

Several researchers have suggested that students with MSD do not fair better in postsecondary environments. This is not surprising as Grigal, Hart, and Migliore (2011) found that transition planning for students with MSD reflected lower expectations for competitive employment and opportunities for post-secondary education than students with other disabilities. Persons with intellectual disability (ID) are three to four times less likely to be employed than their peers without disabilities and are most often employed in segregated settings (Verdonschot, De Witte, Reichrath, Buntix, & Curfs, 2009). They have fewer opportunities to engage in community groups and report having an average social network of three people, including a professional service staff member. This isolation may put individuals with MSD at an increased risk for maltreatment (e.g., sexual abuse, theft, neglect) over persons without disabilities (Horner-Johnson & Drum, 2006).

The recent adoption of implementation science by advocates and researchers in special education (Fixsen & Blase, 2009; Fixsen, Naom, Blase, Friedman, & Wallace, 2005; Odom, 2009) offers promise in mobilizing stakeholders towards improving quality of life outcomes (QOL) for individuals with MSD and has challenged current practices in moving the needle towards broader systemic change in special education. Researchers have acknowledged the failures of what once was perceived as low hanging fruit (e.g., research literature reviews, one-shot training workshops) to improve programs for individuals with disabilities (Odom, 2009). Scaling up of high quality programming involves multiple steps including (a) ensuring a fit between

practices and school needs, (b) promoting a practice as a priority among stakeholders, (c) ensuring fidelity of implementation, (d) integrating practices into daily school operations, and (e) using data for continuous decision-making (McIntosh, Filter, Ryan, & Sugai, 2010). This approach has been effective in scaling up practices targeted at students with other disabilities (e.g., Classwide Peer Tutoring [CWPT], Peer Assisted Learning Strategies [PALS], Schoolwide Positive Behavior Supports [SWPBS]; Klingner, Boardman, & McMaster, 2013) and potentially may be a game changer for improving the quality of educational services for students with MSD. Unfortunately, the protracted nature of the "scaling-up" process suggests that many students with MSD must wait for the quality programming they deserve.

We purport that building administrators (i.e., principals, counselors, program coordinators) are uniquely positioned to impact individual programs for students with MSD while broader implementation initiatives are set in motion. These skilled professionals are within arm's reach of existing programs, and may serve as drivers within system change initiatives, especially in the promotion of practices. Unfortunately, many have limited knowledge or experience with students with MSD and may be poorly equipped to accurately evaluate the quality of daily programming for these students (Pazey & Cole, 2013; Sirotnik & Kimball; 1994). For example, Wakeman, Browder, Flowers, and Ahlgrim-Dezell (2006) found that secondary principals reported having fundamental knowledge in special education (i.e., legislation, inclusion), but had limited understanding of concepts germane to daily practice (i.e., functional behavior assessment, universal design). This lack of specific programming knowledge may prevent administrators from identifying programs in need of assistance and in interpreting teacher evaluation systems in the context of MSD programs.

The purpose of this paper is to present a set of basic tenets or "essential program features" for use by building administrators in the promotion of quality educational programs for students with MSD. These basic features, though clearly not exhaustive, are rooted in both advocacy and educational research and include (a) the provision of a safe and respect-

ful environment, (b) an instructional focus on communicative competence, (c) instruction across a broad and age-appropriate curriculum, (d) the intensive delivery of explicit and systematic instruction, and (e) the ongoing evaluation of practice. We selected these features because of their potentially pervasive and far reaching impact on the QOL of learners with MSD. We propose that wholesale adoption of these features as “essential” by those in supervisory positions may help communicate a common expectation for those charged with the education of individuals with MSD and help to ensure that students are at minimum benefiting from nearly half a century of *educational progress*.

Safe and Respectful Environment

At the most basic level, all individuals are equal in dignity and are entitled to human and civil rights (United Nations, n.d.). Unfortunately, the exercise and protection of the rights of people with MSD have been unfulfilled as history has provided multiple examples of mistreatment, isolation, segregation, subhuman living conditions, abuse, and discrimination (Griffiths et al., 2003; Horner-Johnson & Drum, 2006; Ward & Stewart, 2008). The American Association on Intellectual and Developmental Disabilities (AAIDD; 2009) has issued a position statement on human and civil rights that states, “The human and civil rights of all people with intellectual and/or developmental disabilities must be honored protected, communicated, enforced, and thus be central to all advocacy on their behalf” (para. 1). Therefore, an essential feature of education for students with MSD in our nation’s schools must be access to basic human rights afforded in a safe and respectful educational environment. Components of safe educational environments are those that promote dignity; allow for self-advocacy and self-determination; are free from physical pain, seclusion, and restraint; and offer programs that are inclusive—allowing access to the same settings and activities in which all students participate.

