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Running head: VIDEOCONFERENCE IEP MEETINGS AND FAMILY-SCHOOL
PARTNERSHIPS

Family-School Partnerships Forged During Videoconference IEP Meetings for Children
Transitioning Between Early Intervention and LEA During Global COVID-19 Pandemic

A Dissertation Presented

by

Jennifer L. Tenore

Submitted to the Graduate School of Education

Lesley University

in partial fulfillment of the requirements

for the degree of

DOCTOR OF PHILOSOPHY

November 14, 2022

Ph.D. Educational Studies

Educational Leadership Specialization

Family-School Partnerships Forged During Videoconference IEP Meetings for Children
Transitioning Between Early Intervention and LEA During Global COVID-19 Pandemic

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Ph.D. Educational Studies

Educational Leadership Specialization

Approvals

In the judgment of the following signatories, this Dissertation meets the academic standards that have been established for the Doctor of Philosophy degree.

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Abstract

In the spring of 2020, the global COVID-19 pandemic significantly impacted the world, including public schools in the United States. During this time, Local Education Agencies (LEA) started to rely on videoconference platforms for Individualized Education Program (IEP) meetings. This phenomenological study investigated the experience of 12 participants, 7 school staff, and 5 parents from public schools in Connecticut. Three guiding questions focused on the participants' experiences during the pandemic regarding: 1) the various ways they establish partnerships that bridge home and school as children transition from early intervention to school-based programming; 2) the factors and conditions they believe are barriers to family input into the IEP process for children during the transition; and 3) the extent digital conferencing tools positively and negatively affected family-school partnerships while developing IEPs for children during the transition. Participants identified that videoconference IEP meetings were convenient and efficient, logistically the meetings started and ended as scheduled, and all parties felt like their input was captured and incorporated into the initial IEP document. The IEP teams relied on anecdotal information gathered during the videoconference to support initial assessment results, often administered remotely, and used for identification. Participants also shared that convenience came at the cost of face-to-face connection. This study recommends that school leaders develop systems to explain the specifics of the IEP document to family members as children transition from early intervention to preschool special education programming, as well as implement individualized practices to ensure that family members and school staff have face-to-face interactions as children begin attending public school, the foundational time in the development of family-school partnerships.

Keywords: family engagement, family-school partnerships, transition between early intervention and preschool programming, videoconference platform IEP meetings, virtual special education meetings

Dedication

For Tony, Nick and Justine, Allie and Tyler, Brianna, Wren and Abby, Adrian, Lucas, Leila,

Addison, Odin, and Mom, and Dad.

For your endless patience with me, for your ongoing support, and for your unconditional love.

Sometimes we just need our co-pilots to remind us what life is really all about.

I finished!

“It always seems impossible until it’s done.”

-Nelson Mandela-

Acknowledgments

Genuine thanks to my senior advisor, Dr. Gail Cahill. You picked me up when I felt broken and you nurtured and acknowledged my capabilities.

To my committee, Dr. Yvonne Liu-Constant and Dr. Catherine Knowles-O'Brien, your patience, honesty, and tenderness were just what this doctoral student was craving.

To Amanda, for sticking with me and helping me to cross the finish line. You were always there and you never made me feel like my questions were stupid.

To Sharon, you stood by me when my pace was slower than that of others. You always encouraged and reminded me that my timing was my own.

To my cohort, thank you for the camaraderie and inspiration to pause and think.

To my dear Catherine, there are no words that could adequately capture the support and love that you surrounded me with during this process. I will be eternally grateful.

To my children and grandchildren, you are kind humans who inspire me daily.

To my mom, thank you for validating that my education was just as important as that of my children at a time when I struggled with indulging in advanced graduate studies.

To my dad, for always making me feel like I was smart, capable, and worthy.

To my love, Tony, you have always believed in me. You have always seen something that I struggle to recognize in myself. Thank you for loving me. Thank you for believing in me, flaws and all. You have been my steadfast champion.

To the kind words and support from family, friends, and colleagues, never stop believing in the power of your words.

“Kind words can be short and easy to speak but their echoes are truly endless.”

Mother Theresa

TABLE OF CONTENTS

ABSTRACT	iv
DEDICATION	vi
ACKNOWLEDGEMENTS	vii
LIST OF TABLES AND FIGURES	xi
CHAPTER ONE: INTRODUCTION	1
Introduction	1
Statement of the Problem	5
Image of the Child as Competent	12
Possible Consequences if Problem Not Addressed	15
Purpose of the Study	16
Guiding Research Questions	16
Expected Contribution to the Field	17
Definition of Terms	18
Overview of the Literature	19
Transition Between Early Intervention and Preschool Special Education	19
Individual Family Service Plans and Individualized Education Programs	19
Coaching Families	20
Family Engagement in Education	20
Videoconferencing in Public Education	21
Design of the Study	21
CHAPTER TWO: REVIEW OF THE LITERATURE	25
Introduction	25
Transition Between Early Intervention and Preschool Special Education	26
The Development of Individual Family Services Plans and Individualized Education Programs	31
Coaching Families	36
Family Engagement in Education	39
Relationships in Family Engagement	40
Use of Videoconferencing in Public Schools for Meetings	42
Conditions for Successful Videoconference Meetings	43
Conditions for Successful Videoconference Meetings	41
Public Preschool Education During a Global Pandemic	45
Conclusion	47
CHAPTER THREE: RESEARCH DESIGN AND METHODS	49
Introduction	49

Research Method Rationale	50
Role of the Researcher	53
Selection of Participants and Setting	54
Interview Process	56
Data Collection Procedures	56
Survey	57
Videoconference Interviews	60
Data Analysis	61
Coding	61
Delimitations and Limitations	62
Delimitations	62
Limitations	64
Ethical Considerations	64
Validity	65
Reliability	66
Chapter Summary	66
CHAPTER FOUR: PHENOMENOLOGICAL ANALYSIS	69
Introduction	69
Participant Demographic Information	71
Data Collected for Research Question One	72
Tools Used to Collect the Data	73
Discussion for Research Question One	73
Analysis of Data Collected for Research Question One	80
Themes: Question One	81
Finding #1: Team Member Roles Influence the School-Family Partnership	82
Finding #2: Established Systems and Processes for Meetings Help to Promote Understanding	82
Finding #3: The Steps in the Transition Process are Foundational in the Establishment of the School-Family Partnership	83
Data Collected for Research Question Two	84
Tools Used to Collect the Data	84
Discussion for Research Question Two	85
Analysis of Data Collected for Research Question Two	92
Themes: Question Two	92
Finding #4: There Are Established Systems to Explain the IEP Process, the IEP Document was not Explained in Detail	93
Finding #5: The Lack of Face-to-Face Meetings Impacted the Assessment and Subsequent Development of an Accurate and Meaningful IEP	93
Data Collected for Research Question Three	95
Tools Used to Collect the Data	95
Discussion for Research Question Three	95
Analysis of Data Collected for Research Question Three	103
Themes for Research Question Three	103
Finding #6: Videoconference Platform IEP Meetings are Efficient	104

Finding #7: It is Essential to Capture Anecdotal Information Shared by the Family to Support and Expand on Formal Assessment Results	104
Finding #8: Team Members Felt Heard During Videoconference Platform IEP Meetings	105
Summary	111

CHAPTER FIVE: SUMMARY, DISCUSSION, FUTURE RESEARCH, AND FINAL REFLECTIONS 115

Introduction	115
Summary of the Study	115
Discussion	122
Research Question One	123
Research Question Two	124
Research Question Three	125
Synthesis of Findings from the Three Guiding Research Questions	125
Recommendations for Local Education Agencies	128
Established Systems to Explain the IEP Document	128
Meeting Efficiency	129
High Intensity Transition Practices to Perpetuate Family-School Partnership After the Development of the Initial IEP	129
Recommendations for Future Research	130
Power Differential on Videoconference Platform Meetings	131
How to Incorporate Children’s Strengths Within IEP Documents with Videoconference Platform Meetings	131
How do we Ensure Human Connection When our Foundation is Virtual?	132
How do we Promote Further Collaboration Between Early Intervention Team and LEA to Lead to an Increased Understanding of the IEP ?	132
Final Reflections	133

REFERENCES 137

APPENDICES	149
Appendix A: Email Letter to Superintendents of Potential Participants	149
Appendix B: Email Letter to Potential Participants	150
Appendix C: Informed Consent to Participants	151
Appendix D: Initial Screening Questionnaire	153
Appendix E: Interview Protocol	154
Appendix F: Interview Questions for Family Participants	155
Appendix G: Interview Questions for LEA Participants	156

LIST OF TABLES AND FIGURES

Table 1: Interview Questions for Guiding Question One	77
Table 2: Interview Questions for Guiding Question Two	87
Table 3: Interview Questions for Guiding Question Three	97
Table 4: Themes and Findings Relevant to Research Question One	99
Table 5: Themes and Findings Relevant to Research Question Two	100
Table 6: Themes and Findings Relevant to Research Question Three	101
Table 7: Five Themes	xxx
Table 8: Eight Findings	xxx
Figure 1: Initial Participant Survey Information	54
Figure 2: Role of the Participants	66
Figure 3: District Information	67
Figure 4: Prevalence of Themes Represented in a Word Cloud	98

CHAPTER 1: INTRODUCTION

Introduction

Reciprocal family-school partnerships lead to increased learning outcomes and positively impact communities (Epstein et al., 2009). Transitions naturally lend themselves as a time of opportunity to examine, reflect, and improve. Within the special education continuum, there is an embedded transition as children age out of early intervention (EI) services, also referred to as Birth to Three (B-3) services in Connecticut, provided for children from birth to age three, and preschool special education services which begin at three years of age. The Individuals with Disabilities Education Improvement Act of 2004 (IDEA) is federal legislation that mandates special education services for qualifying children with disabilities (Individuals with Disabilities Improvement Act, 2004). Also, in accordance with IDEA (2004), at three years of age, young children with identified disabilities transition from early intervention special education services, provided in a child's natural environment, to services provided by the local education agency (LEA), typically in a school environment. IDEA, Section 632, part G defines natural environments "including the home and community settings in which children without disabilities participate." This shift is not exclusively in service location but also impacts delivery models. At this transition, services shift from an Individual Family Service Plan (IFSP) to an Individualized Education Program (IEP). The language in the two distinct plans showcases the shift from a family focus to an institutional focus. This shift in wording implies a move from family focus to educator focus. Early intervention services are incorporated as a family coaching model

of service delivery. Preschool special education and related services are typically provided by education staff, directly with the child. This study looked at the role that videoconference transition meetings played during the global COVID-19 pandemic for children and families bridging between EI services and special education services provided by the LEA. According to IDEA (2004) as children approach their third birthday, a referral to the LEA shall be made by early intervention not prior to 9 months before a child turns three, and not later than 90 days prior to the child's third birthday. A referral received by the LEA less than 90 days prior to the child's third birthday constitutes a later referral and is subject to the 45 school day timeline outlined in the legislation.

As previously mentioned, solid reciprocal family-school partnerships are linked to improved student outcomes (Epstein, 2009 et al.). In this researcher's career, this researcher has primarily worked with preschool children with disabilities as both a special education teacher and an educational leader. In this researcher's experience, the times where solid partnerships with families were established seemed to yield better educational outcomes for children. Kurth et al. (2019) details the power differential between school staff and families in the individualized education program (IEP) meeting. The IEP meeting is the formal meeting where all educational decisions are determined and then documented in the child's IEP. This school system stance as exclusive experts can influence/inhibit the team's ability to engage in a reciprocal partnership with a child's family. There can be barriers that prohibit the establishment of family partnerships This researcher has observed that many of the barriers come from school staff who possess a self-appointed perspective as educational experts. Rossetti et al. (2017) detail the

essential role that trust amongst both school and family team members play in the establishment of partnerships. Additionally, there can be family and cultural factors which influence a family's willingness to partner, or their perception that a partnership is valuable. Turnbull and Turnbull (2001) have identified seven functions the family unit has to meet: 1) economic needs; 2) daily care needs; 3) socialization needs; 4) recreational needs; 5) self-esteem needs; 6) affection needs; and 7) educational and vocational needs. Johnson et al. (2004) have identified barriers to family participation in a child's education. These barriers include logistical barriers such as transportation, babysitting, and scheduling. Communication can also present an obstacle to family participation. Communication can range from language dominance to the use of educational jargon impacting comprehension of discussions, conversations, and meetings (p. 7). Johnson et al.(2004) have identified different barriers perceived by educators. These perceived barriers include parental apathy, scheduling and time constraints, and professional expertise. Scheduling is listed as a common barrier for families and school staff. A videoconference platform has the potential to reduce the impact of barriers to transportation, and childcare, while also allowing for increased scheduling flexibility.

Since the onset of the COVID-19 global pandemic, face-to-face interactions have shifted dramatically. In schools, this often meant that only staff and students were permitted inside school buildings. Videoconferencing replaced most in-person meetings with families. IEP meetings were being held primarily via videoconference or teleconference platforms. For families of children transitioning between early intervention and LEA services, this may be their only vehicle of meeting with the LEA

staff thus far in their child's educational journey. This study explored the experiences of families and school staff who initially met and interfaced to plan for a young child's education as the child and family transitioned between early intervention services and the LEA preschool programming. This study also explored how, if at all, this platform helped to break down the scheduling barrier and improve overall participation among team members.

As an educational leader, this researcher has focused her professional career and leadership on programming for preschool children in public schools in Connecticut (CT). These programs include children with disabilities. Prior to the broad range impact of the onset of the COVID-19 global pandemic in March of 2020, in this researcher's professional experience, IEP meetings were primarily conducted as in-person meetings at the school. In this researcher's professional experience, there was an implicit expectation that parents/guardians attend meetings in person. Parent participation via telephone was an exception, generally reserved for meeting compliance with legal timelines. Meetings were typically scheduled with parent input, but this researcher had not participated in or been aware of gaining family participation for IEP meetings via a videoconference platform. After the initial onset of the global COVID-19 pandemic, pursuant to Governor Lamont's Executive Order No. 7 and subsequent revisions, all school districts in Connecticut were directed to proceed to remote instruction. As a result of this shift to remote instruction public schools' meetings both within the system as well as external meetings with families shifted to a videoconference platform. This change allowed, and encouraged, family participation in IEP meetings via videoconference. Based on this researcher's experience, this platform appeared to improve participation for families by

eliminating or reducing the barriers of the need for childcare, transportation, and time off from work. These barriers were previously identified by Johnson et al. (2004). As this researcher continued to participate in videoconference IEP meetings, this researcher became especially interested in the potential positive impact on the partnerships between families and school districts of children whose initial transition between early intervention and preschool special education programming began via a videoconference IEP meeting. Based on this research and personal experiences this researcher wanted to delve into the phenomenon, or stories, of both family and school staff participation in videoconference platform IEP meetings and the impact on family-school partnerships.

Statement of the Problem

As identified by Kurth et al. (2019) family input into the IEP process is not consistently valued. Early intervention and preschool special education services were not included in initial special education legislation. In 1986, with the passage of PL 99-457, early intervention services for infants and toddlers as well as preschool special education for children ages 3-5 were added to special education requirements. As a result of the passage of these federal and state laws, local education agencies (LEA) now must provide free and appropriate educational programs (FAPE) for children with disabilities, beginning at age three (Education of the Handicapped Act Amendments 1986). IDEA (2004) Part B details requirements for special education and related services for children 3-21 years of age. IDEA Part C details early intervention services for children from birth until their third birthday. There is a transition, by design, between Part C and Part B as children age out of one system and advance to the next. Implementation of early intervention services relies on the family as service providers. Early intervention services

are provided to a child in their natural environment. This natural environment could be in the child's home, child care setting, and or in community settings where the child participates or attends. Part B relies on educational staff as service providers, and is often provided in a public school setting.

In the IEP process, it is essential to have parent participation. IDEA states that families are active participants on the IEP team. Families have valuable information specific to their child and learning style, interests, development, and preferences. Additionally, participation in the IEP process is an opportunity for family members to contribute to the planning of their child's formal education. Young children are continuously engaged in formal and informal learning opportunities both at home and at school (Skwarchuk et al., 2014). As families interact in their households and communities, they provide both formal and informal learning activities. Active parent participation in the IEP process helps to ensure that families are sharing and providing information about observations and skill development, as well as receiving information about their child's specific and individual learning needs. After the initial IEP is developed, the team must meet at a minimum of one time each year to conduct an annual review. Individual school districts report compliance with special education regulations to the state department of education as a measure of accountability. This annual IEP meeting is essential to update and revise programming. During the annual review IEP meeting progress toward goals and objectives are discussed, and new goals and objectives for the following school year are developed. Professionals and family members may call for an IEP meeting at any time and do not need to wait for the annual review if there is a need or concern. Each IEP team must consider the individual needs of

the child, being mindful that programming should be provided with typical peers, in the least restrictive environment (LRE), to the maximum extent appropriate. Preschool classrooms are typically structured for active learning through play. Vygotsky (1978) states that young children learn primarily through play therefore, a preschool classroom can be adjusted to provide and accommodate the needs of children experiencing delayed skill development by adjusting the scaffolded play opportunities. The preschool classroom naturally lends itself to embedding play activities that reach varying developmental levels for individual children simultaneously. The location of services is a decision that the IEP team will make (IDEA, 2004). For infants and toddlers, the Individual Family Service Plan (IFSP) focuses on service delivery in a child's natural environment in the home or community. In an IEP the services are typically provided within a public school district.

Services outlined in an IEP grant children access to special education and related services. Once a child has an identified disability, and the IEP team determines that the disability adversely impacts the child's ability to access the general education curriculum, the team develops an IEP. When IDEA was reauthorized in 2004, there were clearly stated guidelines for the development of a student's IEP. In sections 300.320 through 300.324 of IDEA, these guidelines explicitly define and outline the components of an IEP (2004). An IEP is a written and legally binding document that is developed through a team process and reviewed at least annually. Initially, the IEP team meets to determine eligibility for special education services. After a child is determined eligible, the team develops an IEP. The IEP documents the child's present levels of academic (developmental for preschool) functioning, and how the child's identified disability

affects their participation in the preschool classroom (listed as general education curriculum for children in grades kindergarten through twelve). These statements of present levels are utilized to develop specific measurable goals and short-term objectives that will be addressed through instruction over the next 12 months. In addition to the specific and measurable goals and short-term objectives, there is also a statement of how these goals and objectives will be measured and how this progress information will be documented and reported to families. This portion of the document is critical, and as such, is typically the focus when examining quality (Barrio et al., 2017). After goals and objectives have been developed, the team determines the special education services and related services necessary for the child to meet these goals (IDEA, 2004).

Interestingly, this section of the IEP document is geared toward students in grades K-12. The ten parts for completion in present levels of educational performance (PLEP) are academic/cognitive language arts, academic/cognitive math, other academic/nonacademic, behavioral/social/emotional, communication, vocation/transitional, health and development including vision and hearing, fine and gross motor, activities of daily living, and other. This format limits the team to consider the different developmental domains as either precursor academic skills or to write them into the 'other' section. This oversight may encourage a premature focus on academic skill development during preschool (IDEA, 2004).

The intent of the legislation is that all members of the IEP team come to the table with equal value placed upon their input. However, professionals often monopolize decision-making for the team (Kurth et al., 2019). Feinberg and Ladew (2011) and Lo (2012) suggest the significance of preparing family members in advance of the formal

meeting. This preparation can include explaining the process as well as partnering with families to organize their thoughts and contributions, informing them of whom to expect in attendance, accompanying paperwork, and how the meeting might proceed. Within the Connecticut IEP document, on the PLEP page, there is a specific box to document information shared by family members. Having one specific location for information from the family on Connecticut forms suggests that perhaps their contributions do not carry the same significance, and may not be integrated into the specified domains (Kurth et al., 2019).

Additionally, on the prior written notice page, there is a specified area to indicate when parents are not in agreement with the team. This page is critical to the IEP as the location to indicate agreement or disagreement with team decisions. Such a specified area suggests that family members are not considered equal team members and that their disagreement with other team members necessitates a designated notation spot exclusively for parent team members rather than any team member (Kurth et al., 2019). This disconnect, or power differential, between the child's family and the professionals on the team may contribute to IEP documents that do not capture culturally relevant and responsive information specific to the child and their family (Barrio et al., 2017). The IEP document does not have a specified location for entry of information that is relevant to an individual child and or family's culture and the subsequent impact on their individual educational needs. This leads to the question, does this tool give equal power to all team members? If power amongst team members is uneven, does this impact trust and therefore a mindset? And if so, does this factor into the access to the equity of services?

As introduced by Mueller and Vick (2019), the development of trust amongst all team members is a way to capture the voice of all contributors. Trust begins to develop at the onset of the process. How the school district and the professionals reach out to and communicate with the family before formal meetings is an essential foundation. Lucas et al. (2014) list three critical skills that are especially important for professionals to be aware of leading up to and throughout the special education process:

1. The ability to understand how to gather information from families throughout the process;
2. The ability to conduct a functional assessment that gives a clear picture of the child's abilities and needs in the child's natural, everyday settings, activities and routines, and;
3. The ability to use the information to develop goals (p. 4).

For the team to understand the relevance of the child's educational needs during everyday home and community experiences, the team will need to engage with the family. Family engagement requires trust amongst the team members (Rossetti et al., 2017). Trust is essential to ensure that the team can capture an accurate reflection of the child and engage in proper planning. Trust creates a platform on which a family is comfortable sharing information. This information exchange between family and professionals can provide essential information about the child.

Families are often propelled into active advocacy on behalf of their child's educational programming as a means of capturing their voice. Advocacy is not always received by school teams as a positive aspect of family participation and can be viewed as adversarial. Perhaps this could be avoided in a system that values collaboration. Rossetti et al. (2017) state, "Cultural humility is avoiding assumptions about family's motives or capabilities, and instead trying to understand the family's experience and

perspective” (p. 331). They go on to elaborate that culturally and linguistically diverse families "can help to bridge a gap in the IEP process and bring about important positive outcomes for children and their families" (p. 337). The IEP development process best serves children when all team members can share and work collaboratively. These collective efforts drive the team to develop an IEP that takes into account the child's complexity and how this child can learn and contribute to their school community, home community, and the broader community.

Tomlinson and Hyson (2009) state that the teacher is responsible for creating space for a mutual partnership with the family. This responsibility includes self-awareness as to how the teacher's positionality factors into the background and beliefs of the family. As a professional, it is the teacher's role to establish and maintain communication and dialogue with family, specific to the family's child and education. At times this may include informing families, but equally important is the role of learning from families. If one party within a collaboration is steadily maintaining the position of knowledge and information, this may impact the dynamics and reciprocity of exchange. Families are often referred to as experts about their children; however, within public schools, it is not uncommon for professionals to assume dominance in overall expertise (Tomlinson & Hyson, 2009). Bandura (1993) states that self-efficacy is a major component in each person's learning. Each individual's ability is malleable and influenced by their belief in possibility. Self-efficacy is a cycle that ties together instructional opportunities with student experiences, loops in family engagement, and then circles back around again in a continuous cycle. Teachers and families partner to impact learning. When the school partners with a child's family, they gain additional

insight and perhaps tools to involve the child as a learner. This suggests that instruction that is generated through a child's interests has an increased likelihood to engage the learner.

