How Gateway School’s Early Intervention Techniques Can Ensure a Better Future

Ebony Martin watched her toddler, Con- nor, flick the TV off and on repeatedly. He did the same with the light switches. He’d jump almost nonlinear. And he stopped talking and began uttering small sounds, instead of the few words he’d been using.

All of these behaviors she had not observed in his three older siblings. So Martin took Connor to his pediatrician. The doctor referred her to Baltimore City’s Infants and Toddlers Program, which then sent her to the Hearing and Speech Agency (HASA) to test Connor for deafness.

“His hearing was OK,” Martin recalled. “But his behavior was still a little weird, so I knew it was more than just a speech problem.” HASA’s team concurred and sent a doctor to observe Connor at home. The diagnosis: Autism spectrum disorder (ASD), which the National Institutes of Health describes as “a range of complex neurodevelopmental conditions, characterized by social impairments, communication difficulties, repetitive behaviors, restricted interests, and stereotyped patterns of behavior.” ASD affects three to six children out of every 1,000 in the United States, according to federal statistics, and boys are four times more likely to have it than girls.

There is no cure for ASD, but it can be treated through medication and special education—the earlier, the better. Thanks to his mother’s keen observation skills, Connor has benefited mightily from early intervention. Martin started the Individual Education Plan process (IEP) with Baltimore City to ensure that his son got into the most appropriate school as soon as he turned 3 (the earliest age possible). That was how she found the Gateway School—housed in the same building as HASA, where he first got help. Gateway is a private school for children with special needs whose primary barrier to development is difficulty communicating. Each student has a team comprised of a special education teacher, speech therapist, occupational therapist, physical therapist, and audiologist. “It’s amazing to see how far Connor has come in two years,” Martin said. “He can let me know what he wants. He can make eye contact. He’ll even read a book to his 2-year-old brother.”

Ritika Kocher was one of Connor’s first teachers at Gateway. “Children on the Autism spectrum like Connor lack skills in pragmatic language—eye contact, reading nonverbal clues, understanding what nonverbal language is being used, etc.,” she said. “When these children are targeted at the earliest sign of delay in developmental milestones, systematic therapy can give them techniques that eventually become second nature.

“Intensive therapy six hours in school each day, plus sending a doctor to observe Connor at home, to 5-year-olds develop socially and gives them the basic skills necessary to function in the classroom,” she added, “such as listening to teachers, staying with a group, and paying attention to tasks for longer and longer periods of time.”

This year, Connor is in Amanda Dougherty’s class at Gateway. By using a variety of special education techniques, such as verbal and visual prompting, repetitive and visual directions, small group and individual instruction, Ms. Dougherty is helping her kindergartners first-graders reach their highest potential. “They have learned basic skills, their language skills tend to improve as well.”

Dougherty and Kocher stress the urgency of monitoring a child’s developmental growth almost from birth. “The earlier, the better. The earlier the urgency of monitoring a child’s developmental growth almost from birth, the easier it is for teachers to ensure that the child’s developmental growth is proceeding in the right direction, small group and in individual instruction, Ms. Dougherty is helping her kindergartners first-graders reach their highest potential. “They have learned basic skills, their language skills tend to improve as well.”

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The IEP Process

Getting a child with special-needs the “free and appropriate public education” guaranteed by federal law sounds perfectly justified on paper. But making it happen can be complicated. And that’s where the Maryland Association of Nonpublic Special Education Facilities can help. Dorie Flynn, MANSEF’s executive director, explained the law, how it’s changed, and gives advice on how to ensure that it’s carried out to a child’s best advantage.

Q: Explain the federal laws that gave way to the IEP concept.

A: The Individual with Disabilities Education Act (IDEA) is our nation’s special education law. The IDEA guides how states, school districts, and public agencies provide early intervention, special education, and related services to more than 6.5 million eligible children with disabilities. Congress originally enacted IDEA in 1975 to ensure that children with disabilities have the opportunity to receive a free appropriate public education (FAPE) just like other children. Each child who requires special education services must have an Individualized Education Program (IEP). The IEP dictates the type of services the child needs to obtain educational benefit. In addition, the IDEA mandates that there be a continuum of placement options for children with special needs.

Q: How does the IEP process start?

A: Parents can start the process by asking—the request should be in writing—for a team meeting to review their child’s educational needs. The school system can also start the process.

Q: What sort of assessment does one request for a child? Who does the assessing and what does it include? Who pays for it? How much does it cost?

A: The types of assessments can include a psychological, educational evaluation, a social history, and any other evaluation that the school system recommends and parents agree to. The assessments are conducted by qualified and/or licensed professionals, many of whom are employed by the schools. In addition, the school system can contract out for the assessments and evaluations. It is responsible for identifying children with special needs and therefore pays for the assessments. However, parents can also obtain independent assessments on their own and at their own expense.

Q: Does the IEP dictate where the child goes to school?

A: No. The school system and the parent need to look at all the options when providing services to children with special needs. It is important to place children in the least restrictive environment before seeking more intensive services.

The IDEA mandates that children with disabilities be educated with their nondisabled peers. The school may have many programs within their system that serve children with special needs that would necessitate a child not being served in their zone school. When the public school system does not have the internal resources to implement the IEP, it makes a referral to a nonpublic special education school. The intent is for the child to obtain educational benefit regardless of where the service is delivered.

Q: How much does the public school system pay the private school?

A: Since the public school system is obligated to provide a free and appropriate public education, they then place the student in a nonpublic special education school approved and accredited by the Maryland State Department of Education. The cost of the tuition is based on a formula established by state law. The Maryland Coalition of Families for Children in Special Education pays the cost of educating students in nonpublic special education placements. The intensity of the program and the services it provides can have a direct impact on cost, because some children require more intense support and service.

Q: Where can folks find advocates (lawyers, etc.) if they don’t have the money to pay for help in the process?

A: Each county in Maryland now has a hotline to reach a “family navigator”; these individuals will provide assistance over the phone. The list can be obtained from the Maryland Coalition of Families for Children’s Mental Health (www.mdcoalition.org). In addition, there is the Parent’s Place of Maryland (www.ppmd.org).