Personal Dignity

Schools must provide environments in which students are treated with dignity. In interac-

tions with students, administrators should observe that professionals maintain calm demeanors, and use tones of voice and facial expressions that are free of sarcasm or ridicule. Professionals should refrain from speaking in front of students as if they are not present, or speaking about confidential or private topics concerning the student in the presence of others who may overhear. The privacy of students must be protected especially when students require assistance with personal care needs. For example, if a student requires a diaper change or assistance with toileting, these should be done in private and out of view of others who may be in the environment.

Self-determination and Self-advocacy

To provide safe and respectful environments, opportunities for students to self-determine and self-advocate are critical. Students who are self-advocates and are self-determined can act as the “primary causal agent” to maintain or improve their own QOL (Wehmeyer, 2005, p. 117). Professionals create a classroom climate of respect and dignity when students have control over what happens to them, and when professionals respect and honor those choices and decisions (Powers et al., 2007). Individuals with MSD, in particular, have difficulty exerting control over their environment because they may not have the verbal or language skills to make their choices known, and they specifically need to be taught how to express their choices and opinions. Administrators should observe professionals directly teaching students how to make choices, set goals, work toward those goals, express their preferences, refuse what they do not want, and ask for or refuse assistance (Browder, Wood, Test, Karvonen, & Algozzine, 2001; Jones, 2006; Mason, Field, & Sawilosky, 2004; Wehmeyer & Mithaug, 2006). By directly teaching these skills and respecting the personal choices of their students, professionals create environments where all individuals, regardless of their ability level, can have an effect on, and make meaningful decisions about their own lives.

Reduction of Aversives, Seclusion, and Restraint

A safe educational environment is one in which individuals are free from pain or fear. Unfortunately, recent data indicate that restraint, seclusion, and aversive procedures are often used in educational environments with students with disabilities. Westling et al. (2010) surveyed a nonrandom sample of over 1200 parents of children with disabilities. They found that 64.7% of the parents reported their child had been restrained, secluded, or subjected to aversive procedures by school personnel; and the majority (72.2%) had not authorized the procedure. When asked what occurred as a result of the procedures, 92.2% indicated their child experienced emotional trauma, and 42.2% reported their child had physical injury. Ryan and Peterson (2004) found in a review of the literature, that restraints were commonly used in public school settings and that professionals considered restraints acceptable for severe behaviors (e.g., self-injury, aggression), but also indicated that restraints were used for less serious behaviors (e.g., property damage, leaving the classroom). Individuals with MSD may engage in inappropriate, maladaptive, and self-injurious behaviors that increase the chance that they may encounter professionals who may use aversive procedures to manage these behaviors (Matson & Taras, 1989). Since these data have come to the forefront, the U.S. Congress has pending legislation to monitor and limit the use of inappropriate restraint and seclusion in schools (H.R. 4247, S. 2860; Alliance to Prevent Restraint, Aversive Interventions and Seclusion; APRAIS, 2011).

Administrators should ensure that district policies have been developed and verify that professionals who are teaching students with challenging behaviors follow those policies for when, and if appropriate seclusion or restraint procedures may be used. If such procedures are deemed appropriate for individual students, administrators must ensure that professionals have obtained appropriate training. All students with challenging behaviors must have behavior intervention plans in place in which the focus is on positive behavior supports. That is, students should have individualized plans that have been designed based on an analysis of the function of the behavior, that

emphasize teaching appropriate replacement behaviors, that modify the environment to decrease the probability of the occurrence of the behaviors, and that focus on long-term maintenance of appropriate behaviors (APRAIS, 2011; Carr et al., 2002).