Image of the Child as Competent

As adults within an educational system, our image of children, colleagues, families, and community is vital. Within a system of special education, there is an emphasis on deficits, as identified through the IEP process. Gandini (2008) presents a view of possibility and potential;

All children have preparedness, potential, curiosity; they have interest in the relationship, in constructing their own learning, and in negotiating with everything the environment brings to them. Children should be considered as active citizens with rights, as contributing members, with their families, of their local community" (p. 2).

This suggests that as educators, we guide children on their formal educational journey. We recognize, celebrate, and expand qualities and attributes within each of our children that have the potential of presenting as a contribution to the community. Edwards (2003) further defines the image of the child as innately intelligent and curious. As educators, we are tasked with discovering or uncovering the intelligence within each of our children and providing space and assistance so that they can demonstrate and expand upon their skills and knowledge. This suggests that educators possess an image of each child as a being with an abundance of strengths and possibilities. Malaguzzi (1994) explains the importance of giving children time and space to cultivate strengths and interests. "Instead of always giving children protection, we need to give them recognition of their rights and of their strengths" (p. 5). Reciprocal partnerships with

families offer the opportunity to further enhance knowledge specific to the individual child and promote opportunities for the generalization of skills between and among different environments.

The schools of Reggio Emilia, Italy have been intentional in their inclusion of children with special rights. They view the child as capable and focused on strengths. In such a view, the educators work with the family to help them also recognize their individual child's potential;

Our goal is to give families the possibility to construct a new image of their child. It often happens that the family goes home from the hospital not only with a child with a disability but with a whole list of what the child cannot do. What we want is to stimulate the families to imagine what can happen and what is possible, and this can only take place when children are included in the educational context. The children have the right to be respected in their growth and development; they do change and learn (Edwards et al., 2012, p. 196).

Runswick-Cole and Hodge (2009) describe the impact of language, specifically "children with special rights versus children with special needs has maintained a focus in education on individual children's difficulties or within-child factors" (p. 199). Conversely, special rights place emphasis on the services and supports to which an individual child is entitled. They elaborate to explain the evolution of children with special rights as springing from the United Nations rights for all children. This focus on rights versus deficit, or disability, provides a positive lens through which we can focus necessary supports and services for individual children to allow them to be successful within the school. In addition to this view of children possessing special rights, the

schools of Reggio Emilia also value the relationship with each child's family. Gilman (2009) states, "The teacher's role must encompass creating a welcoming environment where participation and communication are encouraged. As a result, school life and home life become extensions of each other where each is complemented" (p. 29). This suggests that in addition to children's entitlement to special rights, families also have special rights focused on reciprocal partnering with the school.

The current special education structure in the United States is based on the recognition of children's weaknesses, challenges, or perceived deficits. The current IEP process and subsequent document briefly capture a child's strengths. As a next step, how can these strengths be best utilized educationally? As strengths are identified, this allows for recognizing people as unique individuals with worthy qualities. Reggio Emilia-inspired (REI) programming recognizes children with disabilities as children with special rights. This designation suggests that all children be afforded equitable access to preschool programming that sparks joy and wonder. Katz (1999) mentions the value of experiences that cultivate intellect versus solely focusing on academics. REI practice supports developing the whole child in an educational atmosphere that embraces and values family and community as context toward educating the individual child. As such, REI is a potential exemplar in meeting the needs of children with special rights. Within REI, children are provided educational opportunities to explore and wonder. Lickey & Powers (2011) suggest that The Project Approach, as defined by Katz and Chard (1992) is a fundamental component in REI practice, a means toward a stance of strengths-based learning. A time to identify the knowledge and skills that preschool children have already developed, and expand upon these skills, rather than a heavy reliance on deficits in

development. This type of exploration should be an educational right for all children. Early childhood educators can harness quality elements such as family participation, quality curriculum, documentation as assessment, and learning environment to move beyond a deficit model. Malaguzzi, as described by Edwards et al. (2012), strongly believed that all learners and educators within the learning community had much to gain by the inclusion of children with special rights. This inclusion allowed educators to reflect on their pedagogy while thoughtfully planning to meet the needs of each child within the classroom.

The IEP documents educational/developmental strengths and weaknesses. However, the weaknesses are the areas that are given educational attention with the development and implementation of specialized instruction as well as related services. This researcher believes that it is necessary, and important, to identify gaps and deficits, but equally, or more important, to celebrate and expand upon joys and strengths (Lucas et al. 2014). This researcher is curious to see how initial partnering with families helped to identify, document, and operationalize individual child strengths within an IEP document. Cultivating a child's strengths is a major component in high-quality preschool. The transition between early intervention and preschool is a dedicated time to connect with families, establish partnerships, and set the course for identifying and using strengths in the IEP.

Possible Consequences if Problem Not Addressed

Trust between schools and families is strongest when cultivated from the onset of the partnership. There are three potential consequences if reciprocal partnerships are not forged from the onset of the partnership: 1) compromised trust; 2) equity of

access to quality preschool programming; and 3) inclusion of a child's strengths into special education programming. All three of these factors could adversely impact family-school partnerships. This study was designed to investigate the impact of videoconference platform IEP meeting participation during the transition between Early Intervention and preschool special education on the family to school partnerships during IEP development.

Purpose of the Study

The purpose of this study was to identify factors that contributed to and promoted positive reciprocal family-school partnerships, beginning at the entry transition between early intervention, and preschool special education programming. The researcher looked specifically to identify if a videoconference platform influenced and/or enhanced family-school partnerships. This included the identification of barriers that resulted in team members undervaluing family input in the IEP process, factors that promoted family-school partnerships in preschool special education, and effective methods for collaboration with families during the IEP process.

Guiding Research Questions

The following three research questions guided this study:

1. What are the various ways that teachers, special education administrators, related service providers and families report they establish home-school partnerships that bridge between home and school as children transition from early intervention to school-based programming during the global COVID-19 pandemic?
2. What are the factors and conditions that special education teachers, general education teachers, school administrators and family members believe are

barriers to family input into the IEP process for children transitioning between early intervention and LEA preschool during the global COVID-19 pandemic?

3. According to teachers, special education administrators, related service providers and family members what extent have the pandemic and digital conferencing tools positively and negatively affected family-school partnerships while developing IEPs for children transitioning between early intervention and the LEA during the global COVID-19 pandemic?

Expected Contribution to the Field

Findings from this study identified the correlation between videoconference participation during IEP meetings and collaboration and input between schools and families as children transitioned between early intervention and LEA special education services. The hypothesis was that if families are engaged in positive reciprocal partnerships, then an anticipated outcome would be increased collaboration and input from all team members in the IEP development and implementation process. The IEP document can capture an individual child's strengths, challenges, and interests from both a school and family lens. It is common knowledge that since the onset of the global COVID-19 pandemic, the use of videoconferencing has increased in public schools. This study looked at the use of videoconferencing during formal IEP meetings and its effect on promoting positive reciprocal family-school partnerships.

This study is important so that preschool special educators and families can recognize the impact on children's learning when reciprocal partnerships are forged at the entry point to the PK-12 educational system. This study is important to preschool families, educators, early intervention providers, and educational leaders that work with

young children with disabilities and their families. Additionally, this study identified how systems and processes, such as videoconferencing, have affected team participation in developing reciprocal partnerships.

Definition of Terms

The following terms are open to interpretation and are singled out here to make sure their meaning is understood to be the meaning intended by the writer.

Early Intervention: Federally mandated developmental special education and related services provided to infants and toddlers from birth up until age three, and/or coaching of family and caregivers (Part C, IDEA, 2004).

Family-School Partnership: Schools and families working reciprocally. “If educators view students as *children*, they are likely to see both the family and the community as partners with the school in children’s education and development. Partners recognize their shared interests in and responsibilities for children, and they work together to create better programs and opportunities for children” (Epstein, 2009, p. 9).

Forged: to create with great effort something that is sustainable.

Transitioning: to advance from one system to another, in this study this is a child moving from IDEA Part C early intervention special education services to IDEA Part B, school based special education programming.

Videoconference: The use of paired video and audio to convene a formal or informal meeting. Devices used for videoconference are typically phones, tablets, or computers.

Overview of the Literature

In order to identify the impact of videoconference IEP meeting participation on reciprocal family-school partnerships, six distinct bodies of literature were reviewed. Section one focused on the transition between early intervention and preschool special education. Section two delved into the development of the Individual Family Service Plan (IFSP) as compared to the Individualized Education Program (IEP). This is important as LEAs identify how the different processes and documents impact the transition between early intervention and preschool special education. The third section explored how to implement a coaching model when working with families of young children. This is significant as LEAs explore the feasibility of generalization of skill development across settings. The fourth section explored family engagement in education. The fifth section explored the use of videoconferencing in education, particularly as it relates to meeting and interacting with families during IEP meetings. The sixth, and final section, looked at public school education during the COVID-19 global pandemic.

Transition Between Early Intervention and Preschool Special Education

This first section of the literature review provides a framework for this study by delving into the initial transition for children and families between family-centered early intervention services and school-based preschool special education programming. The literature reviewed detailed the processes for each of the two systems and identified commonalities and differences. Additionally, the researcher explored the systems that have been established for this transition process. Key researchers include DeMonte (2010), and Hollingsworth et al. (2009).

Individual Family Service Plans and Individualized Education Programs Process

The second section of the literature review explored the Individual Family Service Plan (IFSP) and Individualized Education Program (IEP) process. This is important as the researcher identified common components as well as differences between the two documents. In order to best understand the transition between these two entities, it is important to first analyze the very documents that outline and capture the programming and services. Key researchers included Barrio et al. (2017), IDEA (2004), Kurth and McQueston (2019), and Lucas et al. (2014).

Coaching Families

The third section of the literature review explored the aspects of coaching families for service delivery. As family coaching is a primary component of early intervention services, a solid understanding of the expectations and delivery within this model provided context for the role that families play within the transition process. Key researchers included Feinberg and Ledew (2011), Lo (2012), Sheldon and Rush (2010), and Stewart and Applequist (2019).

Family Engagement in Education

The fourth section of the literature review looked at the role that family engagement plays in educational outcomes for children. The premise behind working collaboratively with families is to connect and enhance educational opportunities. As children receive programming within the school rather than at home, or community setting, families do not typically have the same physical proximity to their child's education. This body of literature explored how families and schools can engage in sustainable reciprocal partnerships. Key researchers included Edwards et al. (Eds.) (2012), Epstein et al. (2009), Henderson et al. (2007), Mueller and Vick (2019), and Rosetti, et al. (2017).

Videoconferencing in Public Education

The fifth section of the literature review investigated the use of videoconference platforms as a means of communication. The literature was explored by looking at components of the ability of people to connect via a screen or device as opposed to in person. During the global COVID-19 pandemic, many school systems relied on videoconference meetings to connect with families. This section examined how educators used videoconferencing to meet with families. The key researcher included Dale and Smith (2021), Jimenez et al. (2020), Kaye-Tzadok (2020), Lenkaitis (2019), and (McPherson 2020).

The Global COVID-19 Pandemic and Public School Education

The sixth and final section of the literature review looked at how public school education shifted dramatically during, and as a result of, the global COVID-19 pandemic. It is important to explore this shift as it relates to family and school relationships, means of communication, and delivery of services. Key researchers included Barnett, Graffwallner, & Weisenfeld (2021), Herdzina (2020), Herdzina, Russo, & Lauricella (2021), Nores & Harmeyer (2021), Wasmuth (2020), and Watson (2020).

Design of the Study

Creswell (2013) states “A phenomenological study describes the common meaning for several individuals of their lived experiences of a concept or a phenomenon.” (p. 76) The phenomenon to examine for this research is the platform of videoconference participation in IEP development for preschool children transitioning from early intervention to LEA. Creswell states that the phenomenological study identifies the what and the how of a common

experience/phenomenon. Phenomenological research allowed the researcher to gather information about this common experience and the commonalities and variations as they impacted the process of IEP development and family-school partnership.

The participants were families and professionals that had participated in the IEP meeting process for children transitioning from early intervention to LEA via videoconference platform since the onset of the global COVID-19 pandemic in March of 2020. The participants were both school system staff as well as family members. There were five participants that were parents from five different towns in Connecticut. There were seven school staff participants that work in five different districts; one special education administrator, one speech language pathologist, two general education preschool teachers, and three special education teachers.

There was some overlap in that one of the parents worked in the same district as one of the school staff participants, and two of the school staff participants worked in the same district. There were a total of 12 participants interviewed, representing nine different school districts. All participants either work for a public school in Connecticut or have a preschool child with an IEP enrolled in a public school in Connecticut. The interview questions were developed by the researcher to glean information about each individual's experience as they participated in the IEP process for a child transitioning from Early Intervention to LEA. The questions focused on contribution to the IEP document, ease of participation in the process, and depth of information shared.

The first step in the recruitment of potential participants was to send a letter electronically via email to LEA superintendents that informed them of the study (see Appendix A). Next, the researcher was able to identify research participants by

electronically distributing a letter of explanation to potential participants affiliated with public preschool special education programs in Connecticut. As these individuals were contacted, simultaneously, there was a letter of explanation that potential participants were given to share with families asking for their participation. After the identification of potential participants, the initial phase of data collection was to distribute a brief survey via email to identify if individuals met the criteria, and had participated in a transition IEP meeting between early intervention and preschool special education via videoconference during the global COVID-19 pandemic. Once individuals were identified, then an additional explanation of the study and informed consent was distributed electronically. Once identified through the initial survey, the researcher interviewed participants individually via videoconference. The interviews were recorded and subsequently transcribed. Once all of the interviews had been transcribed, the interviewer coded the information and identified trends and commonalities. The researcher then utilized ATLAS.ti software and compared commonalities and trends between participants, paying close attention to similarities and differences in responses between individual participant roles (family participants versus school staff participants). All videotapes and transcriptions are stored on a password-protected hard drive. Participation was confidential, and the researcher protected the identity of participants by stating role not name, and altering identifiable information. Individual quotes are referenced in the results, this was explained to participants in the consent form. To reduce bias, the research occurred outside of the researcher's district of employment.

The researcher recruited participants from public schools in Connecticut. The researcher interviewed seven school staff member representatives and five individuals

from families to provide a distribution of perspectives from both a school and family lens. The interview questions were developed by the researcher to solicit information specific to the three guiding research questions. The interview questions were designed to allow participants to share their stories as a way to uncover their collective experience, or phenomenon, of videoconference participation at a time of transition and how this might influence family partnership with the school.

CHAPTER TWO: REVIEW OF THE LITERATURE

Introduction

The bodies of literature in this review were selected to provide a context and background into how teachers, school leaders, and families establish home-school partnerships for preschool children with disabilities. This research study investigates the experiences of individuals participating in videoconference platform IEP meetings, specifically for families and professionals working and or caring for young children transitioning from early intervention to preschool special education during the global COVID-19 pandemic. This review of the literature begins with an examination of the transition process between the two systems which represent Part C and Part B of the Individuals with Disabilities Education Improvement Act (IDEA) of 2004. Part C is the section of IDEA for infants and toddlers up to age three, and Part B is the section for children/students ages three through twenty one. Next it goes on to examine the educational documents for students with disabilities, the Individualized Family Service Plan (IFSP) for children from birth to age three, and the Individualized Education Program (IEP) for children from three to 21 years of age. These documents are developed to identify appropriate goals and objectives and guide special education and related services. Next, the literature detailing the service delivery shift from an early intervention family coaching model to direct service delivery in a public school setting was reviewed. From identification to service delivery, family engagement is an integral component of the educational process and varying involvement can impact the education of young children. The literature describing the role of family engagement, as well as how family engagement is defined was examined. Since the onset of the global COVID-19 pandemic,

the role of videoconference parent meetings has increased in prevalence. This paper will identify key components cited in the literature as impacting meetings held via a videoconference platform. The literature review will then delve into public school education for young children during a global pandemic. The literature review will explore types of shifts and changes that have occurred and how this has impacted transitions, service delivery, and opportunities for families to support the education of their preschool age children.

Transition Between Early Intervention and Preschool Special Education

This section of the literature review provides a framework for this study by delving into the initial transition for children and families between family centered early intervention services and school based preschool special education programming. The literature reviewed details the processes for each of the two systems, identifying commonalities and differences. Transitions occur at different times in a child's educational experience. Entrance into public school education as a preschool student marks a significant transition. For many children this is their first entry point into formal schooling. Some children participate in services prior to public school entry, and some children have not had formal school experience up until this time. As children with disabilities transition between early intervention services and local education agency (LEA) programming, there is an adjustment for the child and the child's family.

Understanding the history of early intervention and preschool special education services in the United States can help to establish a context for the implementation of preschool special education programming as well as the transition between early

intervention and preschool programming. Preschool-age children in the United States that qualify for special education services are entitled to a free and appropriate public education (FAPE). This entitlement is essential as it is directly linked to civil rights and came about as a result of desegregation legislation that was passed (Civil Rights Act of 1964). These laws eventually expanded to include legislation specific to special education. The first special education legislation was PL 91-230, passed in 1970 (Elementary and Secondary Education Assistance Programs, 1970). This legislation is an expansion of a previous 1965 desegregation law, and it aimed to include elementary through high school-age children, then referred to as handicapped, to be educated in public schools. The next significant legislation was PL 94-142, To Amend the Education of the Handicapped to Provide Educational Assistance to All Handicapped Children, and for Other Purposes (1975). This legislation stated that all school-aged 'handicapped' children (beginning with kindergarten) would be entitled to FAPE. With the introduction of FAPE, school systems had the responsibility to educate all children, develop programs to meet their needs, and to fund services and programs that were part of the individual child's educational program. These laws were the beginnings of education for all children with disabilities within or provided by public school systems. The system expanded to include preschool-age children with disabilities with the passage of PL 99-457, Education of the Handicapped Act Amendments (1986). Specifically, section 619 of PL 99-457 includes public education for preschool-age children (three-five) with disabilities. For preschool-age children to qualify to receive special education services under this law, they are required to meet the same criterion as students in grades kindergarten through high school. They must have an identified disability that impacts their ability to learn and

access curriculum or classroom activities, thereby requiring specialized instruction. As a result of the passage of these federal and state laws, local education agencies (LEAs) now must provide free educational programs for children with disabilities beginning at age three (Education of the Handicapped Act Amendments 1986).

The Individuals with Disabilities Education Act (IDEA), PL 102-119 (1991), was the next iteration of PL 94-142. With this reauthorization, the wording in the law shifted away from identifying children as “handicapped” and moved to stating children with disabilities. In 2015, Congress passed the Every Student Succeeds Act (ESSA). Within this legislation, there were revisions to IDEA. As the legislation was revised, Rosa’s Law (2010) was also incorporated, and there is now recognition of the individual child as a person versus the disability. The terms within the laws and legislation have evolved with each iteration beginning with initial reference to individuals as handicapped, then to disabled, and currently as a student. Handicapped is now considered a derogatory term that is no longer used to refer to individuals with disabilities. This evolution suggests that we are now focused on necessary services, accommodations, and modifications for an individual person/child to succeed and progress educationally. This legislative progression moves to recognition of individuality and differences. This promotes the view of an individual person that requires supports and accommodations. This progression indicates an awareness that learning deficits and differences are secondary to the child as an individual, and do not define a person.

As young children with disabilities approach their third birthday, families enter into a time of transition between early intervention services and potential LEA provided special education and related services. IDEA identifies that Early Intervention

programming is responsible to hold a transition meeting, to which the LEA is invited, at least 90 days prior to a child's third birthday. The LEA next has the responsibility to hold an IEP meeting to review the referral to special education and plan a comprehensive evaluation. These evaluations can include evaluations completed by the Early Intervention team. Next the LEA must complete evaluations and hold another IEP meeting to review the evaluations, determine eligibility, and if appropriate develop an IEP that will be implemented on or before the child's third birthday. Kasprzak et al. (2020) have identified seven essential quality indicators for early intervention and early childhood (preschool) special education programs "(a) stakeholder engagement, (b) establishing/revising policies, (c) promoting collaboration, (d) using data for improvement, (e) communicating effectively, (f) family leadership and support, and (g) coordinating or integrating across the broader early childhood service sector" (p. 101). Presence of these seven factors during both early intervention and preschool special education might provide a platform for bridging between the two systems of services.

Rous and Hallam (2012) discuss transition practices versus transition procedures. They go on to elaborate that there can be both high intensity and low intensity practices during transition. Low intensity practices include dissemination of general information and activities or orientations that are geared for all families during times of transition. High intensity practices are individualized supports or efforts that are designed and implemented for a particular child based on their unique needs or experiences. They suggest that high intensity practices recognize and operationalize relationships and connections amongst school staff, early intervention staff, and families during the transition process. Powell et al. (2012) discuss how parental involvement can change over

time. “Increases or decreases in different dimensions of parent involvement may represent responses to children’s developmental needs and/or their school context, including curriculum expectations and grade level” (p. 280). This suggests that during the first three years when children spend a significant amount of time with their family members, that those family members feel connected to the promotion of their child’s development. High intensity transition practices between early intervention and preschool special education offer the opportunity to extend the families’ engagement over time.

It is common knowledge that effective communication is key to promoting reciprocity. Myers et al. (2011) cited that “Physical therapists who identified implementing practices that supported communication, collaboration, and strong, positive relationships between early intervention and preschool programs had greater involvement in the transition planning process" (p. 656). This idea can be generalized to all early intervention providers, not limited to physical therapists. Communication, collaboration, and connection are essential components in the transition process as high and low intensity transition practices are put in motion to support both the child and the family during this significant change in both service delivery and location.

Rous et al. (2010) found that the use of high intensity transition practices correlated with the heightened individualized needs of the child based on disability. Classrooms that embraced inclusive programming were more likely to utilize high intensity practices prior to a child beginning preschool. They also went on to identify the three greatest barriers to preschool transition practices as “lack of monetary compensation for summer work, parents lacking time or interest, and parents not reading materials/information sent home about transition activities/opportunities” (p. 26). Two of

these three factors suggest that most transition practices are not well communicated to families or individualized. The IEP process is a high intensity practice. As a school, we need to expand upon this current process to create additional high intensity transition practices that promote the engagement of families. Rous et al. (2010) state that these transition practices need to be relevant within the individual community context and developed through a lens of connection with the child, family, and community. Dahlin et al. (2020) found that in addition to family connection and relationship with school staff, families were more likely to access services and supports when there was a dedicated staff member in the role of “Family Partnership Advocate.” Their research was with families of children enrolled in Head Start preschool programming. They found that families working directly with a Family Partnership Advocate were utilizing specialized supports at a higher rate. This would suggest that families of children with disabilities, another vulnerable population, would benefit from connection with a Family Partnership Advocate for both high and low transition practices.

The Development of Individual Family Service Plans, and Individualized Education Programs

The Individual Family Service Plan (IFSP) is the educational document developed for an infant or toddler with an identified disability. An Individualized Education Program (IEP) is the document developed for a child with a disability between the ages of three and 21 (IDEA, 2004). In order to best understand the transition between these two entities, we must first analyze the very documents that outline and capture the programming and services. The titles of the documents distinguish the evolution from a special education system of supports focused on the needs of the child and family to an

exclusive focus on the educational needs of the individual child. Podvey et al. (2013) found that the IFSP does not typically guide the development of the IEP.

Gatmaitan and Brown (2016) detail a process that leads family members and early intervention providers for children under the age of three, from functional assessment to service delivery and integration. During this process, all members team together to identify learning strengths and challenges. “Families should be more than just recipients of the IFSP but rather co-creators of the IFSP” (p. 22). According to IDEIA, § 1436, part 4 c, the IFSP team determines if a child has a disability impacting on or more of the five areas of development: physical, cognitive, communication, social/emotional, or adaptive domains. As co-creators, all members of the team must have a clear understanding of the IFSP document. According to IDEA (2004) § 1436, part d there are eight sections to an IFSP: 1) a statement of the child’s present levels of development; 2) a statement of the family’s resources and concerns; 3) a statement of measurable results and anticipated outcomes; 4) a statement of the specific early intervention services; 5) a statement about service delivery in the child’s natural environment; 6) specific service details such as dates, length, duration, and frequency; 7) an identified service coordinator to oversee the IFSP and delivery of services; and 8) the steps that will be taken to support transition to the LEA as the child approaches their third birthday.

The sections of the IEP differ from those in the IFSP. IDEA (2004) § 1414, part d, 1, A outline how the IEP grants children access to special education and related services, identifying eight specific components of the document: 1) a statement of present levels of performance as well as the impact on participation in appropriate preschool activities (if applicable); 2) measurable annual goals; 3) description of how the goals will be

measured; 4) a statement of the specific special education and related services, and modifications or supports for school personnel to implement services; 5) a statement of the extent, if any, to which the child will not be able to participate with non-disabled peers; 6) a statement about state and national testing, necessary accommodations, need for an alternate assessment, or inability to participate in grade level testing; 7) a listing of services to include dates, frequency, duration, and location; and 8) a post-secondary transition plan (not applicable to preschool age children). The notable differences between these two documents are the shift from viewing the child within the context of their family and community (natural environment), to viewing the child's ability to access curriculum or appropriate school activities and function in the school environment. A common ground is that both processes begin by identifying the child as having a disability that will or does impact their ability to learn/access instruction.

Both IFSPs and IEPs are written and legally binding documents that are developed through a team process and reviewed at least annually (IDEA, 2004). Initially, the team meets to determine eligibility for special education services. After a child is determined eligible, the team develops an educational document, either the IFSP or an IEP. The document identifies the child's present levels of academic (developmental for preschool) functioning, and how the child's identified disability affects their participation in the preschool classroom (listed as general education curriculum for children in grades kindergarten through twelve). These statements of present levels are utilized to develop specific, measurable goals and short-term objectives that will be addressed through specialized instruction over the next 12 months. In addition to the specific and measurable goals and short-term objectives, there is also a statement of how these goals

and objectives will be measured and how this progress information will be documented and reported to families. This portion of the document is critical, and as such, is typically the focus when examining quality (Barrio et al., 2017). After goals and objectives have been developed, the team determines the special education services and related services necessary for the child to meet these goals (IDEA, 2004).

Interestingly, this section of the IEP document is geared toward students in grades K-12. The ten parts for completion in present levels of educational performance (PLEP) are: academic/cognitive language arts; academic/cognitive/math; other academic/nonacademic; behavioral/social/emotional; communication; vocation/transitional; health and development including vision and hearing; fine and gross motor; activities of daily living; and other. This format limits the team to consider the different developmental domains as either precursor academic skills or to write them into the 'other' section. This oversight may encourage a premature focus on academic skill development during preschool (IDEA, 2004).

In the IEP process, it is essential to have parent participation. IDEA states that families are active participants on the IEP team. Families have valuable information specific to their child and the child's learning style, interests, development, and preferences. Additionally, participation in the IEP process is an opportunity for family members to contribute to the planning of their child's formal education. Young children are continuously engaged in formal and informal learning opportunities, both at home and at school (Skwarchuk et al., 2014). Active parent participation in the IEP process helps to ensure that families are both sharing and informing, as well as receiving information about their child's specific and individual learning needs. After the initial IEP

is developed, the team must meet at a minimum each year to conduct an annual review. Individual school districts report compliance with special education regulations to the state department of education as a measure of accountability. This annual IEP meeting is essential to update and revise programming. During the annual review IEP meeting, progress toward goals and objectives are discussed, and new goals and objectives for the following year are developed. Professionals and family members may call for an IEP meeting at any time and do not need to wait for the annual review if there is a need/concern. Each IEP team must consider the individual needs of the child, being mindful that programming should be provided with typical peers, in the least restrictive environment (LRE), to the maximum extent appropriate. Preschool classrooms are typically structured for active learning through play. Vygotsky (1978) states that young children learn primarily through play therefore, a preschool classroom can be adjusted to provide and accommodate the needs of children experiencing delayed skill development by adjusting the scaffolded play opportunities. The preschool classroom naturally lends itself to embedding scaffolded and differentiated play activities that reach varying developmental levels for individual children simultaneously. The location of services is a decision that the IEP team will make (IDEA, 2004). For many preschool children with disabilities a play-based program naturally embeds opportunity for inclusive programming and specialized instruction.

Slade et al. (2018) looked at parent satisfaction with IEP content, actual services, agreement between content and services, and overall, IEP team effectiveness with parents of young children with the disability category of autism spectrum disorder. This study examined the perceptions of parents rather than an analysis of actual documents or

services. Of the parents participating in the study, they found that just over half of the families were satisfied with all four examined components (p. 248). Overall, they found that parents with strong family-school partnerships and higher financial resources paired with less experienced teachers reported perceived higher IEP satisfaction. They go on to speculate that less experienced teachers present current information or in general present in a way that is less intimidating to families (p.256). Slade et al. noted that their findings suggest that training specific to communication, problem solving, and goal setting for school IEP team members would best focus on these broad concepts as well as cultural variations in order to best establish partnerships with families and subsequently plan and deliver special education and related services (p. 257).

Coaching Families

Rush and Shelden (2020) define coaching as a style of interaction. This style of interaction is effective when working with families of young children with disabilities. “Coaching is an adult learning strategy that is used to support the coachee in identifying, obtaining, and mobilizing the knowledge and skills necessary to achieve an intended outcome” (p. 13). As early intervention staff work with adults in a child’s family as well as care givers within the child’s natural learning environment, coaching can be an effective component of early intervention services. A solid understanding of the expectations and delivery within this model provide context for the role that families play within the transition process as children approach their third birthday. The coach is preparing and organizing the situation for the family. This definition makes room for the child’s family to direct their knowledge of their family life and their child’s skills as they are situated within their own family context.

Elenko (2021) interviewed Drs. Rush and Sheldon to gain insight about coaching families as an interaction style, in alignment with adult learning theories in early intervention. During this interview Rush stated "Young children are nested in some kind of family constellation, however that family wants to define itself. You can't separate the child from their caregiver. The caregiver is going to be with the child more than the therapist could ever think about being". He went on to elaborate that to support caregivers in an early intervention capacity "We can come alongside that caregiver to assist them in supporting child learning and development during whatever it is that they're actually doing. That's the coaching piece" (p. 1). As the coach comes alongside the family member, their role is to first observe and listen. The analogy of a young animal nestled, or nested, helps us to visualize the foundation and support encompassing a young child prior to entering school. To elaborate, the coach's role is to work collaboratively with the family to plan, observe, practice, reflect and provide feedback (Rush & Sheldon, 2020, p. 20). Initially, this process is applied directly toward specific skill development for the child. As the coach and coachee work together, this evolves from focusing on direct work with the child toward supporting the family in the transition process between home or community services and school based services. To further the analogy, the small animal is provided with the necessary supports to leave the nest.

Rush and Shelden (2020) have identified five evidence-based characteristics for effective coaching when working with families. The first component is joint planning during which the coach and coachee identify and agree on focus. The next step is observation. This observation can be reciprocal as both the coach and coachee work toward the agreed upon focus. Next are opportunities for 'action/practice' which can

occur during both ‘spontaneous’ or ‘planned events.’ The fourth step is reflection where there is dialogue between coach and coachee about implementation of activities and outcomes. The final, and fifth step, is feedback. The feedback loop occurs after the coach and coachee have had the opportunity to reflect together. Here the coach synthesizes observations of the goal in action and the reflection conversations to help the coachee to “expand his or her level of understanding about a specific evidence-based practice (p. 20). Rush and Shelden summarize the coach and coachee connection as:

The coach's role is to provide a supportive, encouraging environment in which the coach and coachee can explore and reflect on the current situations, generate and consider new ideas and feedback, and develop and strengthen abilities to problem solve prioritized topics or situations. The coach's role is to build the coachee's capacity to engage in self-reflection, self-correction, and generalization of new skills rather than developing dependence on the coach for ideas, direction, praise, and sustained success (Rush & Shelden, 2020, p. 255).

Early intervention services are foundational for both the child with a disability as well as their family members and caregivers. The coaching interaction style detailed by Rush and Shelden explains how a coaching relationship has the power to impact a child’s trajectory.

Stewart and Applequist (2019) have identified how the coach to coachee relationship, especially in “culturally and linguistically diverse” families is “not only efficient and effective, but also an empowering form of service delivery” (p. 251). To look at this initial coaching relationship interaction model with families, suggests that the coach begins walking alongside the family and then guides the family toward including

the school, an extension of family. The interaction model of coaching in Early Intervention service delivery sets the foundation for receiving information from the family and then aligning with specific goals and instruction. Early intervention staff who are professionally trained in their area of expertise work alongside the adults in a young child's life. They identify needs, provide opportunities for growth, and facilitate opportunities for family members to articulate and define their child's individual needs while providing actual activities that promote growth. As parents gain information about how their actions positively impact their child's development, they are prepared as well-informed advocates in their child's education.

Family Engagement in Education

Public Law 114-95, Every Student Succeeds Act (2015), updated the wording specific to families and educational partnerships from family involvement to parent and family engagement. Engaged families positively impact learning outcomes for children (Mapp, 2003; & Powell et al. 2010). The premise behind working collaboratively with families is to connect and enhance educational opportunities. As children receive programming within school rather than at home, or in a community setting, families do not typically have the same physical proximity to their child's education. This body of literature will discuss how families and schools can engage in sustainable reciprocal partnerships that are of value to both families and schools. An excellent starting point for this work is to have a common understanding of the variability within family units. A family can be relatives within a dwelling, multiple dwellings, as well as individuals connected in relationship beyond legal guidelines, while providing support and personal

community to one another or the group. Collier et al. (2015) broadly define family as “The adults who play significant roles in caring for their children (p. 118).

The Division for Early Childhood (DEC) of the Council for Exceptional Children (CEC) published DEC Recommended Practices in 2014. These recommended practices are specific to early intervention and preschool special education programming for children with an identified developmental delay or children who are at risk for a disability. Within this document they outline clear expectations for family relationships. They state that there are three essential themes: 1. family centered practices, 2. family capacity-building practices, and 3. family and professional collaboration. They go on to elaborate ten specific practices to guide practitioners in their work with families (p.11). Bibbs (2018) elaborates that family engagement needs to shift to encompass a broader understanding which includes attainment of rights, not limited to academic success. Bibbs states “that articulating an ethical-political commitment to reciprocal participation between families and institutions responds to a significant gap in the family engagement literature. Such a commitment would force us to ask who are the recipients of family engagement outcomes and whose interests do they serve?” (p. 3). This suggests that school family engagement is a relationship grounded within a child’s family and community as opposed to the institution or school, with the school an extension or component of community, and given the broader sense of family described above.

Relationships in Family Engagement

Kelty and Wakabayashi (2020) identify that relationships are central to reciprocal family-school partnerships (p. 6). They go on to elaborate that they identified ‘fear of judgment’ and ‘lack of communication’ as the two greatest barriers to families in

partnering with schools for their children's education. The outcome of their focus groups identified that many families held educators responsible for lack of follow-through, whereas educators identified a lack of follow-through on the part of the families (p. 11). This indicates that effective communication within family-school partnerships can be a genuine barrier for both parties.

A dual-capacity building framework can begin the initial establishment phase of an effective family-school partnership (Mapp & Kuttner, 2013). The dual-capacity building framework for family-school partnerships identified a process that begins with identifying the challenge of the lack of opportunities, the necessary conditions for effective family-school partnerships, the establishment of clear policy and program goals, and culminates with effective partnerships that "honor and recognize families' funds of knowledge, connect family engagement to student learning, and create welcoming, inviting culture" (p. 8). Within this partnership families are "supporters, encouragers, monitors, advocates, decision makers, and collaborators" (p. 8). In identifying funds of knowledge, the school has a responsibility to recognize the role that the community plays in a child's family life/experience. Kelty and Wakabayashi (2020) state "Families' unwillingness to come to school does not indicate their unwillingness to be engaged. Schools and educators need to make every effort to meet families where they are most comfortable to effectively engage them" (p. 8). This would also suggest that the responsibility for creating the conditions for an effective family-school partnership are the responsibility of the school and school staff. It is within their control to create conditions that foster and promote positive, productive, and respectful reciprocal interactions. Lochman et al. (2018) state that in regards to family engagement that

“School officials must find time to step outside their school buildings and look into their communities to fully realize the potential of all their students, including those with disabilities” (p. 29). This allows the schools to identify their context in regards to the children and families within their school. The child and family cannot be viewed in isolation from the community, but instead, to establish context, must be viewed as an extension of the larger community. The onus of establishing reciprocal parent-school relationships begins with the school and can be continued and expanded through effective communication and continual partnering.

Use of Videoconferencing in Public Schools for Meetings

During the global COVID-19 pandemic, many school systems have been relying on videoconference platforms for instructional purposes as well as meetings to connect with families. This section will examine how educators are using videoconferencing as a platform to connect with families. It is essential to remember that a videoconference platform is a means to communicate and connect. Hooks et al. (2021) have developed the acronym "ACCESS" to provide focus in communication with families; "Avoid assumptions, communication of preferences, check documents, end with contact information, sensitivity to family context, and spotlight the positive" (p. 99). This acronym for interactions reinforces the need to focus on development of effective communication and relationships and can be applied with families as children begin the initial transition to the LEA. This is true for both in person contacts as well as those conducted via a videoconference platform. They go on to state “Families first interactions with early childhood practitioners can establish the precedence for future interactions and involvement in the child’s educational trajectory” (p. 98). Thus, highlighting the

foundational impact of interactions and teaming during the initial transition process between early intervention and preschool special education programming.

IDEA (2004) notes the value and requirement of parent and family involvement and input in the IEP process. IDEA specifically states that it is not a constraint that meetings all be held in person, but instead that ‘alternative means’ of meeting participation is accepted. Though this was initially written into IDEA, it was not this researchers common experience to have IEP meetings that relied on parent participation via telephone, and never utilizing videoconference technology prior to the global COVID-19 pandemic. This researcher noticed that family participation via telephone participation was viewed as a strategy only to be implemented when multiple attempts to have in person meetings had not been successful. This practice suggested that telephone participation was viewed as a less effective means of participation and even perhaps a judgment that the family members were less interested in partnering in their child’s education. Since the spring of 2020 and the global COVID-19 pandemic, videoconference IEP meetings have become common practice in many school districts across the United States, and have continued as pandemic precautions have eased.

Conditions for Successful Videoconference Meetings

To participate in a videoconference meeting, the participants must have access to both a device and internet. This access then allows participants to connect with both voice and video. The various platforms paired with a device and internet connection allow opportunity for participation as well as the capability to share information through screen sharing (Jimenez, et al. 2020, p. 1). As school systems have utilized these platforms, it is often assumed that families will have both a device and internet access to

allow connectivity and participation in meetings scheduled by the school. Some videoconference platforms allow the host to call in participants over the telephone, but still within the videoconference platform. In these cases, individuals can participate in the audio component, but are not able to access the video or screen sharing visual components.

Current research about the effectiveness of videoconference use during educational meetings is limited. Sperandio et al. (2021) researched the impact of use of videoconference during psychotherapy sessions. Their research showed that patients noted increased empathy on the part of therapists during videoconference sessions. This might suggest that as the therapists focused on listening to their patients, that the interaction was perceived with increased focus and reduced distraction on the part of the patient, offering an environment where the therapist was better able to listen and the patients perhaps sensed an increased level of being heard. Perhaps this might translate to an educational setting where the intent is for all parties participating in the IEP meetings to be able to listen, share, and be heard.

Weller (2017) looked at how videoconference communication during interviews altered the feel of the overall communication. She suggested that a videoconference platform is less formal than a face-to-face or in person meeting, and during an interview process this platform encouraged a less formal meeting. “The informality associated with mediated communication can counter the pressure of presence with remoteness and physical separation fostering a greater sense of ease” (p. 623). If we generalize this casual concept to the IEP meeting, it is possible that all team members, including family members, might feel an increased sense of comfort and willingness to share information

pertinent to educational planning. The idea of being a present active listener suggested by Sperandeo et al. (2021) and the move away from formality suggested by Weller may provide meeting conditions that increase a feel of welcome and participation for family members.

Public Preschool Education During a Global Pandemic

It is common knowledge that public school education in the United States shifted abruptly and dramatically during the global COVID-19 pandemic. For kindergarten through grade 12 classrooms, there was a shift to online platforms for classroom instruction. Nores and Harmeyer (2021) specifically looked at the impact on preschool aged children and their classrooms. They discussed research based effective practices in preschool classrooms and the difficulty in provision of services when children were participating remotely and or following through on activities with parents or caregivers instead of teachers specifically trained in child development and or early childhood education. Schools had to determine “how to replicate these types of educational experiences” (p. 6) that encouraged development of skills including self-regulation and relationship skills. They also examined that technology can be an effective tool when used to support, but not supplant, instruction from a teacher.

Nores and Harmeyer (2021) identified that preschool teachers were provided with supports around use of digital platforms, but professional development lacked a focus on online pedagogy and actual instruction. Preschool teachers entered into the online teaching arena with little to no support and training specific to online instructional strategies. This research identified that over 85% of preschool teachers surveyed were providing either synchronous or taped daily read-alouds, morning/community meetings,

music and movement opportunities, and gross motor activities. This research also indicated that teachers struggled to provide language and literacy activities, beyond reading stories and accompanying activities, on a daily basis. In this same research, school districts reported that 85% of those surveyed reported communicating daily with families around instructional opportunities and home implementation. This research reinforced the strong reliance on families as implementers of instruction during school closures which coincides with a decrease in direct communication between teachers and preschool age children during school closure (p.14).

It is important to explore this shift as it relates to family and school relationships, means of communication, and delivery of services. The coaching model outlined by Rush and Shelden (2020) may have been a tool utilized by some preschool educators to reach their students via working with their families and caregivers. It is also important to note that preschool education is a facet of early care and education. Adams et al. (2021) researched the impact of working conditions as they relate to the role of early care and education staff during the pandemic, and the impact on the economy. They did not explore the instructional shift required within preschool classrooms. This study highlighted that though much of the economy relies on the education system for a portion of childcare, in the field of early care and education, this is a critical and discussed factor. The researchers looked at pandemic related stressors for early care and education workers. These included cleaning procedures and required mitigation factors. This thought can be expanded to assume that with increased work stress that the children within these environments would experience their educational environment differently. It is not to assume that all was negative, but change and differences often impact

programming. It is common knowledge that many children who attend preschool programs also participate in childcare for the balance of their parent's work day. As children were participating in remote school opportunities, there were times when care givers were also implementers of instruction. Though early care and education teachers and childcare providers infuse instruction throughout their day and interactions, the implementers may not be held to the same level of accountability of outcomes as school-based providers. This would imply that during remote instruction, there was an increased need for collaboration between families for extension of instruction into childcare settings, both formal and informal. This highlights the need for reciprocal family-school partnerships to extend and generalize school-based instruction. These partnerships are situated within relationships.

Conclusion

The coaching relationship as detailed by Rush and Shelden (2020), reciprocal family engagement by partnering with families (Bibbs 2018; Christianikis 2011; Galindo & Sheldon 2012; & Mapp 2003), and practice-based transitions (Rous & Hallam, 2012) all hinge on relationships back and forth between families and schools and care and education providers. The beginnings of these relational foundations are often forged as a family of a child with a disability begins the transition process between early intervention and preschool special education services. The family typically enters into this transition phase with an established relationship with their child's early intervention team. As the family begins to forge a new relationship with the school team, the input that the family has into the IEP process is the initial phase of the family-school partnership. Early intervention teams coach families to discuss their child's educational needs, and help

families arrive prepared to partner with the school. Historically most of these initial transitional meetings between families, early intervention providers, and school districts have occurred in person. During the pandemic many of these meetings occurred via videoconference platforms. Families first met their child's teacher and educational team as an interactive image on a screen. To maintain the relationship and connection, high impact transition practices need to be incorporated beyond the IEP development process continuing the communication, connection, and collaboration between the child's family and the school.

CHAPTER THREE: RESEARCH DESIGN AND METHODS

Introduction

This study aimed to capture the stories and examine the perceptions and lived experiences of individuals who participated in videoconference platform IEP meetings for children transitioning between early intervention and preschool special education programming during the global COVID-19 pandemic. Creswell and Creswell (2018) state that in phenomenological research design, “the researcher describes the lived experiences of individuals about a phenomenon as described by participants. This description culminates in the essence of the experience for several individuals who have experienced the phenomenon” (p. 13). This researcher’s personal experience as a school administrator facilitating IEP meetings during the pandemic led her to pursue this topic and explore this phenomenon. What this researcher informally observed was that during videoconference IEP meetings families appeared to share more information about their child’s skills and development than had been observed during in person meetings. Actual meetings seemed to be more efficient over the videoconference platform. Participants arrived on time, the meeting followed the prescribed agenda, and there was less need to reschedule due to family or school conflicts. These observations led this researcher to the following three questions, which then guided this phenomenological qualitative study:

1. According to special education teachers, general education teachers, related What are the various ways that teachers, special education administrators, related service providers, and families report they establish home-school partnerships that

bridge between home and school as children transition from early intervention to school-based programming during a global pandemic?

2. What are the factors and conditions that special education teachers, general education teachers, related service providers, special education administrators, and family members believe are barriers to family input into the IEP process for children transitioning between early intervention and LEA preschool during the global COVID-19 pandemic?

3. According to teachers, special education administrators, related service providers and family members what extent have the pandemic and digital conferencing tools positively and negatively affected family-school partnerships while developing IEPs for children transitioning between early intervention and the LEA during the global COVID-19 pandemic?

This chapter describes the design of the study, presents a rationale for the type of study selected and implemented, and includes the process for recruiting individual participants, the development of the instrumentation, methods for data collection and analysis, the role of the researcher, and delimitations as well as limitations of the study.

Research Method Rationale

Creswell and Poth (2018) recommend conducting interviews to gather data for qualitative phenomenological research studies. This qualitative phenomenological research method was used to gather participants' stories to understand the context of participation in videoconference platform IEP meetings conducted as children transitioned between an early intervention (IDEA part C) and Local Education Agency (LEA) programming (IDEA part B) during the global COVID-19 pandemic. There was

a total of 12 participants interviewed; five family participants, one special education administrator, 2 general education preschool teachers, and three preschool level special education teachers. After videoconference IEP meeting participation, was there any impact on family-school relationships?

Currently, there is research that addresses family-school partnerships in the IEP process (Crossman et al., 2018; Dahlin et al., 2020; Gaitman & Brown, 2016), but no research specifically looks at the role that videoconference IEP meeting platforms play in establishing and maintaining family-school partnerships. The global COVID-19 pandemic accelerated family and school participation via videoconference platforms. This rapid and abrupt transition to videoconference meetings replaced face-to-face meetings and can be viewed as a phenomenon. Creswell (2014) states that “a phenomenological study describes the common meaning for several individuals of their lived experiences of a concept or phenomenon. The basic purpose of phenomenology is to reduce individual experiences with a phenomenon to a description of the universal essence” (p. 76). The integration/synthesis of individual stories is gathered and reviewed to explain a lived phenomenon, defining a phenomenological experience. Creswell also states, “The final written report or presentation includes the voices of participants, the reflexivity of the researcher, a complex description and interpretation of the problem, and its contribution to the literature or a call for change” (p. 44). The purpose of this study is to examine the phenomenon of videoconference participation during the transition between early intervention and preschool special education programming and capture the voice and stories of participants. As a result of these findings, what type of

role might videoconference IEP meetings hold in the future in relation to their impact on family-school partnerships?