Access to Peers and Activities in the School

The Individuals with Disabilities Education Improvement Act (IDEA, 2004) requires that students be educated in the least restrictive environment and participate with peers without disabilities in academics, extracurricular activities, and other nonacademic activities. Such inclusionary activities have been shown to benefit students both educationally (Downing, Spencer, & Cavallaro, 2004) and socially (Fisher & Meyer, 2002). To deny students access to activities involving peers without disabilities denies them the right to participate in the full range of activities afforded to other individuals in the school and perpetuates the philosophy that students with disabilities should be sheltered, protected, and kept separate from the general population (Donnell & Hardman, 1989). Additionally, students are denied the opportunity to develop friendships if they are never provided the opportunity to be in proximity of other students without disabilities (Carter & Hughes, 2005). Today, administrators should observe that students with MSD are participating in academic instruction alongside students without disabilities in general education classrooms to the extent determined appropriate by the students' individualized education program (IEP) teams. In addition, professionals should ensure their students have many social opportunities with their peers without disabilities by including them in inclusive extracurricular activities, having students ride the same school buses, having them eat alongside their peers in the same lunch periods, and explicitly teaching social interaction skills. This will require that administrators provide opportunities for general and special educators to work collaboratively to co-plan and have collaborative partnerships.

Instructional Focus on Communicative Competence

An individual's level of communicative competence can be defined as their existing repertoire of skills used to affect the environment through interactions with others. This repertoire rests at the core of an individual's QOL as it impacts one's ability to indicate preferences, access reinforcers, avoid aversive stimuli, maintain social relationships, demonstrate knowledge, and access integrated community and employment settings. Though the research literature suggests that individuals with MSD often face considerable challenges in effective communication, there appears to be a consensus that most individuals with MSD can acquire a functional communicative repertoire (Snell, Chen, & Hoover, 2006). Several reviews of research literature demonstrate the potential benefits of communication intervention for students with MSD implemented by a range of professionals (e.g., Goldstein, 2002; Snell et al., 2006). Collectively, these reviews reflect several clear components of communication instruction for students with MSD that should be evidenced upon observation in educational settings.

Means and Opportunities to Communicate

First, all students must be provided opportunities to communicate and observe the effects of their communication on their environment. Administrators should observe that every student has a specified communication system (e.g., vocal, sign, pictures), access to that system at all times (Sigafos, O'Reilly, Seely-York, & Edrisinha, 2004), and that it is used to respond during instructional activities. Additionally, for communicative interactions to be effective, they must occur within a responsive environment. That is, educators and peers with and without disabilities should be observed frequently responding to and honoring the conventional and potential communicative responses of the students in their classrooms (Kent-Walsh & McNaughton, 2005). For example, a student with MSD who does not have a conventional mode of communication may express their refusal to participate in a task by pushing away materials and turning their head. Given that this is the

student's current means of communication, administrators should see that teachers honor this communication attempt by stopping or changing the activity, while at the same time providing instruction on developing more conventional means of communication (e.g., saying "stop", pointing to an "I don't want to do this" picture, signing "Stop please"). It is important to note that a breach of either of these basic communication tenets is conceptually congruent with the application of restraint as it severely limits an individual's access to instruction, reinforcement and ultimately freedom or control over their environment.

Explicit Communication Instruction

Second, administrators should observe the delivery of explicit communication instruction involving the use of systematic prompting procedures, programmed delivery of reinforcement, and ongoing data collection (Chiang & Carter, 2008). Students will not likely acquire a sufficient communicative repertoire through observational learning alone (i.e., watching others) and should be engaged in programmed instructional opportunities throughout the entire day. Teachers should avoid the trappings of scheduling daily communication sessions around a single activity (e.g., snack time, speech-language therapy) and should ensure that instruction occurs across multiple communicative partners and naturalistic contexts. This will require that administrators ensure that teachers and speech-language pathologists have the time to work together to plan and implement communication instruction that occurs within the context of ongoing activities that occur all throughout the student's daily schedule.

Ongoing Communication Instruction

Finally, data suggest that students with MSD benefit from communication instruction across the lifespan (Millar, Light, & Schlosser, 2006). Educators should provide longitudinal programming to promote the refinement and generalization of critical communication skills. For example, a young child with autism spectrum disorder may be taught to request items within his immediate environment, but longitudinal programming will help the child to improve the quality and complexity of

those responses, identify appropriate environments in which to make requests, and to make requests for novel items. Programmatic continuity in communication instruction at minimum should be evidenced by the inclusion of communication goals on each student's IEP despite the student's age and evidence of planning for communicative competence in postsecondary environments. Administrators should expect that teachers address communication deficits in the IEPs of their students, and that communication is a priority for all students.

Instruction across a Broad and Age-Appropriate Curriculum

Federal legislation (IDEA, 2004; No Child Left Behind, 2001) over the past decades has led to the requirements that all students have access to and show progress in the general education curriculum. These requirements have caused debate in the field of special education over the appropriateness of teaching core content standards to students with MSD (e.g., Ayres et al., 2011; Courtade et al., 2012). We support the view that there must be a balance between the instruction of grade level core content and other skill domains (e.g., self-help, communication, social skills) to develop the repertoire necessary for independence and a high QOL in all potential future environments (Hunt, McDonnell, & Crockett, 2012). In order to find that balance, it is important for administrators to support thoughtful IEP development.