Family engagement in education has been proven as an indicator of increased student learning (Epstein et al., 2009; Lander, 2017; & Mapp & Kuttner, 2013). The transition between early intervention and preschool special education is the entry point to public school education for many children. At this juncture, families and school staff collaborate to develop an initial IEP for preschool children with disabilities. This suggests that this time is essential in the early establishment of a shared relationship between individual families and their child's school. Prior to the global COVID-19 pandemic, IEP meetings were typically held in person at the school. In March of 2020, as schools in the United States pivoted to remote learning, meetings between schools and families shifted, often relying on videoconference platforms. The purpose of this study is to identify the impact of this change on reciprocal family-school interactions, particularly during IEP meetings.

A phenomenological methodology was selected for this research as circumstances during the global COVID-19 pandemic have directly impacted how schools and families interface, including during IEP meetings. This research aimed to assimilate the collective experience of school staff and family members who had participated in videoconference IEP meetings for children who transitioned between early intervention and preschool special education programming. Qualitative research was selected for this study to garner participants' experiences and gain insight into their perception for the potential generalization to the larger phenomenon. The researcher then looked at participant input as it related to family-school partnerships.

Role of the Researcher

This researcher chose phenomenological research to obtain an understanding of the collective experience of videoconference participation during the early intervention to preschool special education transition IEP meetings and whether or not this platform affected family-school partnerships. This researcher gained interest in this topic as a frequent participant in videoconference IEP meetings. Public schools in Connecticut temporarily closed in March of 2020 for two weeks. When the schools reopened, they shifted to remote schooling through the end of the school year due to the onset of the global COVID-19 pandemic. At this time, new types of communication and connectivity needed to be explored. This researcher noticed increased family attendance during videoconference IEP meetings. It appeared as though families were able to attend meetings without a need to reschedule multiple times. This was perhaps due to the overall flexibility with video participation. Participants needed internet access to attend and the commute to and from the meeting location was eliminated. This allowed for participation for family members during work hours as well as for those who did not have transportation. This researcher also noticed that during the meetings family members shared specific information about their child's present levels of performance, family members were consistently sharing input into the development of their child's IEP, meetings were held within previously established timeframes, family members residing in different households were able to participate, and discussions during the meetings remained focused on the child and their educational needs. As a result of these observations three guiding research questions were developed. All three questions were under the umbrella of using a videoconference platform for IEP meetings for children

transitioning between early intervention and preschool special education programming. The first question focused on the transition process, the second question sought to identify potential barriers to family input into the development of the IEP, and the third question looked to garner information about the effect of digital conferencing tools on the family-school relationship specific to the development of the child's IEP.

This study protects the identity of individual participants. The participants are referred to in the research by role, i.e., administrator, general education teacher, parent, special education teacher, or speech-language pathologist (SLP). Individual identity or personal data about each participant is protected, and individually identifiable information about participants is not shared in the research. All data is stored on a password-protected computer drive to which the researcher has exclusive access.

Selection of Participants and Setting

This researcher is a public school administrator in the state of Connecticut. For this study, the participants were recruited from public schools in Connecticut. The participants of this study were either family members or public school staff from Connecticut who had participated in a transition videoconference IEP meeting during the global COVID-19 pandemic. The public school staff was comprised of general education teachers, special education teachers, a special education administrator, and a related service provider. Prior to identifying participants, the researcher sent out an informational email to 25 school system superintendents in Connecticut on May 15, 2021 (see Appendix A). After this initial contact, school system staff were identified through school district websites. An explanation of the study and a link to the Google survey was sent to school system staff between May 16, 2021, and June 15, 2021 (see

Appendix B). This was sent via email to school staff in 25 different public school districts in Connecticut. Potential parent participants were identified by soliciting the assistance of school staff. The researcher asked school staff to forward the email letter of introduction with a brief description of the study along with the link to the Google survey to families who had participated in videoconference IEP meetings for children transitioning between early intervention and preschool special education during the global COVID-19 pandemic (see Appendix D). This brief survey included five questions to help the researcher identify potential participants who had participated in a videoconference IEP meeting for a child transitioning between early intervention and preschool special education since March of 2020. The letter that explained the study stated that in addition to the brief survey, each participant would participate in a videoconference interview that would last up to 45 minutes. After IRB approval and prior to identifying participants, the researcher recruited participants from outside her district of employment for this study.

There were 14 individuals that initially responded to the preliminary email inquiry. Of this pool, there were seven family members and seven school staff members. Twelve individuals completed the Google Forms survey: five family members, and seven school staff members. These 12 potential participants were provided with a consent form (see Appendix C). All 12 completed and returned the written consent with signature, acknowledging their willingness to participate in this study. The researcher signed the consent form and returned a copy to each individual participant. All 12 of these respondents followed through and completed a videoconference platform interview over Zoom for this study. The interviews were conducted between June 1,

2021, and November 9, 2021. According to Creswell (2013), phenomenology is “the lived experiences of individuals and how they have both subjective experiences of the phenomenon and objective experiences of something in common with other people”(p. 78). This research is a compilation of their collective stories that reflect their experience with videoconference platform IEP meetings for children transitioning between early intervention and preschool special education services.

Interview Process

The interview questions were developed based on a combination of a review of the literature as well as the researcher's experience as a participant in videoconference platform IEP meetings during the global COVID-19 pandemic. This researcher observed an increase in attendance at meetings as well as a reduction in the need to reschedule meetings. There did not appear to be any similar studies about videoconference IEP meeting participation and the potential impact on family-school partnerships. Two separate sets of questions were developed for the two participant categories of family or school staff. The questions were aligned with the intent of uncovering parallel information while accounting for differing perspectives. Prior to enlisting participants, the researcher piloted the questions. This process engaged one family participant and one school staff participant that worked with this researcher. The questions were vetted to ensure that they made sense, were not too long or redundant, and the wording was such that they were easily understood. Additionally, the researcher sought to ensure that the interview process could be conducted within a 45-minute timeframe. As a result of the pilot, the researcher confirmed that the two sets of questions were clear and concise.

Data Collection Procedures

There were three distinct phases to the data collection. The first step was to gain preliminary information and identify potential participants through a Google survey. After completing the survey, the next step was to obtain written consent from participants. After receipt of written consent, the researcher returned a copy of the dually signed consent form, signed by both the participant and the researcher, to each participant. Next, an interview was scheduled using the Zoom platform. At the onset of each interview, the researcher followed a specific interview protocol (see Appendix E). The study was introduced, and participants were reminded that this was a voluntary project for which they would not be compensated. Participants were informed that they could withdraw their consent for participation at any time during the research process and that their identity would be protected and individually identifiable information would not be included in the study. Participants were informed that should any concerns arise on their part during this study, they should utilize the contact information that was provided so that such circumstances could be addressed.

Survey

The initial phase of the research involved electronic email distribution of an online Google survey to 35 school system employees. The survey opened on May 15, 2021 and remained open until all participants were identified on November 1, 2021. As part of the recruitment process, school system staff were asked to forward the Google survey and explanation of the study to families who might meet the criteria as having participated in a videoconference IEP meeting since the beginning of the global COVID-19 pandemic. The results of the survey are shown in Table 1. The initial intent of the study was to have fifty percent of participants represent family members, and fifty

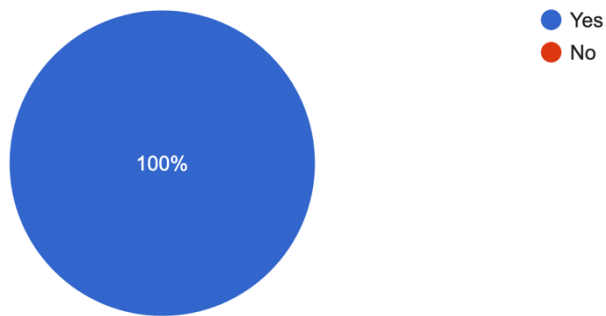
percent represent school staff. Due to the ongoing nature of conducting interviews as participants were identified, these percentages did not meet the specified target.

However, the study did include 41.7% of parents/family members and 58.3% of school staff, representing some differing viewpoints and roles.

Figure 1: Initial Participant Survey Information

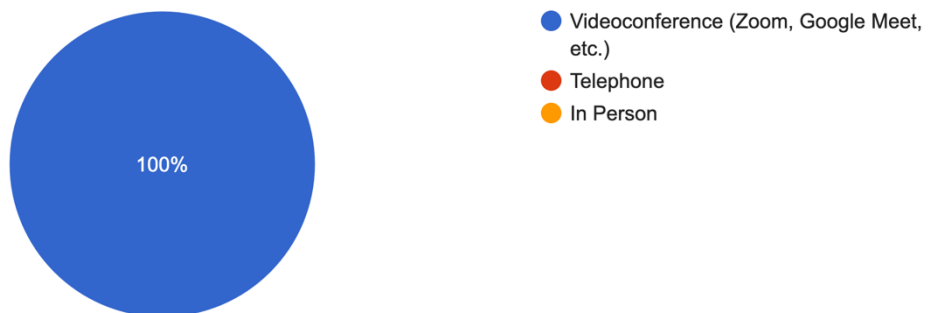
Question #1: Have you participated in an IEP meeting for a child transitioning between early intervention and preschool special education during the global COVID-19 pandemic?

12 responses



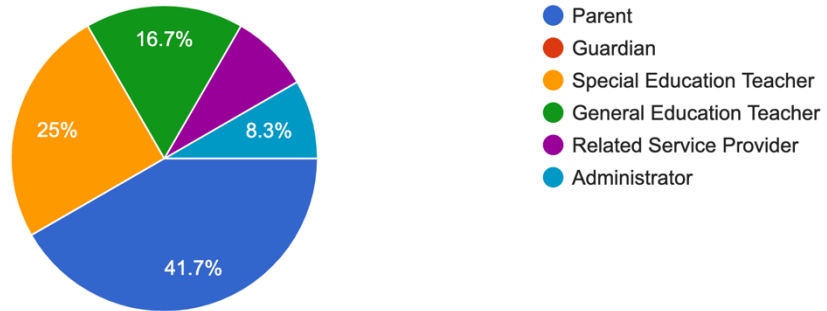
Question #2: What platform was used for this IEP meeting?

12 responses



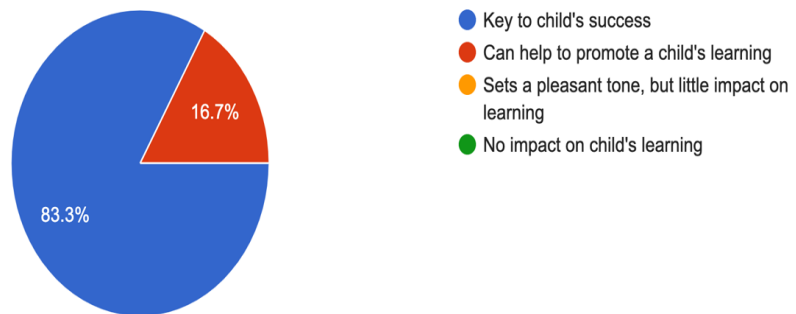
Question #3: Only proceed with questions 3-5 if you answered question #2 with the choice videoconference. What was your role in the transition IEP Meeting?

12 responses



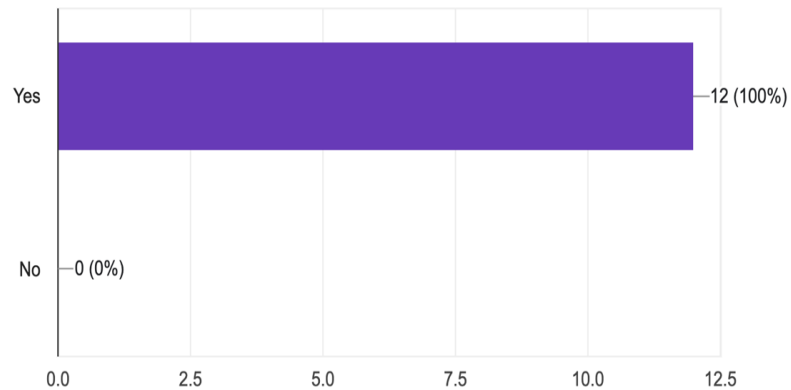
Question #4: What value do you place on reciprocal partnership between family and school in relation to a child's learning?

12 responses



Question #5: Would you be willing to participate in a study to share your experience?

12 responses



Videoconference Interviews

After each participant received a copy of the consent form with both the researcher's and the participant's signature included, the researcher scheduled a videoconference interview to be conducted via Zoom. At the onset of each interview, the researcher followed an outlined interview protocol. The study was introduced, and participants were reminded that this study was a voluntary project for which they would not be compensated. Participants were informed that they could withdraw their consent for participation at any time during the research process. There was a list of thirteen questions for school staff and a separate aligned list for parent participants. The questions were developed to solicit similar content but written to capture the individual experiences of school staff versus family participants. Eleven questions were designed to solicit information to inform the first two research questions. Two of the questions specifically targeted information for the third research question. However, it should be

noted that there was a crossover and the interview questions informed all three of the guiding research questions.

Each interview was recorded using a digital platform. After the interview, the researcher downloaded each interview and saved it to a password-protected drive. After the completion of all 12 interviews, the researcher transcribed each interview. The researcher did not use any software for transcription. Each transcription was then saved to a password-protected drive. Each participant received a copy of the written transcription of their interview in November 2021 via email. At that time, the participants were asked to check the transcription to ensure that their stories had been captured accurately. Two participants responded by affirming the accuracy of their words. Two participants acknowledged receipt of the transcript. Eight participants did not respond to the email contact.

Data Analysis

The researcher manually transcribed each interview. The researcher used ATLAS.ti software to analyze the data. The individual interview transcripts were uploaded to ATLAS.ti. Next, the researcher reviewed and then coded to identify trends and themes.

Coding

Creswell and Creswell (2018) detail steps in coding data in a research study. The process began with the preparation of the data for analysis, in this case, uploading the transcripts to the ATLAS.ti program. The design of the questions identified what the participants had experienced in the virtual IEP meetings, the phenomenon (Maxwell, 2013, p. 82). The researcher then tagged pieces of data throughout the transcripts for

preliminary codes and identified what Creswell (2013) defines as significant statements. These initial codes were then analyzed to determine themes. Creswell and Poth (2018) have defined themes and categories as “broad units of information that consist of several codes aggregated to form a common idea” (p. 328). After themes were identified, the researcher then utilized In Vivo coding. The purpose of including In Vivo coding was to capture the lived phenomenon, the words, and stories, of the participants, reflected in their own words. Saldaña (2016) states that In Vivo coding allows the researcher to “honor the participant’s voice” (p. 106). Next, the researcher looked at the identified codes and themes to “provide an understanding of how the participants experienced the phenomenon” (Moustakas, 1994, as cited by Creswell p. 82), known as horizontalization. The final step in the coding was to compare the themes and voices in relation to the three research questions to establish context for the phenomenon. These themes translated into the findings from the study.

Delimitations and Limitations

Delimitations are the elements that the researcher establishes to create a study that is within the scope of possibility. These are the factors put in place to allow for manageability. Limitations within a research project are the elements that are beyond the control of the researcher. These could include resources that do not exist or are not available as well as the impact of sample size.

Delimitations

As the researcher, this study was conducted with participants from the researcher’s home state of Connecticut. The researcher limited recruitment to individuals who either worked or resided in Connecticut as a parent or a certified staff member in a

public school in Connecticut. Additionally, the researcher did not include any participants from the researcher's district of employment. As a result, it was challenging to recruit parent participants as the researcher had to rely on employees in different districts to reach out to family members to share information about the study. Family participants were unknown to the researcher, and the lack of a previous relationship may have influenced the willingness of family members to participate in this study. The 12 participants represented eight different school districts which limited the scope of the sample. The participants self-identified as either working in an urban or suburban district. All 12 participants were female. The researcher did not gather additional demographic information about the participants.

Further demographic details and a larger pool of participants would have allowed for a richer delve into the questions and a greater understanding of the phenomenon. The collection was limited to enable manageability on the part of the researcher. The interviews were conducted, transcribed, and analyzed by the same researcher.

The initial survey was designed to identify participants who valued family-school partnerships. All 12 participants indicated that they placed value on this partnership. Due to the limited number of interested participants, all 12 could be interviewed. As the participants entered the interview process already placing value on the family-school partnership, this may have influenced the findings. The seven school staff participants were recruited and interviewed between June and August of 2021. The family participants took longer to recruit and were interviewed between June and November of 2021. This challenge in recruiting family participants could be attributed to recruiting

beyond the researcher's district of employment, where there were established relationships.

Limitations

The researcher did not locate any similar studies for reference as part of the literature review. There is emerging research on the impact of the global COVID-19 pandemic on public school education, but much of this research is focused on students in K-12 systems. This researcher did not locate any studies that directly addressed the use of videoconference platform use during IEP meetings. There is research on videoconference meetings beyond the scope of public school education. Due to participation being voluntary, the researcher had no control over the diversity of the participant group. It is possible that the family members and school staff that chose to participate represented a narrow perspective of the phenomenon.

Ethical Considerations

This research study was designed with ethical integrity. The researcher first informed school district superintendents of the intent to solicit participants. The researcher sent out, via email, information about the study with a link to an initial Google Survey. Upon completion of the Google Survey, the researcher distributed consent forms which participants signed and returned to the researcher. The researcher then also signed the consent form, kept an electronic copy on file on a password protected computer and sent a dually signed form to each individual participant. Each participant was interviewed over Zoom videoconference platform. Each participant agreed that the interview could be recorded. Each recorded interview was saved to the researcher's password protected computer. The researcher transcribed each interview

utilizing Google Word Voice Typing Tool. The researcher shared a copy of each participant's interview transcript via email. Each participant was notified of their right to withdraw from the study at any time both in the initial consent and in the email that accompanied the transcript. Each participant was asked to review their interview transcript to ensure accuracy. The data gathered during this study was collected and analyzed solely by the researcher. No personally identifiable information about participants was included in any part of this study. The researcher has exclusive access to all forms and recordings.

Validity

The interview questions were asked using consistent wording in alignment with the questionnaires. This researcher withheld personal viewpoints, and did not ask clarifying questions based on participant responses. This was an attempt to minimize researcher bias, reduce questions of validity, and increase credibility of findings (Maxwell, 2013, p. 125). This consistency of questioning helped to promote reliability of the data received. First-person reports were gathered through the interview process which helped to ensure the validity of this phenomenological study (Moustakas, 1994). To increase validity for this study, data were collected both through individual interviews and an extensive literature review.

Maxwell (2013) suggests research measures to increase validity. He discussed the significance of respondent validation. In this process the researcher "solicits feedback" (p. 126) from the participants. This researcher sent copies of individual interview transcriptions to each of the participants prior to coding. This was an attempt to ensure the accuracy of the content of each individual interview. The researcher asked the

participants to respond if any of the information transcribed did not accurately reflect the information that they had shared during their interview. Two participants responded to share that the transcription had accurately captured their experience. Two participants responded that they had received and read the transcript. Eight participants did not respond to the email contact.

Reliability

Maxwell (2013) also details the need to identify discrepant data during research. “You need to rigorously examine both the supporting and discrepant data to assess whether it is more plausible to retain or modify the conclusion, being aware of all of the pressures to ignore data that do not fit your conclusions” (p. 127). To this end, it is necessary for the researcher to identify bias prior to data analysis. Recognition of researcher bias will help to increase a valid interpretation of themes and codes, leading to findings. This researcher captured thoughts and ideas in field notes to assist in identifying potential bias. Triangulation of participants can help to increase the likelihood of valid interpretation of the phenomenon and reliability. Maxwell states that triangulation of the participants can be “collecting information from a diverse range of individuals and settings” (p. 128). This participant group of twelve individuals represented eight different school districts in Connecticut. This narrow scope was a delimitation to increase manageability of the study but may have impacted reliability. These findings are reliable as they relate to the individual stories, or phenomena, of the participants and cannot necessarily be generalized to a larger population.

Chapter Summary

This chapter outlined the qualitative research methodology used in this study to answer the three guiding research questions. The interest and role of the researcher were explored. The method for participant recruitment and the instrument design was detailed. Data were collected via a preliminary Google survey and individual videoconference semi-structured interviews using a Zoom platform. A detailed description of data collection procedures, analysis, and coding process was included. Data were analyzed by identifying codes that led to themes. This included In Vivo coding. As a result of the data analysis, recurring topics and themes were revealed. Finally, this chapter looked at the limitations and delimitations of this specific study. Due to the limited scope of this study, it is difficult to discern if this can be generalized to the phenomenon experienced by all individuals participating in IEP meetings for children transitioning between early intervention and the LEA across the state of Connecticut. However, it captures and summarizes the participants' experiences and identifies shared commonalities, their phenomenon.

Chapter four focuses on data collected from the study. This is a qualitative phenomenological study. The intent was to capture the essence of the phenomenon of IEP meeting participation via videoconference platform. It outlines the data analysis and analyzes the prevalent/recurring themes and topics that emerged during the data analysis. It then examines the identified codes and themes concerning the three guiding research questions. The questions were all presented to participants as written, additional clarifying questions were not asked. This was a deliberate attempt to promote reliability and consistency of process. The information is valid as it relates to the experiences of the 12 individuals who participated. Perhaps this phenomenon can be generalized to a

larger scope, but this study was limited to the stories and experiences of 12 participants from the state of Connecticut, and the composite results represent their phenomenon.

CHAPTER FOUR: PHENOMENOLOGICAL ANALYSIS

Introduction

The purpose of this study was to gain an understanding of the potential correlation between videoconference IEP meetings during the transition between early intervention (Part C of IDEA) and preschool special education (Part B of IDEA) and the level of family partnership during this transition. To achieve this goal, this research study was guided by the following three research questions:

1. What are the various ways that teachers, special education administrators, related service providers, and families report they establish home-school partnerships that bridge between home and school as children transition from early intervention to school-based programming during a global pandemic?

2. What are the factors and conditions that special education teachers, general education teachers, related service providers, special education administrators, and family members believe are barriers to family input into the IEP process for children transitioning between early intervention and LEA preschool during the global COVID-19 pandemic?

3. According to special education teachers, general education teachers, related service providers, special education administrators and family members to what extent have the pandemic and digital conferencing tools positively and negatively affected family-school partnerships while developing IEPs for children transitioning between early intervention and the LEA during the global COVID-19 pandemic?

Chapter three provided an in-depth description of how the three guiding research questions were infused throughout this study. Chapter four presents the data, method of

analysis, emerging themes, findings that correlate with each guiding research question, and the over-arching theme. This chapter is organized into five sections: introduction; demographic data collected; an overview of the analysis of the data findings for each of the three guiding research questions; overlapping themes; and a chapter summary.