Fostering Balanced Instruction through IEPs

The intent of an IEP is to outline an appropriate education for students with disabilities through individualized special education services (Turnbull, Turnbull, Wehmeyer, & Shogren, 2012). In order to ensure that students with MSD receive instruction across a broad and age-appropriate curriculum, IEP teams will need to develop goals and objectives that develop both age-appropriate academic knowledge and life skills. Administrators serving as local education agency (LEA) representatives must understand the general process through which appropriate goals are developed and support teachers in the plan-

ning and delivery of instruction to meet those goals. Although this charge may be difficult, there are frameworks to guide teams to develop relevant, appropriate IEPs that address a broad curriculum.

Hunt et al. (2012) recommended the use of an ecological framework to develop IEPs that reflect a balance between QOL outcomes and standards-based academic progress for students with MSD. They incorporated Brown et al.'s (1979) ecological framework and recent advances towards standards based goals in designing a "process for developing and teaching standards-based goals that reflect meaningful knowledge and skills, individualization, and application to everyday life" (p. 142). The process can help guide educators and families to create high quality IEPs and include both QOL and academic goal areas. The process is arranged into six steps and can be evidenced by teachers' (a) use of family and student centered assessment activities, (b) identification of priority grade level content standards, (c) identification of the critical function of each standard, (d) identification of meaningful outcomes that reflect QOL goal areas and a current mode of communication, (e) generation of quality IEP goals and objectives to address the performance outcomes, and (f) instruction of skills within meaningful activities that are personally relevant to the student.

Furthermore, this balance should be evidenced across instructional contexts. Although IDEA (1997, 2004) emphasizes that students with disabilities be educated with their general education peers, in 2007, only 16.4% of students with intellectual disability spent 80% or more of their day in general education classrooms, while 48.8% of student with intellectual disability spent less than 40% of their day in general education classrooms (please note this percentage includes students labeled with mild intellectual disability; U.S. Department of Education, 2012). With a large percentage of students with MSD educated outside of general education classrooms, educators must consider how the *context* of teaching affects the ability of students to acquire academic content and social skills and overall, meet the mandate of access to the general curriculum (Ryndak, Moore, Orlando, & Delano, 2008–2009). Additionally, teachers must determine how students will access life skills

components of the curriculum in general education contexts.

Though considerably complex, we suggest that balanced programs can and do exist. Administrators can identify such programs by their rich collaborations between general and special education staff, the frequent use of accommodations and modifications to ensure that students with and without disabilities engage in corresponding instructional activities, and instruction on critical life skills that occur across all instructional settings and personnel. For example, if a middle school student with MSD is in an English Language Arts class in which students are reading a classic novel, the administrator should observe that the student has access to the same book as his peers. The administrator should observe that the book has been modified to serve the student's needs (e.g., rewritten with reduced complexity and length, supported with pictures or graphics) and that the teacher provides the student with modified ways to demonstrate his/her understanding of the book. In addition, the administrator should observe teachers providing instruction in skills that are immediately useful and frequently demanded for the student (e.g., caring for basic self-care needs, increasing independence in adaptive behavior skills).

Intensive Delivery of Explicit and Systematic Instruction

Students with MSD have considerable difficulty acquiring the vast repertoire of skills obtained by their same age peers. Thus, teachers are faced with the challenge of addressing a dauntingly broad array of skills (e.g., academic, communicative, adaptive) within the school day. We suggest that students with MSD, like their peers without disabilities, must be continuously engaged in high quality instruction while in the educational setting. At any time during the instructional day, administrators should observe students with MSD engaged in age-appropriate and meaningful activities. At all times, educators should be able to state the instructional focus of each activity and students' progress toward acquisition of targeted skills.

Explicit and Systematic Instruction

Decades of research suggest that the use of systematic instruction is highly effective in teaching a variety of skills to individuals with MSD. Systematic instruction is a defined, replicable process which reflects currently accepted "best" practices; uses progress monitoring data to make instructional decisions; and includes acquisition, proficiency, maintenance, and generalization learning (Snell & Zirpoli, 1987). When executed correctly, systematic instruction includes the identification of measurable learning objectives, the delivery of high rates of reinforcement, the use of instructive feedback, and continuous data collection. Several core instructional strategies have been established in the research literature as evidence-based and should be a part of daily instruction. These strategies include (a) response prompting (e.g., time delay, system of least prompts, most to least prompting; Collins, 2012; Wolery, Ault, & Doyle, 1992), (b) stimulus shaping and fading (Wolf, Risley, & Mees, 1964), (c) multiple exemplar and general case programming (Sprague & Horner, 1984), (d) video modeling (Bellini & Akullian, 2007), and (e) the use of peer supports (Carter & Hughes, 2005). This set of research-based strategies is not exhaustive and will certainly evolve as new data emerge. Administrators can support educators by having them self-assess or having peer coaches assess their competency in the implementation of these core strategies and then providing access to district level or peer coaches or professional development to refine their skills. This investment in time and resource is essential to the development of high quality educational programming.

Intensity of Delivery

The use of research-based systematic instructional procedures is not sufficient to ensure high quality instruction for students with MSD. Educational professionals also must program for intensity. Data suggest that the number of opportunities to respond (OTR) is one of the strongest correlates with student progress (Brophy & Good, 1986). As aforementioned, administrators should expect that students are actively engaged in instruction for almost the entirety of their instructional day.

Teachers should carefully consider the potential adverse effects of using practices that may decrease instructional time (e.g., time out, unstructured down time or periods in sensory rooms.). They also should identify targeted skills that can be taught during traditionally less structured activities (e.g., recess, lunch, transitions).

The provision of an intensive and systematic instructional program is likely not possible without the support of a collaborative educational team. Furthermore, we suggest that teams use a transdisciplinary approach (Downing & Bailey, 2010) to deliver instruction. In this approach, professionals share their expertise so that all members are “cross trained” to deliver necessary instruction. Educational teams should include a range of critical personnel (e.g., parents, related service professionals, paraprofessionals) but also include general education staff. Administrators can assist in developing a school culture in which the general education staff members are supported to move beyond token members of an IEP team, and contribute to daily programming as content experts. Their active participation will likely result in higher quality academic instruction and smoother transitions to general education contexts. Their input also may help special educators identify age-appropriate and naturalistic supports.

Ongoing Evaluation of Practice

Finally, we purport that students are entitled to programs that involve continuous evaluation at two levels. At the first level, educational professionals select those procedures for use with students that have been demonstrated to be effective through high quality research endeavors. At a second level, educators assess students regularly, evaluate the resulting data, and make changes to their instruction based on their analysis.

The recent emphasis on evidence-based practices in special education has cast a light on the selection of interventions for use with students with MSD. Unfortunately, it also has illuminated the limitations of the research literature in interventions for this unique population. For example, though researchers have worked tirelessly to establish several evidence-based procedures (e.g., response prompting,

picture-based communication systems), the application of these practices to the new and increasingly complex skills required by changing academic, vocational, and social contexts remain generally untested. Administrators should observe that teachers select evidence-based practices for students when they are available. These practices should be supported by multiple high quality research studies conducted with participants with similar characteristics (Gersten et al., 2005, Horner et al., 2005). Several resources exist to assist administrators and teachers in the identification and selection of evidence-based practices to use with their students (e.g., The National Professional Development Center on Autism Spectrum Disorders [<http://autismpdc.fpg.unc.edu/>]; The National Secondary Transition Technical Assistance Center [<http://nstattac.org/content/evidence-based-practices>]; What Works Clearinghouse [<http://ies.ed.gov/ncee/wwc/>]). When evidence-based practices are not available for a particular instructional context, teachers must select practices with an increased probability that they will be effective. Teachers may consider selecting interventions based on the following research criteria: (a) Has the practice been effective in teaching similar skills to students without MSD? (b) Has the practice been effective in teaching other skills to students with MSD? or (c) Is the practice conceptually congruent with established instructional/behavioral principles or practices (e.g., reinforcement, stimulus control procedures)? Despite the evidence supporting the selection of a practice, students can be safeguarded from exposure to ineffective instruction, through the regular collection and evaluation of progress data.

The use of established teaching strategies alone will not result in positive student outcomes. Building level administrators should observe teachers and support staff regularly collecting, displaying, reporting, and evaluating data on student performance. Continuous data collection affords many advantages (e.g., accountability, identification of learning patterns, communication to stake holders) that are key in ensuring high quality instruction for this unique population. In addition, the frequent monitoring of student progress may prevent the continued exposure of students to ineffective or inefficient practices. The poten-

tial curriculum for students with MSD is vast and teachers will require every moment to help their students acquire and generalize new skills. Finally, continuous access to progress data may serve to reinforce the use of effective practices by teachers. We posit that in the absence of student data, teachers may use teaching strategies based on less desirable variables (e.g., effort, suggestions from peers or parents not based on research, advertisements from vendors). Continuous access to student data should potentially ensure that only the most viable practices are maintained within classrooms and the ineffective and even fad interventions would gradually fade away.