This research was based on data gathered through 12 separate interviews conducted via videoconference. Initially, potential participants completed a Google survey distributed via email that consisted of five multiple choice questions. There were 12 respondents to the Google survey five parents, and seven school system employees. These twelve individuals followed through to the interview portion of this research. Seven school employees and five family members from five different families participated. Each participant was interviewed individually. The interviews were conducted via Zoom between June 2, 2021, and November 9, 2021. The researcher transcribed the interviews and analyzed them using descriptive and In Vivo coding. First cycle coding revealed ten codes. As the researcher continued to manipulate the codes, relationships emerged as the bonding theme, or as Saldaña (2016) states, “a theme is a category that transcends the three guiding research questions”(p.15). The researcher then analyzed each of the codes. This analysis led to an interpretation of the broader themes, then on to synthesize each participant’s story into a collective story, a phenomenological experience.

The design of this study was grounded in qualitative phenomenological research methodology. This was an attempt to gain a collective perspective specific to the story of the participants. The study looked at the phenomenon of an initial interface between Local Education Agency (LEA) and family via videoconference platform (Individual

Education Program) IEP meetings. There were 13 questions for each interview. The questions varied slightly depending on whether the participant was a school system representative or a family member. Out of the 13 questions, seven were identical between participant pools, and six of the questions were adjusted slightly depending on whether the participant functioned as a school employee or a family member. Of the 13 questions, some questions were developed to garner information for more than one of the three guiding research questions. Five questions were directed toward question number one, five questions were directed toward question number two, and four questions were directed toward question number three. However, it should be noted that in capturing the essence of the collective phenomenon or experience, the participant answers overlapped and provided data across questions.

Participant Demographic Information

Twelve participants completed interviews via a videoconference on a Zoom platform. Of the participants, all 12 identified as female. The five family members all identified as the child's mother. Of the seven school staff employees, all seven identified as female. The participants came from several different roles. One participant stated she was in the role of school related service provider (Speech Language Pathologist or SLP), one identified as a school special education administrator, two identified as general education teachers (preschool), and three identified as school special education teachers (specific to preschool) (see Figure 2). Five participants stated that they are affiliated with an urban district, seven indicated that they are affiliated with a suburban district, and zero affiliated with a rural district (see Figure 3).

Figure 2: Role of the Participants

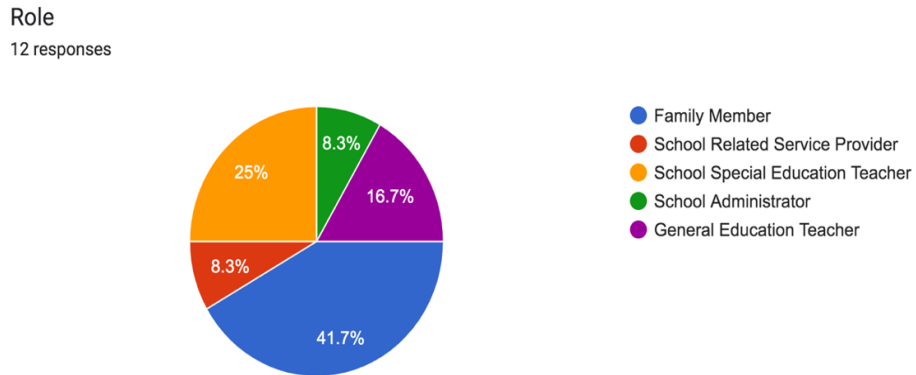
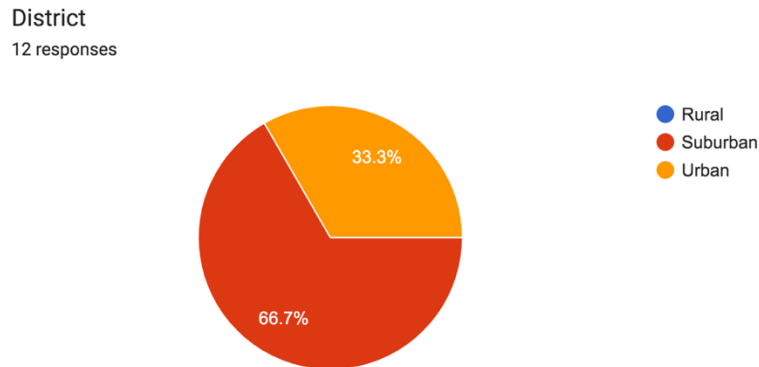


Figure 3: District Information



Data Collected for Research Question One

The data was collected in two parts. First, participants completed a Google survey providing some basic information and interest in participating in the research. Next, participants were interviewed individually over Zoom videoconference platform. The interviews were recorded and later transcribed, a semistructured process (Creswell,

2013). The individual interviews provided the data to inform the guiding research questions.

Tools Used to Collect the Data

The first research question was, what are the various ways that teachers, special education administrators, related service providers, and families report they establish home-school partnerships that bridge between home and school as children transition from early intervention to school-based programming during a global pandemic? To address this question, each of the 12 participants was interviewed by the researcher using a Zoom videoconference platform. The interviews were recorded through Zoom, downloaded to the researcher's computer, and then transcribed. Each interview was then individually uploaded to ATLAS.ti software. After all 12 interviews were uploaded the researcher reviewed the transcripts and identified codes. The researcher next highlighted key phrases, In Vivo codes. The researcher then reviewed the codes to identify possible categories (Saldaña, 2016).

Discussion for Research Question One

Six interview questions were developed to gather data relevant to the first guiding question. The first interview question asked the school staff participants either how the participant explained the individualized education program (IEP) document or how the document was explained to the family participant. Both general education teachers shared that it is not their role to explain the document. The three special education teachers all shared that they explain the IEP document to family members. Their explanations varied. One participant relies on the meeting agenda to ensure that she touched on the different components of the IEP (disability category, goals and objectives, service dates,

transportation, and extended school year eligibility). “I would say that the agenda you know, keeps us in line with what we need to go over.” Another special education teacher mentioned that she shares the legality of the IEP document:

I let them know that the IEP meetings is an official meeting and that all of everything that happens during that meeting will be written up in the IEP document. That it is a legal document and that it will contain recommendations for goals and objectives as well as their input, and just serve as a transcript if you will of the meeting and is a legal document.

The school related service provider, SLP participant, shared that she does not typically facilitate the IEP meetings, but that she will often support information that is being shared during the meeting:

Oftentimes I’m not the leader of the IEP meeting but sometimes we kind of co-lead and I will kind of go through what an IEP looks like, and why they are receiving the IEP. I explain the prior written notice and pull it up on the screen and share my screen, so the families see it.

The school administrator detailed how the team explains all components of the IEP document: We really go through it piece by piece to make sure that they do know what we’re doing and not just throwing information at them. We really do a thorough job and then we let them know that after they receive the IEP document that they can contact either the case manager or me or one of the service providers to go over if they have additional questions.

Family participants were asked “How was the IEP document explained to you?” Of the five family participants two, or 40%, said that their child’s early intervention team

explained the IEP document to them and three, or 60%, said that the IEP was never explained to them. One parent stated:

So, my first experience with the IEP document was with the early intervention team. I was presented with what the IEP template format would look like and the early intervention team went over the questions in detail with my husband and I so when the time came for my son's IEP meeting I had a really good understanding of what to expect going into the meeting and I found that really valuable.

Another parent shared that the actual IEP document was not discussed in detail but rather a broad overview:

I was just told that it was a document that would have individual goals for him and would outline for him not necessarily where his deficits were, but identified where he needed help and set goals for us to work towards with measurable progress.

The second interview question asked either how the school staff explained the IEP meeting process to the family, or how the process was explained to the family member. Of the seven school staff participants the two general education teachers, or 29%, did not know how the IEP meeting process was explained to parents. The five other school staff members, or 71%, all shared that the IEP meeting process was discussed with families during the 90-day transition meeting (a meeting facilitated by the early intervention team at least 90 days prior to a child's third birthday with a representative from the LEA in attendance). Of the five family participants, 20%, or one, stated that the early intervention team explained the IEP and transition process and helped her to prepare questions for the meeting. The other four parents, or 80%, all shared that a member from the school team explained the process. Three of these four parents shared that the logistics such as how to

sign consent forms electronically and how to log into the meeting was explained in advance of the meeting. The perception from a parent that the early intervention team explained the IEP process may have resulted from shared information during the 90 day transition meeting with both early intervention and LEA participation.

The wording for the fifth interview question differed for the two participant groups. For the school staff it was asked: Are there specific questions that you ask all families and if so what are they? For the family participants: Was there time and space to ask clarifying questions before/during/ after the IEP meeting? Five of the seven school staff, or 71%, stated that they begin the meetings by asking the family to share information about their child:

I always just like to open it with families in recognizing that I believe they're their child's first teacher and they know the most important information about them and so if there's anything important that they'd like to share like important family information or things that their child loves to do.

Another school staff member shared, "We ask the parents to give us their vision of their child, what they see as strengths and some concerns that they may have. Then we can take those concerns into account when we create the IEP:

We always start by saying tell me a little bit about your child and just kind of see where we go from there. Then they talk about their child and about their specific development. A lot of times the kids are coming into preschool for the first time, so we need to know some logistics like does your child nap, are they potty trained? With the children coming in from early intervention we have to talk a lot about the actual school facility and the program.

Another school staff member shared, “I start off the meeting by asking if they have any questions. Prior to the IEP meeting process, I ask them if they would like to include anyone in the meeting or if they will need an interpreter and those sorts of things.” This school staff member focuses on meeting logistics. Another school staff member shared:

The questions were the same over videoconference as we would ask during in-person meetings. We are just trying to gain more knowledge from them. We want the parents to talk about how they see their child at home. How does their child perform at home? Do you see the same skills as your early intervention team reported on? We want to hear from the families about their little guys because they’re at home so much and parents are their first teachers, we try to get them involved and included.

Three school staff participants, or 43%, shared that they specifically ask all families if they will need transportation to access school. Other than the question about transportation, the school staff asked more open-ended questions such as tell me about your child. One teacher also likes to ask:

Has your child been in any kind of program before, or would this be their first time coming to a program with other children and teachers in the building? We ask them again to just tell us about their child and their needs.

All five family participants, 100%, stated that there was time to ask clarifying questions. Two out of five, or 40%, of the parents stated that they did not have questions at the time of the meeting but after receiving the paperwork and processing the information they had questions:

I felt like if I had questions, I could definitely ask them. It was definitely tough as a first-time parent to even know the questions that I should ask. It's a new process so you have no idea what is going to happen. I was like, ok you guys, just tell me what to do.

Another parent stated, "They made it very clear if ever I'm concerned about something I can always call for a meeting. They were actually really good about getting my insight and letting me know the process." One of the parents shared that she reviewed the IEP with her son's early intervention team after the meeting to make sure that the services aligned with her son's educational needs. "I had such a great support system with early intervention, I might have leaned on them more so than the school."

The tenth interview question was looking to gather data about how the school staff and the families communicate with each other after the IEP is being implemented. Of the seven school staff participants, 100% stated that the classroom teacher is the main contact person after the child begins school. Participants shared that they utilize a variety of methods for home-school communication. Five of the 12 participants shared specific methods of communication between home and school. Two teachers initiate contact with the family and survey for family preference for mode of communication (email, phone call, or text app). Two teachers utilize an app (Class DoJo) and one family member communicates through an online platform (SeeSaw). One family member shared that she was not certain what to work on at home to align with the IEP. She was accustomed to the coaching style of service delivery provided through early intervention and would have liked to have had more communication between school and home for the generalization of skill development across settings.

The eleventh interview question was consistent across participants. How do you view your partnership with the school team? All 12, 100%, of the participants, felt that the team partnered together to develop and implement an appropriate IEP for the individual child. In regards to perception of partnership with the IEP team, two participants, or 17%, shared their struggles with videoconference platforms. One teacher shared:

I feel a little bit more separate from the team via Zoom because I'm coming in from the classroom and having to set up my laptop in a quiet space and it might appear like I'm late to the meeting when everybody else is like in their office and already set up. I think that's my own anxiety, but I feel a little more flustered than I do going into an in-person IEP meeting where I feel like we're a whole team. Feel a little bit more separate.

This researcher wonders if this might be how a family member might feel, walking into a room full of school staff that are already seated at a table, or assembled in a room, when they greet a parent for a meeting. A parent shared:

I feel like we have a very good strong partnership with the school. I think that this was just such an unprecedented year for everybody, for the professionals, the families, and the kids. I am happy with the support given the situation we were in. If I had the opportunity in a typical time without a pandemic going on, virtual would not have been my choice of how we did things. But given that this was our reality, I felt that his team really was as there for us as they could be given what it looked like at that given time which was virtually.

One school staff provided details about the connection and value of her team:

I really love my school team. I think that we all have the child's best interest and the family's best interest at heart, and we come at it knowing that this is a very emotional time for families and wanting to give them the best experience possible coming into the school environment from early intervention. Trying to share those differences and letting them know that they are important members of the team and that their child will be well taken care of, cared for, and loved.

Conveying this sense of care to the family promotes connection. Parents want their children to be embraced and celebrated at school. When an IEP team expresses to a family that the school staff wants to get to know their child, what they share is important, and that they will love their child, this helps the family to feel seen, heard, and embraced. These moments can be critical in establishing a foundation for a collaborative relationship. One parent shared:

I believe that my opinion is valued pretty high. I think that they look to me as far as what I expect for his progress. Especially right now in preschool, there are lots of independence skills that he needs to master and hasn't quite mastered, because of his, I don't want to say, disability, because of his development there are some things that he still needs to work on. I think that I feel very heard from the teacher, the team in general about what it is that I want for him.

This statement, that the parent felt she had communicated and the team heard and captured information about what she "wants for him" is significant. She was heard and they responded. This may lead to her continued participation in her child's education both at school and at home.

Analysis of Data Collected for Research Question One

The first research question is: what are the various ways that teachers, special education administrators, related service providers, and families report they establish home-school partnerships that bridge between home and school as children transition from early intervention to school-based programming during a global pandemic? Based on this research, there is a progression, or continuum, of relationships as families of children transition from early intervention to LEA programming. The relationship between the family and the early intervention staff, the relationship between the early intervention staff and the school staff, and the relationship between the family and the school staff. The formal IEP meeting process merges these systems and relationships into one team during the formal IEP meeting.

Themes: Question One

The researcher reviewed the codes and then interpreted the data into themes. The themes are the sentences or phrases that summarize the phenomenon (Saldaña, 2016). Two themes emerged from the analysis of the data. The first theme indicates a need for defined roles and systems during the IEP development process for children transitioning between early intervention and LEA. During this transition between early intervention and LEA there are multiple team members, each with different roles. The parent and child have the first relationship, next, the early intervention team enters the circle, and eventually the school team. When team members work collaboratively this helps to develop a reciprocal relationship that will allow for education planning for the child. As the plan is developed, the child and family transition from the early intervention team and begin their journey with the LEA team. Open communication, transparency of process, and definition and understanding of roles leads

to clarity in the IEP development process. The second identified theme was that human connection is missing when initial interface is over videoconference platform. Team members shared that they find value in connecting with each other in person and that this in person connection further promotes their understanding of the different roles and which individuals are serving and servicing within the different roles.

Finding #1: Team Member Roles Influence the Family-School Partnership

There are multiple team members who influence the development of a child's IEP. Initially, the family is in partnership with the early intervention team. As the child approaches their third birthday, there is a transition to the LEA. The LEA, like the early intervention team, has different professionals fulfilling a variety of different roles. In this research participants were family members, general education teachers, special education teachers, related service providers (specifically a Speech Language Pathologist), and a school special education administrator. The special education staff typically fulfilled the role of sharing information about the IEP process. After a child was identified and an IEP had been developed, the general education teacher then had the role of primary communicator between the family and other school staff. It is important for family members to understand these roles so that they are able to access information and communicate reciprocally with school staff.

Finding #2: Established Systems and Processes for Meetings Help to Promote Understanding

IEP teams have established processes for explaining the transition and IEP development process as children transition between early intervention and the LEA. As the IEP documents are developed, there is variation as to how the information contained

within the IEP is shared with family members. As a result, some family members are uncertain about different components and or sections contained within the IEP. During meetings held via videoconference, some teams engaged in screen sharing so that all team members could simultaneously view the IEP. Some teams distributed the IEP after the meeting, offering that family members could reach out with any and all questions. When a team is not physically located in the same room, established systems or protocols for sharing documents can help to ensure understanding of the information contained within the IEP.

Finding #3: The Initial Step’s in the Transition Process are Foundational for Human Connection in the Establishment of the Family-School Partnership

IEP teams work to solicit information from families specific to their child and his or her educational needs. Teams consistently ask open-ended questions to seek information as well as clarification about developmental needs to guide the development of the IEP. The meetings that are held collaboratively between family members, early intervention staff, and school staff are opportunities to share and communicate information specific to the individual child. This flow of information is the first step for families in their relationship with the LEA. This is the beginning of the family-school partnership.

Table 1: Interview Questions for Guiding Question One

	School Staff Participant Question	Family Participant Question
1.	How do you explain the IEP document to family participants, if you explain it at all?	How was the IEP document explained to you?
2.	How do you explain the IEP Meeting process?	How was the IEP Meeting process explained to you?

10.	As a follow-up to the transition PPT meeting, how might you reach out to the child's family to share educational updates?	As a result of the PPT/IEP Meeting would you contact your child's teacher to share updates on progress at home? Ideas about possible educational goals?
11.	How do you view your partnership with the school team?	How do you view your partnership with the school team?
13.	Is there anything else that you would like to share specific to your experience with video conference IEP meetings for children transitioning between B-3 and the LEA during the global COVID-19 pandemic?	Is there anything else that you would like to share specific to your experience with video conference IEP meetings for children transitioning between B-3 and the LEA during the global COVID-19 pandemic?

Data Collected for Research Question Two

The data was collected in two parts. First, participants completed a Google survey providing some basic information and interest in participating in the research. Next, participants were interviewed individually over Zoom videoconference platform. The interviews were recorded and later transcribed, a semistructured process (Creswell, 2013). The individual interviews provided the data to inform the guiding research questions.

Tools Used to Collect the Data

The second research question stated; what are the factors and conditions that special education teachers, general education teachers, related service providers, special education administrators, and family members believe are barriers to family input into the IEP process for children transitioning between early intervention and LEA preschool during the global COVID-19 pandemic? Each of the 12 participants was interviewed by

the researcher using a Zoom videoconference platform. The interviews were recorded through Zoom, downloaded to the researcher's computer, and then transcribed. Each interview was then individually uploaded to ATLAS.ti software. After all 12 interviews were uploaded the researcher began to review and identify codes. The researcher next began to highlight key phrases, In Vivo codes. The researcher then reviewed all these codes to identify possible themes.

Discussion for Research Question Two

Seven interview questions were developed to gather data relevant to the second guiding question. The first interview question asked either how the participant (school staff) explained the IEP document or how the document was explained to the family participant. Of the seven school staff participants two, or 29%, shared that it is never their role to facilitate the IEP meeting and five, or 71%, shared that it is either always or sometimes their role to facilitate. The five participants that identified meeting facilitator as their role all shared detailed information about the contents of the IEP document. Five of the school staff participants shared that portions of the IEP document were shared over screen share at one point during the meeting. One school staff member shared:

I don't think that videoconferencing has made a difference in how I'm presenting or the verbiage that I'm using with families. Even for in-person meetings, we don't typically have a paper copy of the IEP in front of us when we're presenting.

Of the seven family members, two shared that they received both an electronic copy over email and a hard copy of the IEP document through the United States Postal Service. Of the five family participants, none reported receiving this information at the

time of the meeting. This suggests that family members may not have access to the format and necessary information contained within an IEP document. This limited access could then become or contribute to barriers in terms of family input and participation in the IEP process.

The second interview question asked the school staff how they explained the IEP process. The family participants were asked how the IEP process was explained to them. Of the seven school staff participants, the two general education teachers did not know how the IEP process was explained to families. The five other school staff members (special education, related service, and administrator) shared that the process was explained by the case manager, and this was a particular role of the case manager. Of the seven family members, all shared that the IEP process was explained to them. One family participant shared that the early intervention team explained the process. One parent stated that the school explained logistics but not the content of the document:

They just explained that it was going to be done virtually due to obviously having the pandemic and not being able to accommodate different organizations and everything and that they were sending me, via email, the booklet and then my parent's rights and everything. That all came in advance. There were forms for me to sign and they sent them to me, and then there were forms I had to fill out and I signed them, and then I sent them back to them as well.

One parent, or 20%, found that she received a thorough explanation of the process:

It was actually very much explained, that being said, it's a lot of information. I do love that a lot of the stuff was explained. You're just meeting so many people at one

time. It is difficult because you're on Zoom, not in person. You are meeting this person and that person and told their positions. It's different because you're not in a room with them. I do feel like it was a little bit more difficult to really remember people. You lack that ability to kind of remember them over Zoom.

Two parents, or 40%, shared that both the process and the accompanying paperwork were explained to them:

The speech therapist was the one that set it up and she told us that there would be some forms that we would need to fill out. She said that she would get in touch with the school and they would set up a meeting with all of these people. The meeting would be online on Zoom and who would be present with us for the Zoom meeting. She kind of let us know who was going to be there and what it was going to be like.

Ten of the 12 interview participants, or 83%, concur that the IEP process was explained to families, and two, or 17%, were uncertain how and when this was explained. The role of each team member seemed to influence the chain of communication and who shared different information about the meeting process.

The fourth interview question was worded identically for all participants. How did you prepare for the IEP meeting? Five of the seven school staff, or 71%, shared that preparation for the meeting remained consistent in terms of reviewing evaluation results and records in advance. The preparation differed in that there were additional steps to be taken in advance to ensure that the meeting ran smoothly. Examples of additional preparation required for a videoconference meeting include the development of a Google Drive for IEP meeting calendar, creating and distributing Google MEET invitations in addition to generating and distributing via email the legal IEP meeting

invitation, all documents and evaluations needed to be uploaded in advance of the meeting for screen sharing, and information distributed out to families in advance about how to electronically join meetings and sign and return forms. One school staff member shared that completing assessments via videoconference was extremely difficult and results were not valid or reliable due to the remote administration. One staff member shared that in addition to the regular meeting agenda, the team developed additional online protocols. These guidelines included a process for introductions and how each team member could use the mute/unmute function. Additionally, team members were assigned tasks in advance such as one person was responsible for screen sharing while another team member explained the document that was being shared at that time. One staff member also shared that it required additional preparation to accommodate unique family needs such as translation services. Four of the five family participants, or 80%, shared that they engaged in special preparation for the IEP meeting. Two families, or 40%, shared that they worked collaboratively with the early intervention team to develop questions in advance of the meeting:

I really leaned on the support of the early intervention therapists. Every single therapist that my son had worked with on his team, I kind of picked their brain on the services that they felt might be appropriate. They had seen him during critical milestones so I was able to prepare by asking for their input and what they thought because they always say that the parents are the experts on their child but they are the experts in their subject topic, so I really valued the opportunity to talk it through with his team ahead of time.

One family prepared by downloading a Google MEET app prior to the meeting.

One family shared that they needed to learn how to sign and return documents in advance of the meeting. Another family participant stated:

You lose a component when you're doing things virtually. There was a positive to it, but I felt there was a negative to it. I felt that it just took the face-to-face out of it even though you're seeing the person on the screen. I think with the virtual component and it being my first IEP process that I was probably processing in the moment or trying to, so I didn't really have any questions until afterwards.