How Can Administrators Use the Essential Features to Promote Quality Programming for Students with MSD?

The quality of educational programs for students with MSD is likely impacted by multiple mediating factors (e.g., preservice training, peer groups, resources, school culture). We purport that despite the presence of these complex barriers, building level administrators can impact programs for this unique and often underserved population of students. First, principals play a critical role in the design of school culture (Hallinger, 2010) and may lay essential groundwork for change through establishing and maintaining high expectations for their students with MSD and their teachers. Through an increased awareness of expected program features for students with MSD, they can identify areas of weaknesses, respond to infractions, and help engage staff in discourse concerning ways to promote all students' dignity and self-determination. Though the current paper may help administrators understand the "what" and "why" of essential program features, further assistance may be required in "how" to assess programs. One way to evaluate programming against essential programs features is to compare existing programs against a quality indicator checklist. Researchers have developed several checklists that are consistent with our proposed tenets. For example, Cushing, Carter, Clark, Wallace, and Kennedy (2009) developed the *Program Quality Measurement Tool (PQMT)* to evaluate inclusive educational practices for students with severe disability.

The tool is comprised of 44 indicators that are ranked using 5-point Likert scale. Similarly, Calculator and Black (2009) developed an inventory of best practices for students using AAC devices in general education classrooms. This extensive 91-item inventory includes a range of items related to climate, programming, and collaboration. Finally, Ruble, McGrew, Dalrymple, and Jung (2010) created a checklist to evaluate the quality of IEPs for students with ASD. They compared IEPs against 21 items that included items related to functional communication, alignment with state academic standards, and functional behavior assessment. Though some states and local districts may develop their own quality program indicators, administrators can use these research-validated instruments to enhance their understanding of programming and may offer these tools to their teaching staff for use in self-assessment and program guidance.

Second, administrators with knowledge of programming for students with MSD may be able to allocate resources that are more closely aligned with staff needs. In the example above, the administrator may identify specialized training in data collection or pair a struggling teacher with an experienced peer to coach or mentor him through the process. In the absence of data on specific teacher programs, principals may be left to make arbitrary decisions concerning the provision of professional development and the allocation of fiscal resources.

Finally, these essential features may be used to assess the quality of applicants for teaching positions in MSD. Recent data suggest that there are national teacher shortages in the area of MSD (U.S. Department of Education, 2013). As a result, principals may be faced with a limited number of qualified applicants. Administrators with an increased knowledge of MSD programming will have a reduced risk of hiring teachers without the skills to establish a strong MSD program. In Table 1, we offer a list of potential questions that might be asked of new applicants for an MSD position.

Final Thoughts

The field of special education for students with MSD is rich with advocacy, expectations, and evolving practices, but we have yet to see

TABLE 1

Sample Interview Questions for a Teacher of Students with MSD

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- Can you describe your general expectations for students with MSD as contributors to their community?
- How would you proceed in establishing functional communication for a child that enters your classroom with no vocal communication skills?
- Describe the steps you take in planning a curriculum for your students. What general areas should be addressed?
- What types of procedures would you employ in your classroom to address challenging behavior? Describe how you determine if an intervention is not working for a particular student, and what would you do if it is not working.
- How do you intend on ensuring that your students have access to peers without disabilities, and why is it an important program consideration?
- Can you describe several evidence-based practices for teaching students with MSD?
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the comprehensive change envisioned by our earliest pioneers. Our students still remain frequently segregated from their peers, often subjected to contraindicated behavior management practices, and leave schools with minimal opportunities to lead self-determined lives. In this paper, we have described a subset of practices and deemed them as essential to be used by principals to assess the quality of programs for students with MSD under their supervision. We acknowledge that this list reflects only a portion of what is needed to ensure the best outcomes for individuals with MSD, and that the practices therein are not grand innovations. We do suggest, however, that the adoption of these essential features as “non negotiables” by every single practitioner, building administrator, and school district, might potentially result in a sea of change in outcomes for persons with MSD. At the very least, these program features might ensure that students with MSD are educated in the safe, dignifying, and effective educational environments to which they are entitled.

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