The sixth interview question was worded identically for school staff and family participants. Were there times that you did not agree with the information that was being shared at the table, and if yes, did you share it with the team? All interview participants shared that they felt comfortable voicing concern or disagreement if and when that had been applicable. Two school staff and one parent, or 25%, of the interview participants, shared that they did need to speak up when there was disagreement with the team. A school staff stated:

The family did not want early intervention records and assessments shared with the LEA. Then they were not happy when the child did not qualify for services. So, it made it challenging to explain the process when you are coming from a more adversarial perspective, it was a videoconference and we didn't all have the same information. The family verbally shared that the child had an autism disability identification but that did not come through in the LEA testing that had been conducted in agreement with the family, and the child did not present with an autism disability. We did not have this

additional testing to consider at the meeting. That was really difficult over the screen, but it ended up being ok.

Another school staff stated “We had a parent who really kind of exaggerated some behaviors so her child would qualify. We said that we would monitor and have the school psychologist and BCBA(Board Certified Behavior Analyst) observe. We kind of met on middle ground.” One parent stated:

In the beginning of the first IEP meeting to plan testing, the team was only looking at the formal testing that had been completed through early intervention, they were just looking at the testing and they didn’t think that he was going to qualify. Then I asked the early intervention team, the BCBA and the OT, and the SLP, what can we do to show that these are issues here and that this is more than just his learning? So, we agreed to additional testing and all of that was provided by the school system and based off of that additional information the team decided that he did qualify for special education services under developmental delay.

One parent stated that she was in agreement with the team decisions but would have felt comfortable disagreeing or asking additional questions:

There weren’t any times where I felt like I didn’t agree with them. I’m a pretty agreeable person, like aces in their places, I trust you. So yeah, I did feel like they were really qualified, and I didn’t have anything to disagree with, but I would have felt fine asking them!

Another parent stated:

I feel like they pretty much captured in their assessment what I saw for my son and his developmental needs. So, I feel like they addressed everything that I was concerned about. When I did have questions, they were actually very responsive about it.

Interview question 12 was worded similarly for both participant groups: Describe your experience contributing to the IEP for the child/your child (school staff participants/family member participants) that was transitioning from early intervention to the LEA during the global COVID-19 pandemic. This question did not yield much additional information. All seven school staff, 100%, reinforced that the special education teachers take the lead in sharing assessment information and collating the information shared by team members to develop specific and measurable goals and objectives. One of the school staff mentioned that she makes sure to thoughtfully integrate service hours as there can be duplicity of communication goals between a classroom focus and a related service or speech/language service. “We make sure that our roles are complementing one another, and I help bring all those goals together for service hours.” Staff again shared the importance of ensuring the organization of technology and uploaded documents in advance to allow for smooth screen sharing.

Four of the five parents, or 80%, shared that they felt like members of the team and that the information that they presented was incorporated into the IEP. One parent also shared that her prior experience with the IEP process helped her to follow along via the videoconference platform. Two of the five parents, or 40%, again referenced their partnership with the early intervention team:

I really felt like I was part of the team and that was something from day one with early intervention. In the back of my mind, I worried that when we transitioned to the

LEA, I wouldn't still feel that 100 percent, but I felt like we were all just part of this team with a shared goal. I did feel that it was a team effort and that my voice was taken into consideration and heard.

Another parent shared, "They asked me about my son's development. They asked me questions. The early interventionist had coached me for the meeting, and I was prepared."

Analysis of Data Collected for Research Question Two

The second guiding research question is: what are the factors and conditions that special education teachers, general education teachers, related service providers, special education administrators, and family members believe are barriers to family input into the IEP process for children transitioning between early intervention and LEA preschool during the global COVID-19 pandemic? This question was designed to identify challenges/obstacles that may interfere with or impede integration of family shared information into the development of a child's IEP.

Themes: Question Two

Transition practices impact and influence the family-school relationship. To best meet the educational needs of the child and family, the team must identify and work to dissolve any barriers. This research suggests that there were not always established systems to explain the IEP and share the IEP document with the team. Family members did not always leave the IEP meeting with an understanding of what the actual IEP document outlined. Additionally, the lack of face-to-face contact with team members impacted working knowledge of the child's skill development which then influenced the alignment of the IEP with the child's actual needs.

Finding #4: There are established systems to explain the IEP process, however, the IEP document was not explained in detail.

This finding aligns with finding #2, that established systems and processes for formal IEP meetings to help to promote general understanding of the document and the process. Consistently the IEP teams have been thorough in their explanation of the IEP process. The family team members shared that they understood what, how, and when components of the transition and the meeting process would occur. The family participants also shared that the actual IEP document was not explicitly explained. Some family members reverted back to their early intervention teams for clarification and some family members reached out to school staff. A clear process for how to share the document, in addition to legal timelines, would aid in comprehending the different components of the IEP.

Finding #5: The lack of face-to-face meetings impacted the assessment and subsequent development of an accurate and meaningful IEP.

There were mixed participant feelings about the inability to meet in person for IEP meetings and formal assessments/evaluations. All team members shared both pros and cons specific to meeting in person versus over a videoconference platform. Some of the challenges were the inability to evaluate a child in person, the need to observe the child over a screen as they played in their own home as opposed to a school environment for assessment purposes, difficulty “reading the room” and gauging participant feelings and reactions, and the ability to remember individual team members after a video screen introduction. These barriers may have presented additional

challenges in accurately identifying and planning for individual needs. This disconnect in turn could impact the accuracy and information guiding the development of the IEP.

Table 2: Interview Questions for Guiding Question Two

	School Staff Participant	Family Participant
1.	How do you explain the IEP document to family participants, if you explain it at all?	How was the IEP document explained to you?
2.	How do you explain the IEP Meeting process?	How was the IEP meeting process explained to you?
4.	How do you prepare for the IEP Meeting?	How do you prepare for the IEP Meeting?
6.	Were there times that you did not agree with information that was being shared at the table, and if yes, did you share that with the team?	Were there times that you did not agree with information that was being shared at the table, and if yes, did you share that with the team?
7.	Did you or someone else on the team record the information shared by the family about the child's present level of developmental performance?	Did the team record information that you shared about your child's present levels of developmental performance?
12.	Describe your experience contributing to the IEP for the child that was transitioning from B-3 to the LEA during the global COVID-19 pandemic.	Describe your experience contributing to the IEP for your child that was transitioning from B-3 to the LEA during the global COVID-19 pandemic.
13.	Is there anything else that you would like to share specific to your experience with video conference IEP meetings for children transitioning between B-3 and the LEA during the global COVID-19 pandemic?	Is there anything else that you would like to share specific to your experience with video conference IEP meetings for children transitioning between B-3 and the LEA during the global COVID-19 pandemic?

Data Collected for Research Question Three

The data was collected in two parts. First, participants completed a Google survey providing some basic information and interest in participating in the research. Next, participants were interviewed individually over Zoom videoconference platform. The interviews were recorded and later transcribed, a semistructured process (Creswell, 2013). The individual interviews provided the data to inform the guiding research questions.

Tools Used to Collect the Data

The third research question stated; according to special education teachers, general education teachers, related service providers, special education administrators and family members to what extent have the pandemic and digital conferencing tools positively and negatively affected family-school partnerships while developing IEPs for children transitioning between early intervention and the LEA during the global COVID-19 pandemic? Each of the 12 participants was interviewed by the researcher using a Zoom videoconference platform. The interviews were recorded through Zoom, downloaded to the researcher's computer, and then transcribed. Each interview was then individually uploaded to ATLAS.ti software. After all 12 interviews were uploaded, the researcher began to review and identify codes. The researcher next began to highlight key phrases, In Vivo codes. The researcher then reviewed all the codes to identify possible categories.

Discussion for Research Question Three

There were six interview questions designed to gather information about the third guiding research question. Interview question number three was worded differently for the two participant groups. School staff participants were asked how they had created space for family participation in the IEP process. Family participants were asked how the team had solicited their input into the development of the IEP. Six staff members, 85%, shared that they asked the family questions about their child's development as well as asked the family clarifying questions to make sure that the formal assessment information accurately captured the skills that the family member observes at home. One school staff member shared "I think that it's a little trickier to read the space over Zoom but just asking the families and checking in and saying, 'Do you have any questions for us?' or 'What do you think about that?' or 'Do you have anything to add?'" It was the researcher's understanding that what this participant meant by "read the space" was the ability to gauge from other team members if information was received and understood as intended. One staff member makes sure to ask the families open-ended questions. One staff member stated that she is "continuously checking in with them." After discussing portions of the IEP, she would then ask "Does that sound good to you? Do you have any questions about this? Do you feel like this is where your child truly is?" Three staff participants, or 43%, shared that they typically begin the IEP meeting by asking the parent to share information about their child:

We have the family kind of begin. They paint a picture of their child for us. So, we give them time to tell us about their child. To tell us what their needs are so that we hear from them first. We like to have families talk first, and then as each team member

talks or presents we always stop and ask the family if they have any questions or anything to add.

One staff member also elaborated on the significance of family participation by stating:

This is the first experience for families to recognize that they are the most important member of the team and make sure that they feel comfortable with that. I think that the virtual platform has been really great for that.

All five family participants shared that the IEP team asked many questions about their child's skills, strengths, and challenges. Two of the family participants, or 40%, stated that the LEA brought their child into the school for an evaluation prior to the IEP meeting. One participant shared that the LEA observed her child during a videoconference session to gather developmental information in addition to a parent interview:

So, we brought our daughter in and they (LEA) did the testing. There were some portions that we were responsible for and there was some paperwork that we were responsible for. Then we also did a phone call with the special education teacher and she asked us a bunch of questions which she then recorded. As far as I know, it was all taken into consideration for her IEP, our answers on the sheet as well as how she did during the testing, and then our phone call.

The researcher asked interview question number seven to gather data specific to the recording of developmental information shared by families during the IEP meeting. This question was worded differently for the two different groups. For family staff it was asked; Did you or someone else on the team record the information shared by

the family about the child's present level of developmental performance? For families it was worded; Did the team record information that you shared about your child's present levels of developmental performance? All of the participants noted that the information shared by families was recorded. Six of the seven, or 85%, of the school staff, shared that the case manager recorded information shared by the family. One school staff member shared that the school staff worked collaboratively to take notes and then after the meeting they shared the recorded information to summarize the meeting:

In our virtual IEP meetings, all members of the team are writing notes. We just kind of take notes as we are listening. So, when I am speaking, maybe the teacher is jotting down notes, and when someone else is speaking I might jot down notes, and then we come together afterward to pull that together. At the end of the meeting, I always ask the family how they feel about the process so that I can include it in the parent section of the present levels of performance. I think that it is important to have more than just one line in the parent information and concern section of the present levels.

One staff member shared that at times they question the accuracy of the information reported out by parents. In such cases they would state:

If we're not sure if it's really accurate we may put a statement in the summary that the parents provided the information for the present levels. We will put it in there as parent report so we kind of know that this information is currently what the parent reports. This information from the parent is kind of like our baseline. We take what the parents say because we don't really have any other information to go by. So sometimes we have to do a little digging with questions to get extra information for some of those developmental domains.

All five family members reported that the information that they shared was captured and recorded in the IEP document. The parents provided examples of how they could tell that information that they had shared had been included:

When I brought my son in for the observation assessment, there were some behaviors that the team did not observe. I shared some of these things that they did not see like his scripting and eloping where he would just kind of run off. Things like that and I did notice that this information was incorporated in the IEP.” Another parent shared, “I think that they must have because they referenced it later on in the conversation, things that we had mentioned. I don’t remember them specifically saying, hey we are recording this, but the information that I shared was brought up and included in the IEP.

Interview question number eight was identical for both participant groups. “Do you recall if the meeting started and ended at the expected time and was there enough time allotted for sharing input during the videoconference meeting?” Eleven out of 12, or 92%, of the participants reported that the meetings started and ended on time. One person shared that the meeting did not start on time. There were some technical glitches signing into the meeting which created a brief delay. Overall, participants shared that the videoconference format streamlined the IEP meeting process. A school staff participant shared “It seems like there was a little more time online over Zoom because I think we were not rushing. So, it felt like there was more time to talk and get follow-ups.” Another school staff participant shared “The human component and the connection is lacking of course, but the meetings are much more efficient.” A different school staff participant stated, “I would actually love to never go back to in-person meetings. If I had

the option, we would always do them this way. I think that the videoconferencing keeps people focused and we start and end on time.” One of the parent participants shared “As a parent going through this for the first time, it did start and end on time. I think I probably could have used a little bit more time at the end, but they gave us the standard time.” She then went on to state “We were a few minutes late starting and a few minutes late ending just because of all of the technical difficulties that everybody was having.” Another parent participant said “They gave plenty of time for the session. I think that it actually went under the allotted time for it.”

The ninth interview question was worded differently for the two participant groups. The school staff were asked, “Did you feel heard during the videoconference IEP transition meeting and please provide examples?” The family participants were asked, “Did you feel heard during the videoconference IEP meeting to determine initial eligibility and develop your child’s IEP? Please provide examples.” All 12 participants, 100%, reported that they felt heard during the meeting. A school staff participant stated “We presented; we screen shared a lot so there was a visual to reinforce what we were saying.” A family member participant shared:

I felt heard but I feel that I lost that in-person component. In my day-to-day experiences, when you’re in person, it is a little easier for communication and conversations and I think I kind of lost a little bit of that with the virtual setting.

Another family participant stated:

Absolutely, they heard everything that I had to say. They witnessed my interactions with my son, his speech, and our conversations. They would clarify what he was saying and I then got to show them things that he had done. What we were trying to

implement in our home. I look forward to working closely with them for some areas of opportunity for us to make some changes here at home because I want home life and school life to kind of mirror the same things as well as utilize the same strategies and structure.

The tenth interview question was looking to gather data about how the school staff and the families communicate with each other after the IEP is implemented. Of the seven school staff participants, 100% stated that the classroom teacher is the main contact person after the child begins school. One teacher sends out a written survey to determine family preference for mode of communication (email, phone call, or texting app). One teacher relies on an app, Class Dojo, that allows her to also share digital images of the child during the school day. The special education and related service staff stated that they typically contact the parents two to three times each marking period to check in on carry-over of skills in the home and solicit input. Four out of five, or 80%, of the parent participants felt connected and able to contact their child's teacher after the child started school. The parent that did not feel as comfortable connecting with her child's teacher also shared that the child had started in one program for three months in the spring and then transferred to a new school for the following school year. In regards to the first placement, she shared:

We didn't have a crazy amount of conversation about my son. I didn't really know what I should be working on at home. Nobody really said to me, this is what you should be working on at home. Obviously, I had my own concerns, but I wouldn't say that they gave me any instruction of what I should be doing at home to kind of help him

with stuff. I didn't know what my role should be with the school. It didn't feel as collaborative as it could have been.

The school-based services are different than the coaching model implemented during early intervention services. As children receive early intervention services, the providers coach family and caregivers to implement services as a service delivery model. The other four parents, 80%, all shared that they have open communication with school staff. One parent stated:

Throughout his first year I still felt comfortable to reach out to his team and I would share based on the goals that we had agreed on. I would try to share when he's shown improvement at home, or I would share something that maybe was a concern, or somewhere where I thought that he needed more support at school. I did kind of feel like that was something that I could do, and it was something that I did do.

Another parent said:

We kept a log through an online platform. Early on the special education teacher called for some additional assessments to get more therapies for my son. As the teacher saw him in school, she noticed that he needed more things than were in the actual IEP. So, she called for an adjustment meeting so that we could discuss those needs.

The final interview question was identical for all participants. "Is there anything else that you would like to share specific to your experience with videoconference IEP meetings for children transitioning between early intervention and the LEA during the global COVID-19 pandemic?" Six out of seven, or 86%, of school staff participants shared their assumptions that videoconference meetings were more convenient for families. They shared examples that meetings could be attended during a

lunch break from work, while in the car, parents did not need to travel or arrange for childcare. One school staff member elaborated as to how she found that this platform was more convenient for her:

I really enjoy the videoconferencing even though it is not face-to-face in person. I feel as though it's really been a little bit more beneficial than meetings in person. Meetings start on time, and they end on time. It's easy and more convenient for people working in different parts of the town or the region. Rather than having to travel and come together, we are able to do it this way.

Three of the five, or 60%, of the family participants were confused about the development of the actual IEP document and did not know who to connect with about their specific questions. Additionally, three out of five, or 60%, of family participants did not know which individuals at the school were working with their child.

Analysis of Data Collected for Research Question Three

The third research question stated: according to special education teachers, general education teachers, related service providers, special education administrators and family members to what extent have the pandemic and digital conferencing tools positively and negatively affected family-school partnerships while developing IEPs for children transitioning between early intervention and the LEA during the global COVID-19 pandemic? This third guiding research question was designed to identify the impact, if any, that participation in videoconference IEP meetings, as an initial interface, had on family-school partnerships while developing the initial IEP. The interview participants consisted of seven school staff and five parents.

Themes: Research Question Three

Research participants consistently shared that videoconference platform IEP meetings were more convenient than in-person meetings. The meetings started and ended at their scheduled times, individuals were able to participate from different locations, and there was no need to travel or secure childcare in order to participate. Teams relied on anecdotal information shared by families and used this information to guide the development of the IEP. All participants felt heard over the videoconference platform. This is supported by the inclusion of information shared by all team members in the final IEP documents.

Finding #6: Videoconference platform IEP meetings are efficient.

All research participants were in agreement that videoconference platform IEP meetings were efficient. The meetings started and ended on time. As long as participants had a device and an internet connection, there was flexibility in their ability to participate in the meeting from different geographical locations. Very few meetings needed to be rescheduled. Initially, there was some necessary technological preparation. This included downloading specific apps, making sure that documents had been previously uploaded for screen share capabilities, and securing a private space for meeting participation. Family members did not need to secure childcare or travel to attend meetings. Staff members who worked in multiple buildings were able to easily participate from their assigned building without the need to travel.

Finding #7: It is essential to capture anecdotal information shared by the family to support and expand on formal assessment results.

IEP teams consistently asked open-ended questions to secure supporting and additional information about the skill development of the individual child. This

information was then recorded and used to inform the development of goals and objectives in the IEP document. Many assessments were not able to be completed in person, making this anecdotal information even more valuable in driving the development of an appropriate IEP.

Finding #8: Team members felt heard during videoconference platform IEP meetings.

All 12 of the interview participants, 100%, felt that the information that they shared was heard and incorporated into the development of the IEP. Team members shared that there was adequate time allotted for the meeting. There was time and space to ask clarifying questions. All team members shared with the researcher that the information that they had contributed was valued and reflected in the individual child’s IEP.

Table 3: Interview Questions for Guiding Question Three

	School Staff Participant	Family Participant
3.	How do you create space for family participation in the IEP meeting process?	How did the team solicit your input into the development of the IEP?
7.	Did you or someone else on the team record the information shared by the family about the child's present level of developmental performance?	Did the team record information that you shared about your child’s present levels of developmental performance?
8.	Do you recall if the meeting started and ended at the expected time and was there enough time allotted for sharing input with the video conference meeting?	Do you recall if the meeting started and ended at the expected time and was there enough time allotted for sharing input with the video conference meeting?

<p>9.</p>	<p>Did you feel heard during the video conference IEP transition meeting, and please provide examples?</p>	<p>Did you feel heard during the videoconference IEP meeting to determine initial eligibility and develop your child’s IEP? Please provide examples.</p>
<p>10.</p>	<p>As a follow-up to the transition PPT meeting, how might you reach out to the child's family to share educational updates?</p>	<p>As a result of the PPT/IEP Meeting would you contact your child’s teacher to share updates on progress at home? Ideas about possible educational goals?</p>
<p>13.</p>	<p>Is there anything else that you would like to share specific to your experience with video conference IEP meetings for children transitioning between B-3 and the LEA during the global covid-19 pandemic?</p>	<p>Is there anything else that you would like to share specific to your experience with video conference IEP meetings for children transitioning between B-3 and the LEA during the global covid-19 pandemic?</p>

Figure 4: Prevalence of Themes Represented in a Word Cloud

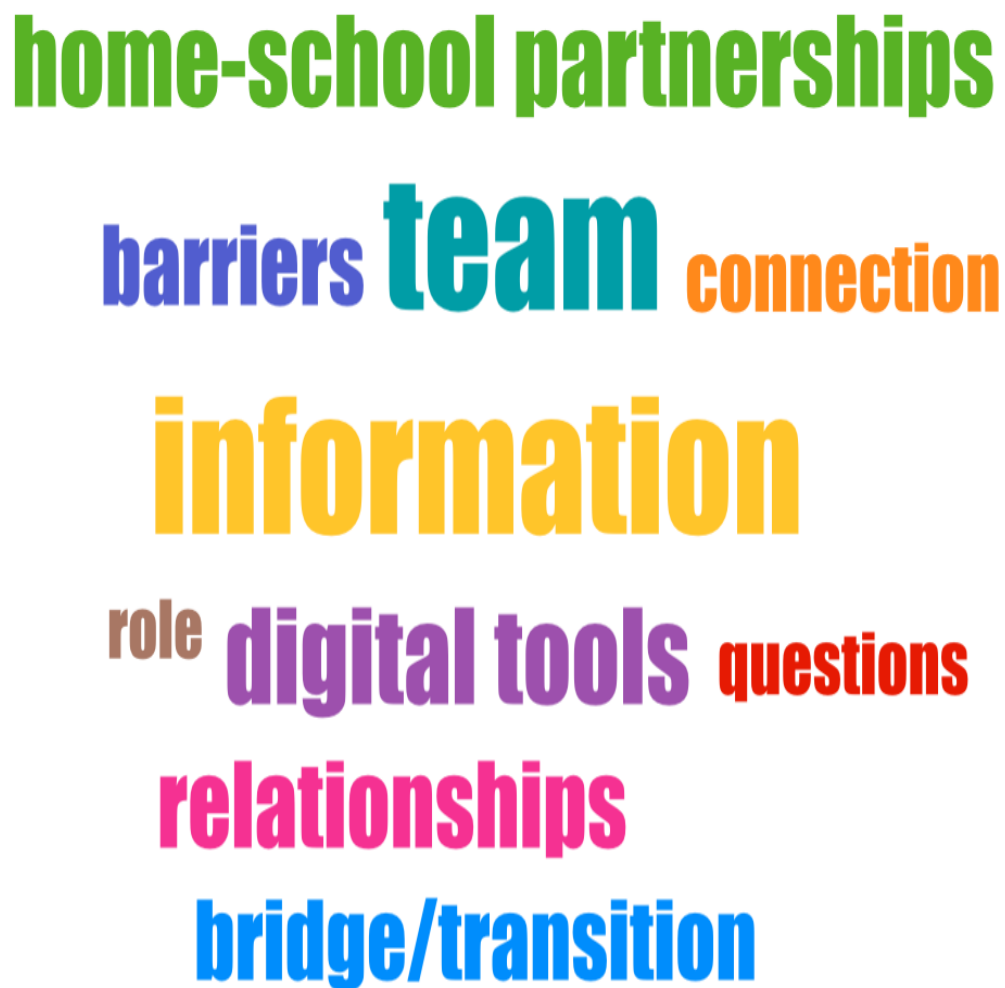


Table 4: Themes and Findings Relevant to Research Question One

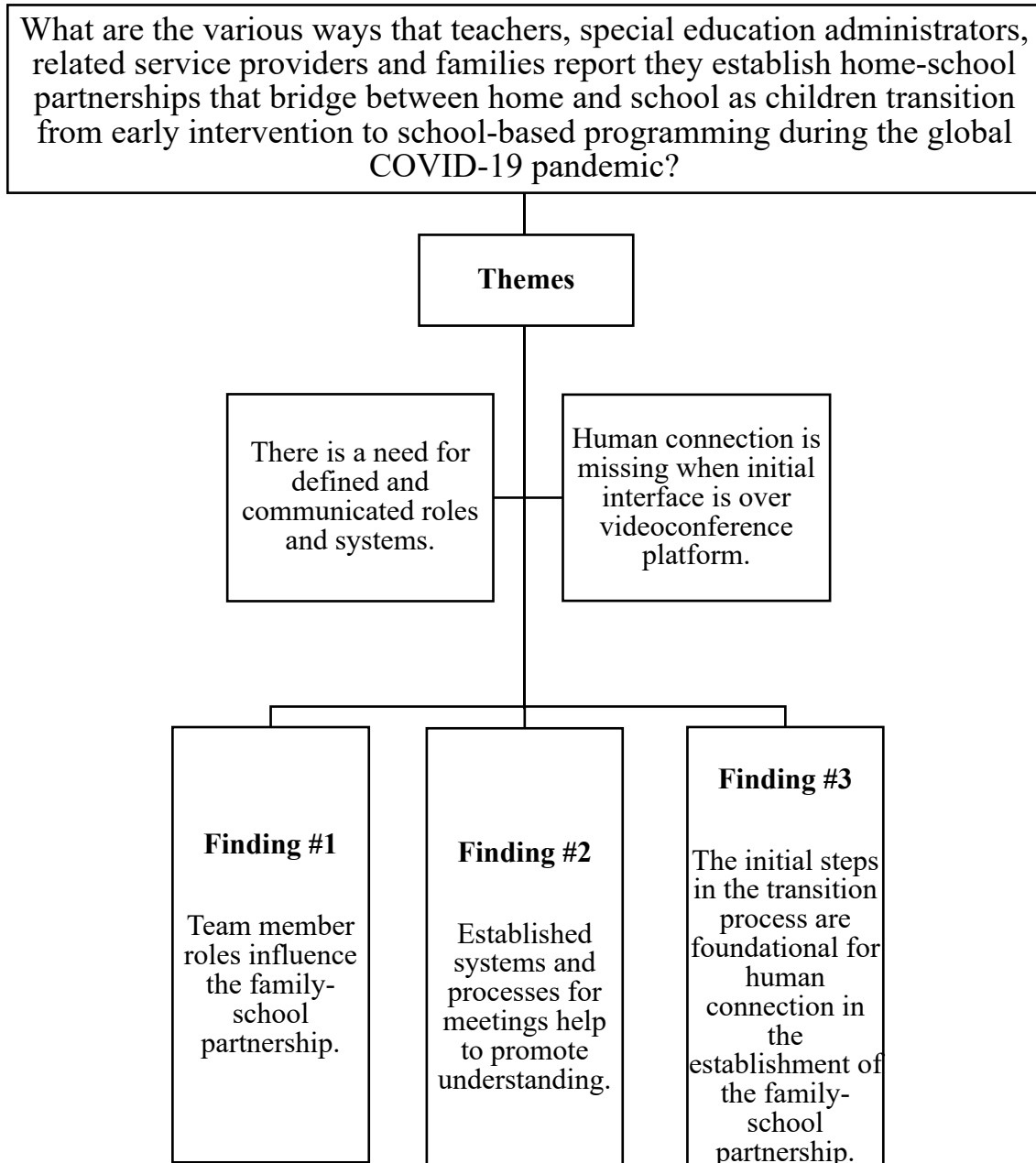


Table 5: Themes and Findings Relevant to Research Question Two

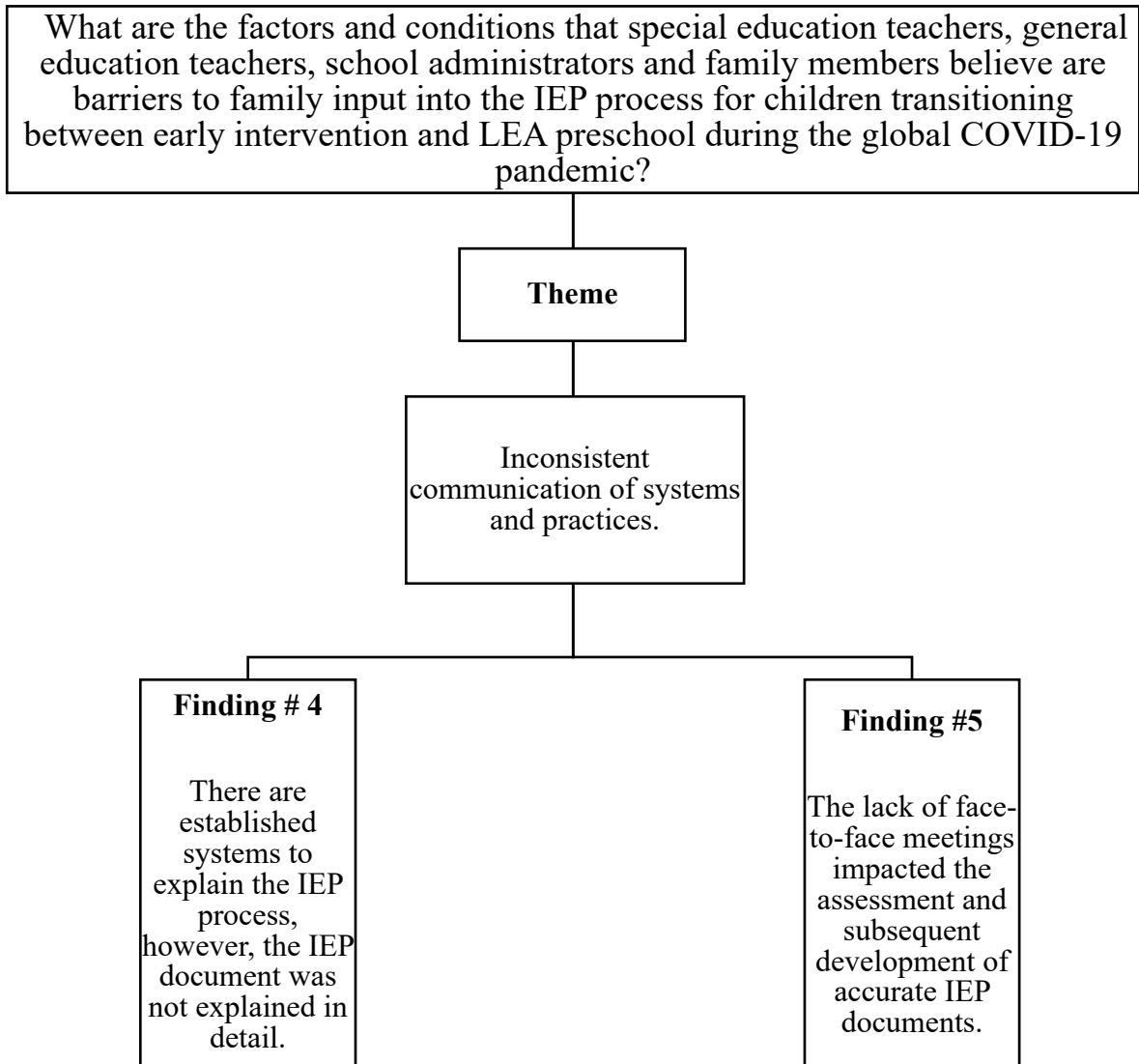
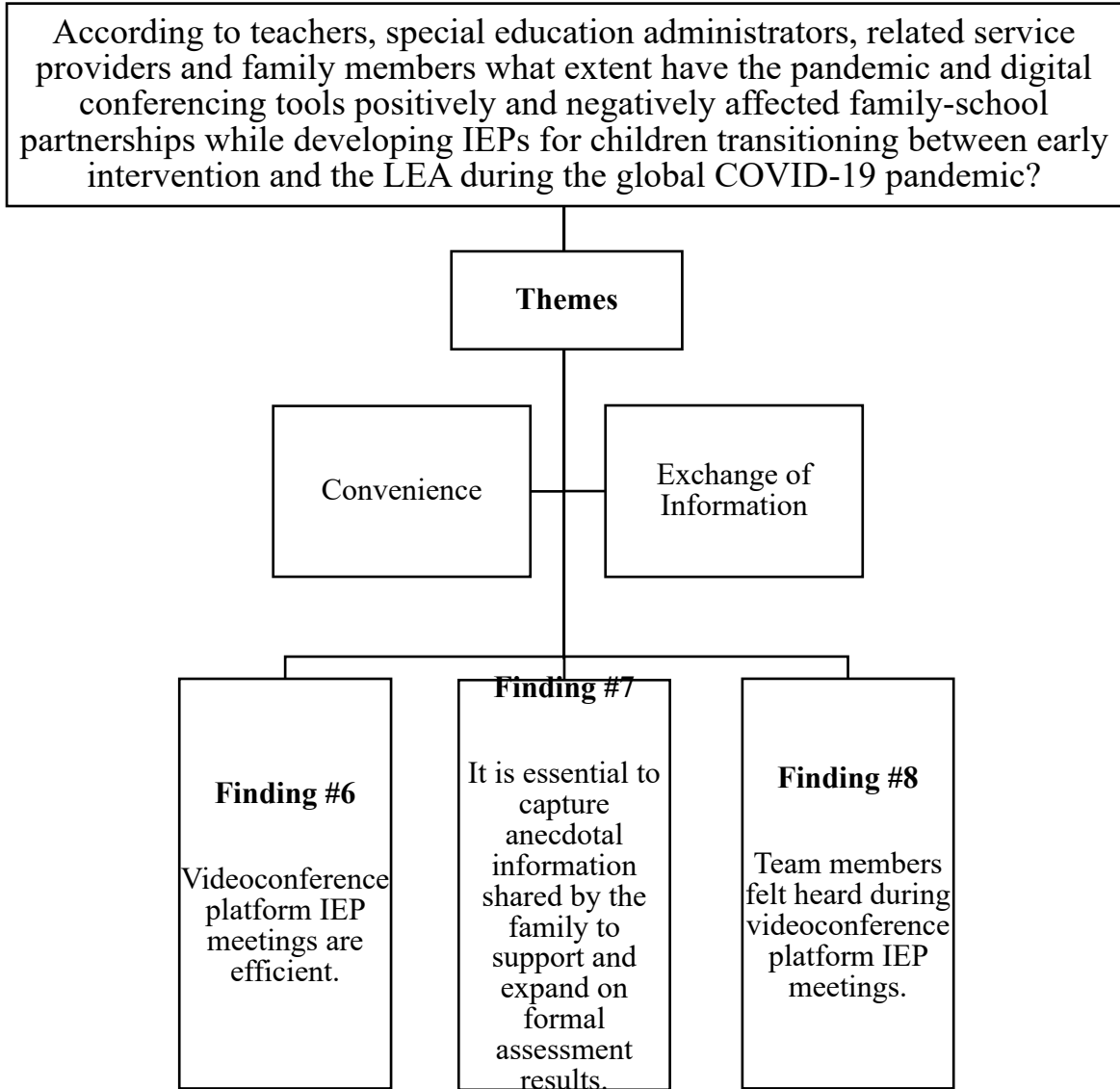


Table 6: Themes and Findings Relevant to Research Question Three



Summary

This researcher was originally interested in this topic as a public school administrator who frequently facilitates IEP meetings. At the beginning of the global COVID-19 pandemic in March of 2020, many public school districts in Connecticut abruptly shifted to conducting IEP meetings via a videoconference platform to ensure necessary precautions and mitigation factors relevant to avoiding in-person gatherings and the transmission of the COVID-19 virus. This researcher noticed, from a school district perspective, that the meetings appeared to have increased efficiency when conducted as a videoconference meeting. As a result of this study, it was discovered that this is a matter of perspective. All participants agreed that meetings started and ended on time, and all felt that their input was heard. However, three of the five, or 60%, of family participants also shared that it was difficult to remember the names and roles of the different team members when they met over a screen. They found that this made subsequent communications difficult as they were not sure as to which professionals fulfilled which role in working with their child. This suggests that future research could focus on how to increase an understanding of the roles as this then impacts communication which influences relationships.

Guiding research question one sought to identify how family-school partnerships were forged when initial contacts were conducted via a videoconference platform. This research found that team member roles both influence and impact the family-school partnership. There is a continuum of relationships beginning with the parent, to the child, to early intervention staff, to school staff, and then looping back to educational planning for the child. The roles of the different team members impact the chain of information

that is shared between and amongst the team members during and after IEP meetings. Additionally, established systems and processes for IEP meetings can help to promote a deeper understanding of the child's needs as well as the process and accompanying paperwork. Finally, the steps in the transition process are foundational in the establishment of the family-school partnership.

The second guiding research question was designed to identify any barriers that might interfere with a family's ability to provide input into the development of their child's IEP. The first identified barrier was that the IEP process was explained to family participants, however, the IEP document was not explained in detail. The next identified barrier is that the lack of face-to-face meetings impacted assessment and meeting procedures. Children were not always evaluated in person and at times assessments were completed via a videoconference observation of the child in their home environment. This may have impacted the ability of the IEP team to develop an accurate and meaningful IEP.

The third guiding research question looked at how digital conferencing tools have affected family-school relationships in the IEP process. All research participants are in agreement that videoconference platform IEP meetings are efficient. Teams found that it was essential to capture anecdotal information shared by the family to support and expand upon formal assessments. Finally, all team members felt heard during videoconference platform IEP meetings.

The overarching conclusion is that perspective/viewpoint (school staff or family member), as well as communication, supported all facets of the family-school partnership for families and school staff while children transitioned between early intervention and

the public schools (LEA) during the global COVID-19 pandemic. School staff participants shared that they were clear on IEP meeting roles and content. Family member participants shared that they were not certain of individual roles as well as IEP meeting protocol. Due to this virtual videoconference platform, teams needed to rely on anecdotal information that was shared to support evaluation results and then capture this information to guide IEP development. The overarching finding was the juxtaposition between the convenience of videoconference platform meetings and the loss of human connection experienced during a face-to-face meeting. The parent participants shared that there was convenience in videoconference participation. They could participate from home or work. They did not need to travel. They did not need to secure childcare. However, along with the convenience, there were times when they were uncertain as to who was participating in the meeting, the actual roles of the different participants, and then in recognizing the individuals when they subsequently met in person. The parent participants found that the content of the information that they shared was incorporated into the IEP document and the videoconference platform did not compromise their participation. The school staff found that videoconference IEP meetings were convenient and efficient. Their greatest challenge was the need to rely on anecdotal assessment information in the absence of meeting and evaluating children in person. Staff did not need to travel for meetings. Videoconference meetings maintained focus and typically were held as originally scheduled. All participants noted convenience, but some shared concern about not feeling a sense of human connection after meeting via videoconference. Convenience at the loss of connection was the very essence that melded together to define this videoconference IEP meeting phenomenon for children

transitioning between early intervention and LEA during the global COVID-19 pandemic. There is cost of human connection paid for the convenience of collaborating via videoconference platform. Moving forward, each individual situation will need to be analyzed from a cost benefit perspective to determine the appropriate path when given a choice between convenience and connection. The idea of a cost benefit analysis amongst relationships within the field of education is poignant.

The eight findings for this research project are:

- *Finding 1:* Team member roles influence the family-school partnership.
- *Finding 2:* Established systems and processes for meetings help to promote understanding.
- *Finding 3:* The initial steps in the transition process are foundational for human connection in the establishment of the family-school partnership.
- *Finding 4:* There are established systems to explain the IEP process, however, the IEP document was not explained in detail.
- *Finding 5:* The lack of face-to-face meetings impacted the assessment and subsequent development of accurate IEP documents.
- *Finding 6:* Videoconference IEP meetings are efficient.
- *Finding 7:* It is essential to capture anecdotal information shared by the family to support and expand on formal assessment results.
- *Finding 8:* Team members felt heard during videoconference platform IEP meetings.

CHAPTER FIVE: SUMMARY, DISCUSSION, FUTURE RESEARCH, AND FINAL REFLECTIONS

Introduction

The final chapter of this dissertation is presented in the following sections: 1) summary of the study; 2) discussion; 3) recommendations for future research; and 4) final reflections. The first section provides an overview of the research study and a summary of the four preceding chapters. This includes the identified problem, the purpose of the study, the bodies of literature that were reviewed, the design of the study, and the findings. The second section reviews the eight findings from the study as they relate to the three guiding research questions and recommendations for how public schools, or local education agencies (LEAs), might consider this research in their practice. The third section provides recommendations for potential further research to expand upon the findings of this study. The fourth section consists of final reflections on this researcher's doctoral journey and experience now that the study has concluded.

Summary of the Study

Chapter One of this dissertation provided context for this research. As a result of the onset of the global COVID-19 pandemic, there were shifts in public school educational operations. This study specifically looked at the genesis of videoconference platform Individualized Education Program (IEP) meetings for children transitioning between early intervention (IDEA Part C) and local education agency (LEA) programming (IDEA Part B) in public schools in Connecticut during the global COVID-19 pandemic. Kurth et al. (2019) identified that family input into the IEP process is not consistently valued. This study explored the phenomenon of videoconference platform

participation in the IEP process for children transitioning between early intervention and LEA and how input from team members was incorporated into the IEP document. Additionally, the study explored how family-school partnerships were forged over a videoconference platform during the development of an initial IEP as children transitioned from early intervention to LEA.

Federal legislation outlined in the Individuals with Disabilities Education Act (IDEA, 2004) presents qualifying factors such that children with disabilities can receive free and appropriate public education (FAPE) services. IDEA Part B details requirements for special education and related services for children 3-21 years of age. IDEA Part C details early intervention services for children from birth until their third birthday. This legislation creates an inherent system of transition. At age three, children move from early intervention services provided in the child's home or a community setting to school-based programming. The early intervention model is employed so that providers coach parents and caregivers on the implementation of instructional strategies. As children transition to public school services through their LEA at age three, the service delivery of instructional strategies is provided by school staff. During this shift in the programming model, including location of services, the families of children with disabilities progress from an exclusive relationship with their child's early intervention team to an expanding relationship with several team members in their partnership with the LEA. Much of this initial relationship forging occurs during the transition process of the initial IEP meetings between the family, LEA, and the child's early intervention team.

The purpose of this study was to identify factors that contributed to and promoted positive reciprocal family-school partnerships, beginning at the entry into LEA, the first

transition between early intervention and preschool special education programming. The researcher looked specifically to identify if a videoconference platform influenced and/or enhanced family-school partnerships. This study included the identification of perceived barriers that resulted in team members undervaluing family input in the IEP process, factors that promoted family-school partnerships in preschool special education, and effective methods for collaboration with families during the IEP process. Chapter one also defined key terms and stated the following three guiding research questions that directed this study:

1. What are the various ways that teachers, special education administrators and families report they establish home-school partnerships that bridge between home and school as children transition from early intervention to school-based programming during the global COVID-19 pandemic?

- 2.-What are the factors and conditions that special education teachers, general education teachers, school administrators and family members believe are barriers to family input into the IEP process for children transitioning between early intervention and LEA preschool during the global COVID-19 pandemic?

3. According to special education teachers, general education teachers, school administrators and family members to what extent have the pandemic and digital conferencing tools positively and negatively affected family-school partnerships while developing IEPs for children transitioning between early intervention and the LEA during the global COVID-19 pandemic?

Chapter two of this study reviewed six distinct bodies of literature. These six bodies were selected to help to situate the problem of videoconference IEP meeting

participation and family-school partnerships. The following six bodies of literature were reviewed: 1) transition between early intervention and preschool special education; 2) development of the individualized family service plan (IFSP) and the individualized education plan - program (IEP); 3) implementation of a coaching model with families and caregivers of young children with disabilities; 4) family engagement in education; 5) use of videoconferencing in education; and 6) public school education during the global COVID-19 pandemic. The purpose of this literature review was to provide context and background for factors surrounding home-school partnerships for preschool children with disabilities that were forged during the transition between early intervention and preschool programming via videoconference platform.

Chapter three addressed the design of the study. This qualitative research uncovered the phenomenon experienced by the participant group during the transition between early intervention and LEA via videoconference during the global COVID-19 pandemic. This phenomenon impacted family-school partnerships. Creswell (2013) states, "A phenomenological study describes the common meaning for several individuals of their lived experiences of a concept or a phenomenon." (p. 76). The phenomenon examined for this research was the platform of videoconference participation in IEP development for preschool children transitioning from early intervention to LEA. Creswell states that the phenomenological study identifies the what and the how of a common experience/phenomenon. Phenomenological research allowed the researcher to gather information about this common experience and the commonalities and variations as they impacted the process of IEP development.

Chapter four presented data from participant interviews. The data was presented and discussed as well as supported with the use of tables and charts. The researcher reviewed data from individual participant interviews, analyzed, and determined five themes. The five themes were: 1) there is a need for defined and communicated roles and systems in the IEP process; 2) human connection is missing when the initial connection is over a videoconference platform; 3) lack of consistent communication and systems of practice in the IEP process during the transition between early intervention and LEA; 4) videoconference platform IEP meetings are convenient; and 5) there is an on-going exchange of information during the transition process. The five themes then led to eight key findings relative to the three guiding research questions. The eight findings are as follows: 1) team member roles influence the family-school partnership; 2) established systems and processes for meetings help to promote understanding; 3) the initial steps in the transition process are foundational for human connection in the establishment of the family-school partnership; 4) there are established systems to explain the IEP process, however, the IEP document was not explained in detail; 5) the lack of face-to-face meetings impacted the assessment and subsequent development of accurate IEP documents; 6) videoconference platform IEP meetings are efficient; 7) it is essential to capture anecdotal information shared by the family to support and expand on formal assessment results; and 8) team members felt heard during videoconference platform IEP meetings.

Table 7

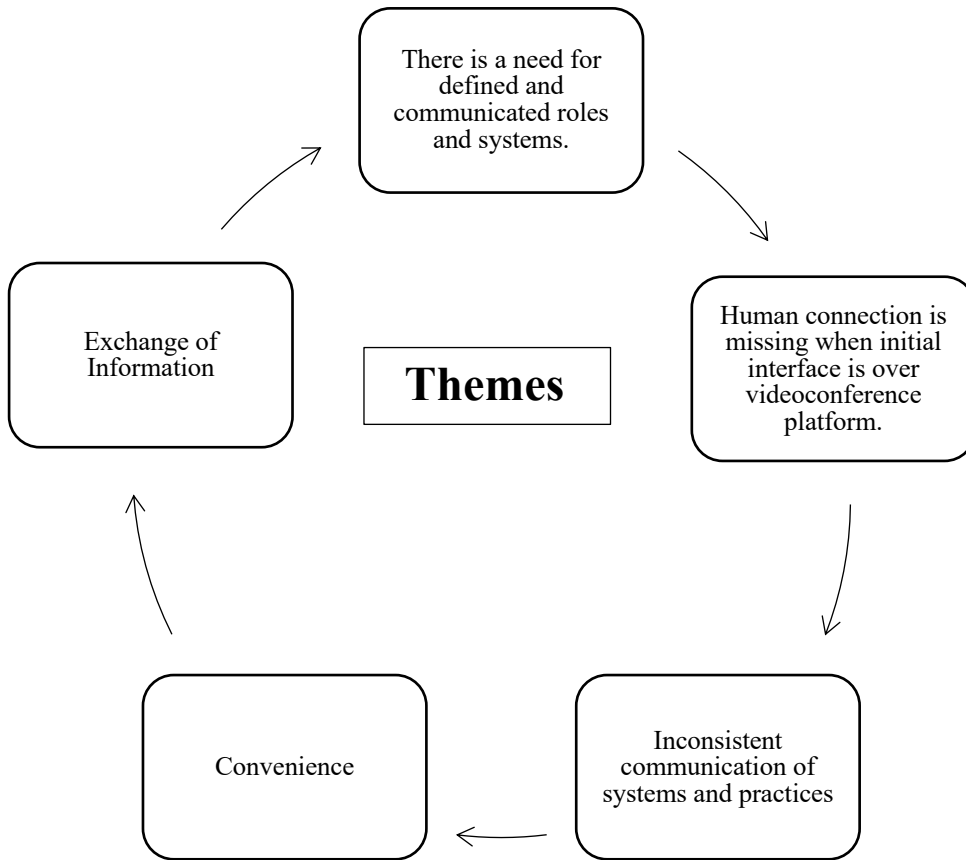
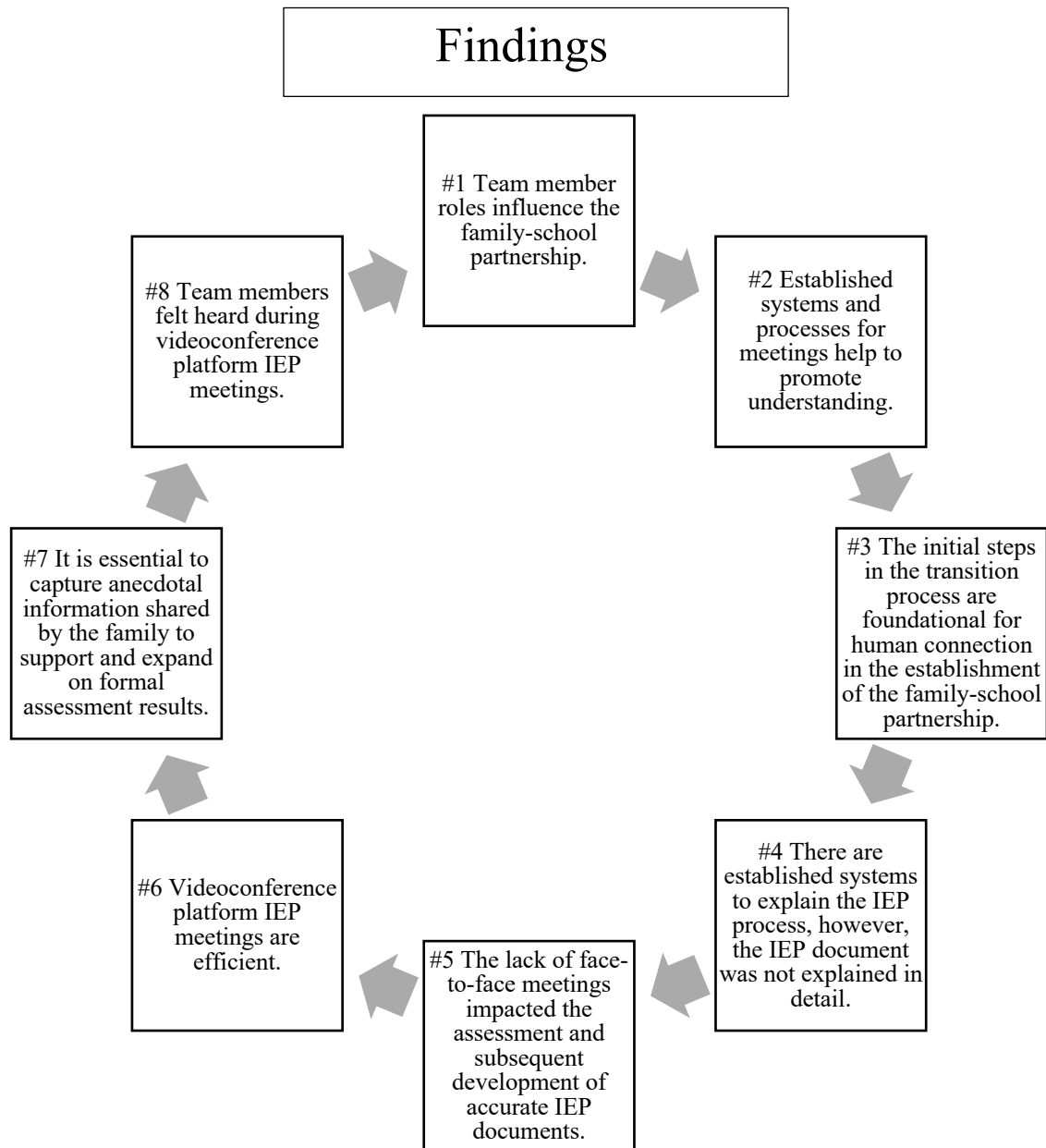


Table 8



Discussion

This study uncovered five themes and eight findings specific to the phenomenological experience of participants in initial IEP meetings for children transitioning between early intervention and held via videoconference during the global COVID-19 pandemic. The themes that emerged as a result of the interviews and research were: defined roles and systems; practices to promote human connection; inconsistent communication of systems and practices; the convenience of videoconference platform meetings; and the exchange of information. The following discussion works to synthesize the information experienced in this phenomenon as it relates to the literature and discusses the eight findings.

Chapter four detailed the data and emerging themes that evolved into the eight findings in relation to the three guiding research questions. The analysis of the interviews and the research in this study led to these eight findings.

The following are the eight key findings from this research study:

- *Finding 1:* Team member roles influence the family-school partnership.
- *Finding 2:* Established systems and processes for meetings help to promote understanding.
- *Finding 3:* The initial steps during the transition process are foundational to human connection in the establishment of the family-school partnership.
- *Finding 4:* There are established systems to explain the IEP process, however, the IEP document was not explained in detail.
- *Finding 5:* The lack of face-to-face meetings impacted the assessment and subsequent development of accurate IEP documents.

- *Finding 6:* Videoconference IEP meetings are efficient.
- *Finding 7:* It is essential to capture anecdotal information shared by the family to support and expand on formal assessment results.
- *Finding 8:* Team members felt heard during videoconference platform IEP meetings.

Research Question One

This section discusses the eight findings as they relate to the three guiding research questions. The literature details the official transition process between part C and part B of IDEA (IDEA, 2004). The first guiding research question for this study is: What are the various ways that teachers, special education administrators, and families report they establish home-school partnerships that bridge between home and school as children transition from early intervention to school-based programming during the global COVID-19 pandemic? There is an embedded transition between part C and part B of IDEA (IDEA, 2004) as children progress from the early intervention service delivery model to district-based preschool special education programming. During this transition, there are formal meetings that occur. These formal IEP meetings are what Rous et al. (2010) refer to as high-intensity transition practices, individualized transition practices. This research indicates three findings specific to this transition: 1) team member roles influence the family-school partnerships; 2) established systems and processes for meetings help to promote understanding; and 3) the steps in the process are foundational in the establishment of the family-school partnership in the development of the initial IEP. There is a need for defined and communicated roles and systems. Over a videoconference platform, the human connection is missing during this important

juncture between early intervention and LEA programming. This is a foundational time in relationship/partnership development, and intentional practices to promote human connection are needed. Specifically, there is a need for high intensity, individualized, opportunities for human connection between family and school staff.

Research Question Two

The second guiding research question sought to identify barriers to family input into IEP development: What are the factors and conditions that special education teachers, general education teachers, school administrators and family members believe are barriers to family input into the IEP process for children transitioning between early intervention and LEA preschool during the global COVID-19 pandemic? Johnson et al. (2004) previously identified that logistics such as transportation, babysitting, and scheduling are often barriers to family participation in the IEP process. This research validated that videoconference meetings are convenient. However, the lack of face-to-face interactions impacted the individual child's initial assessment and potentially influenced the subsequent development of an accurate IEP. This is important as Barrio et al. (2017) found that measurable goals and short-term objectives, as well as how progress will be measured, documented, and reported to families, is often an indicator of a quality IEP. This suggests that to develop a quality IEP, the team would need accurate and reliable assessment information. The absence of in-person assessment data may compromise the available information when developing an initial IEP for a child. This research also found that there are established systems to explain the IEP process, however, the IEP document was not explained in detail during the process or meeting.

This study found that the communication systems to explain the IEP document are not consistent or defined.

Research Question Three

The third research question was: According to special education teachers, general education teachers, related service providers, special education administrators and family members to what extent have the pandemic and digital conferencing tools positively and negatively affected family-school partnerships while developing IEPs for children transitioning between early intervention and the LEA during the global COVID-19 pandemic? This question uncovered two key findings: 1) it is essential to capture anecdotal information shared by the family to support and expand on formal assessment results; and 2) team members felt heard during videoconference platform IEP meetings. Epstein et al. (2009) found that reciprocal family-school partnerships positively impact student learning. Team members having a voice is an essential foundational component in a partnership. Capturing and integrating anecdotal information shared at the IEP meeting supports reciprocity in the relationship and places value on the information that is exchanged. Mueller and Vick (2019) state that the development of trust among all team members is a way to capture the input of all contributors. This research suggests that there was trust amongst the team members over the videoconference platform. Team members noted that individual child information that was shared during the formal meeting was integrated into the IEP document. Team members felt that their input was valued and incorporated, which suggests trust.

Synthesis of Findings from the Three Guiding Questions

The results of this study indicate that the roles of different school staff IEP team participants need to be clearly defined for all participants, and especially for family members. These defined roles could include, but would not be limited to, administration/leadership, general and special education teachers, related service providers, and case managers. This could be a pictorial resource with accompanying text that is provided to family members prior to the IEP meeting. During the actual IEP meeting, a part of the meeting protocol should be to include the use of the videoconference feature that shows written text for each participant within their individual video box. This text would include both the participants name and their role on the team. This clarification, to include identification of case manager, supports the research by Dahlin et al. (2020) that found that families were more likely to access services and supports when roles were clearly defined.

The definition of roles will further promote family member participant's ability to view the different team members and their contributions towards the development of the IEP document. After the formal meeting where a pictorial directory is provided and the names and roles of participants are displayed, the family participants will have a clear understanding of the different service implementers outlined within the IEP. This will lead to an improved understanding of the specialized instruction necessary to work toward goals and objectives. This understanding will encourage families to transfer information reciprocally between home and school, leading to deeper engagement. Family engagement positively impacts learning outcomes for children (Mapp, 2003, and Powell et al. 2010). As family members are able to clearly identify the individual school staff working with their children they will be able to ask and share

necessary information with appropriate professionals. As school staff share with family members, the family members will have a previously distributed written reference sheet to quickly identify roles and assist in making connections that align with their child's learning.

This research supports that clearly defined transition steps are foundational in the early stages of the family-school partnership. Established and communicated processes such as screen share of IEP document during the meeting and then an explicit system to explain the actual pages of the IEP document, what the information means, and what this will look like within the child's classroom or location of service delivery. This meeting to explain the IEP document should be offered to the family as either a videoconference meeting, to honor the convenience, or an in person meeting to promote the human connection. These efficient practices support the initial development of trust. This foundation of trust is further promoted by efficient practices that are clearly communicated.

This research indicated that all IEP team members, including family participants, felt that they had opportunity to share information relevant to the child at the initial IEP meeting. This was especially important during a time when initial comprehensive evaluations could not always be completed in person due to health and safety mitigation factors.. The IEP team relied on anecdotal information to support, expand, and in some instances replace standardized testing. In some instances, the anecdotal information helped to clarify and in other cases identified the need for additional assessments. The team members relied on one another to present and incorporate information to the best of their ability with the understanding that there may

need to be adjustments to the IEP as the child adjusted to school based programming. This required a level of trust amongst team members. Trust was often established as voice was captured and incorporated into the initial IEP document.

Recommendations for Local Education Agencies

This researcher appeals to school districts to value family-school partnerships and engage in a careful analysis of their current transition practices between early intervention and LEA programming. This study highlights the convenience and efficiency of videoconference platform IEP meetings. It also identifies a chasm specific to the loss of human connection over a videoconference platform. Moving forward, school districts with clearly detailed processes and practices during this time of transition will have systems in place to further promote the continuation of family-school partnerships. Districts may need to develop and define additional transition practices to ensure that families and schools have face-to-face interactions, which can lead to a deeper sense of connection and relationship, which will, in turn, impact the partnership, and, ultimately, student learning.

Established Systems to Explain the IEP Document

This study found that in some school systems, LEAs do not yet have systems established to explain the IEP document to family participants. The IEP meeting process has been identified as a system that is clearly explained to all team participants. The next step is to expand upon this to ensure that all team members understand the entire IEP document and the purpose behind the information that is included within. This supports the findings of Feinberg and Ladew (2011) and Lo (2012), who found significance in supporting families in preparation for the IEP meeting. This next step is to develop a

transition practice that supports the family after the development of the IEP as the child begins to access programming. Time to explain the document to the family prior to the child beginning school. Next, time to revisit the explanation of the document after the child is receiving services. This would be a continuation of the foundational family-school partnership forged during the IEP development process. These practices would potentially support the individual child and thus improve learning outcomes in alignment with the research conducted by Epstein et al. (2009) that found that reciprocal family-school partnerships positively impacted student learning.

Meeting Efficiency

This study found that videoconference platform IEP meetings were efficient. Johnson et al. (2004) identified logistical barriers to meeting participation as transportation, babysitting, and scheduling. A videoconference platform eliminates the transportation barrier, reduces the impact of the need for babysitting, and can allow flexibility in participation location, which can ease scheduling. A potential barrier is the lack of access to technology and the internet for family participants. In this instance, the LEA team would need to anticipate potential challenges for families, gauge these during the scheduling process, and provide the necessary support in advance of the meeting to allow for family participation. Overall, videoconference platform meetings are a convenience valued by both school and family participants and, as such, a positive option as education moves beyond the pandemic.

High-Intensity Transition Practices to Perpetuate Family-School Partnership After the Development of the Initial IEP

High-intensity practices, as defined by Rous et al. (2010), are supports and practices that are individualized and customized to support an individual child and family during a transition. These are measures that customize and extend beyond routine transitions such as orientation sessions and group meetings. This is an opportunity for the school and family to collaborate, determine, and implement communication systems, routines, and supports specific to the individual child and family during the initial introduction and adjustment to education within a school setting. At this time, school staff could benefit from the implementation of the coaching model outlined by Rush and Shelden (2020) and utilized by early intervention staff. School-based programming is a shift from a home/community service delivery model. When early intervention services are delivered in the child's natural environment, providers are able to work alongside families, share strategies, and collaborate. School-based programming is designed to expand the natural environment to include education outside of the home/community. The parent does not have the same physical proximity to their child's daily educational journey. During this transition, there may need to be intentional efforts from both the family and school to share and communicate individual child strengths and challenges. School staff could employ coaching strategies as a method to explain individual educational supports. This is a time to develop and consistently implement a system of communication that meets the needs of both the family and school in working toward supporting the child's individual growth.

Recommendations for Future Research

As a public school administrator, this researcher has lived the phenomenon of videoconference platform IEP meetings for children transitioning between early

intervention and the LEA during the global COVID-19 pandemic. The eight findings from this study, along with the existing research, illuminate that there have been positive outcomes from videoconference platform IEP meetings at this time of educational transition for young children and their families. Based on the findings of this study, this researcher proposes the following future research studies.

Power Differential on Videoconference Platform

This study suggested that team members felt heard during the videoconference platform's initial IEP meetings. This was evidenced when participants shared that specific child information was included in the IEP document. A follow-up to this study would be to analyze individual team member voice. This might include transcription of dialogue during initial IEP meetings. These transcripts could then be analyzed. Comparisons could be made between the actual information shared and subsequent representation in the IEP document. What percentage of information is captured and incorporated into the child's IEP as a result of a videoconference IEP meeting? Is the information from all participants captured, or does this fluctuate based on the participant's role? Does a videoconference platform initial IEP meeting promote/further trust amongst team members? With reduced power differential over videoconference platform, is there an increase of the inclusion of individual team member voice?

Incorporating Children's Strengths Within IEP Documents with Videoconference Platform IEP Meetings

The reduction of in-person initial assessments led to an increase in the incorporation of anecdotal information during the identification of disability and

subsequent development of IEPs. In utilizing this anecdotal information, was there an increase in the inclusion of individual child strengths in the IEP document? This proposed study would look to compare IEP documents developed with the exclusive use of anecdotal and “virtually” completed assessments as compared to documents that included in-person standardized assessments. Was there an impact on student growth between IEPs developed based on anecdotal information versus those developed off of standardized assessment instruments? Next, this study might explore the ability to identify and develop measurable goals and objectives that identify the individual child’s needs while also incorporating strengths as a means to promote growth. What is the best way to include both standardized assessments and anecdotal information in the development of measurable goals and objectives?

Ensuring Human Connection After Initial Virtual Foundation

This study illuminates the convenience of videoconference platform IEP meetings for children transitioning between early intervention and preschool programming. Future research might focus on a compilation of strategies implemented that allow for in-person, face-to-face interactions for families after a child begins preschool programming. What systems are in place? What practices are needed? How can the schools provide opportunities to continue to expand the family-school partnership that focuses on human connection and relationship?

Promoting Collaboration During Transition

Currently, a collaboration between early intervention staff and LEA reportedly relies on participation in joint meetings and an exchange of paperwork. It would be interesting to explore the integration and crossover of the two systems. Perhaps

LEA staff participate in early intervention sessions and work collaboratively on initial assessments. A continuation of early intervention involvement as the child initially transitions to a public school program. And finally, a collaborative approach between early intervention and school staff to explaining the IEP document development to the family. This explanation might be offered as a choice of a videoconference, an in person, or a hybrid combination to include participation while also promoting convenience. This study suggested that some families relied on their relationship with the early intervention team as questions arose specific to the IEP document. How might the early intervention team and the LEA continue to collaborate to support this transition beyond the formal IEP meeting and establish a team inclusive of the child's family/supports?

Final Reflections

This study has provided this researcher an opportunity for personal, academic, and professional growth. On a personal level this doctoral journey has affected how this researcher views and experiences the world. This researcher's perspective is only a small portion of any given scenario. This researcher has honed her ability to pause and listen to multiple viewpoints for any given situation. This researcher has a new awareness of the political landscape and how politics impact policies and eventually practice. As an educational leader this researcher holds a position of influence and it is a pivotal responsibility to continue to improve individual ability to listen as a means to infuse intentionality into every thought and move.

On an academic level, this study provided the opportunity to experience the process of identifying, defining, and researching a current challenge within the realm of educational leadership. This researcher also experienced the value of processing

feedback. As a result of this experience, this researcher is now in a position to continue to integrate research methods when faced with challenges or situations that require a focused analysis and eventual action steps. Additionally, this researcher has learned how to identify individual bias. This awareness and identification are the initial steps in recognizing how personal thoughts potentially influence actions. This researcher is now better equipped as a scholar and a person to pause and reflect in all different facets of life. This researcher now identifies the value of delaying resolution for non-emergency situations to allow adequate time to process and create an intentional response or action plan that takes into account research based information as well as individual bias.

As an educational leader this researcher now feels equipped to situate self within any given challenge while integrating information and research to guide actions. This researcher has learned that there is more value to listening than sharing. This journeyed has strengthened ability to sit back and allow self to be present when taking in information, thoughts, and ideas from colleagues. All stakeholders are invested in the outcomes within our schools, and they all care. Their perspectives and individual stories will be different, and this information is a crucial component in forming, and informing, practice and policies. At the onset of this doctoral journey, this researcher recognized the value of relationships, but is now aware of the need to be cognizant of the research that supports relationship-based actions in daily practice. As Rossetti et al., (2017)state, trust is foundational in relationships. This study identified the phenomenological experience of a small group of individuals with a common experience. As a leader, this researcher is now charged with integrating knowledge gained from this individual study as well as the larger journey as a doctoral student. Relationships matter. As an educational leader there

is a need to listen, pause, and respond with intentionality. Everyone has a story. This researcher needs to look at how individual stories contribute to the collective experience and apply this to shape educational experiences for young children.

This researcher has been engaged in this research during an incredibly trying time for the world and public schools, the global COVID-19 pandemic. This doctoral journey began as a means to better understand and engage in research relevant to educational leadership. The specific study sought to uncover the phenomenological experience of IEP team participants transitioning children between early intervention and public schools via a videoconference platform during the pandemic. This study looked at the experiences of 12 individual participants and drew out the commonalities to document their collective experience or phenomenon. It must also be recognized that everyday life has altered during this time. As the world adjusts to a new sense of normal, individuals will carry this time and the impact of the changes in the world forward. Videoconference platform IEP meetings are convenient. Convenience also comes with a cost. The videoconference interface is lacking in-person human connection. Moving forward, there will need to be a concentrated effort to ensure that measures are taken to guarantee connectivity and relationship. There is a need to develop and implement high-intensity individualized strategies and practices beyond the development of the initial IEP. This research suggests that the family and school have established foundational partnerships via a videoconference platform. The next step is to continue to grow this relationship with intentionality. Educational leaders lay the foundation for home-school partnerships, especially as children and families transition between early intervention and LEA programming. The goal is to continue to build and strengthen these family-school

partnerships. The relationships amongst the adults will positively impact the learning of the children (Mapp, 2009). This study identifies that initial interface via videoconference platform can promote the foundation for relationship and partnership. In order to continue to build upon this foundation, school leaders are charged with the responsibility to outline and ensure implementation of a combination of practices and opportunities for families and school staff to come together both in person as well as virtually to support the education of young children.

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APPENDICES

Appendix A. Email Letter to Superintendents of Potential Participants

Dear Superintendent,

As an early childhood educational leader, and a doctoral student at Lesley University, I am interested in examining the impact of videoconference IEP meetings for young children that are transitioning between early intervention and preschool special education services.

I would like to invite preschool special education and related service staff and families from your district to participate in a research study that will look at team input and process for videoconference IEP meetings for children transitioning between early intervention and preschool special education during the global COVID-19 pandemic. Their participation is being sought as an individual who has participated in this process during this specific timeframe and under these unique circumstances. The results of this research study will be used as a portion of my doctoral dissertation and, in the future may be submitted to educational journals regarding special education process and family engagement.

This research consists of 2 separate parts; (a) an initial online screening survey to identify individuals who have participated in transition IEP meetings between early intervention and LEA during the global COVID-19 pandemic, and (b) and an individual scheduled interview that will take approximately 45-60 minutes. The interview portion of the study will utilize an audio recording device to ensure accuracy of data collection. The individual interviews will be transcribed and each participant will receive a copy of their interview.

If you agree to allow staff and family members to participate in this research study, please reply to this email containing the attached consent form. This consent form outlines your permission for staff and families to voluntarily participate in this study and permission to use data collected within my doctoral dissertation. Throughout the study, specific precautions will be taken to ensure confidentiality and participant anonymity. All names, places, and identifying information will be changed or removed. Within this study, I will be the only one recording, collecting, and analyzing the data. Once data is analyzed, and the dissertation is complete, all notes and materials will be deleted and destroyed.

As a current public school educational leader, I fully understand the daily work demands, particularly during a global pandemic. With this in mind, I respectfully ask for you to allow your staff and families to volunteer their time and assistance in this study. Please read and complete the attached consent form if you are willing to allow district staff and families to participate in this study. Please do not hesitate to email me at jtenore@lesley.edu with any questions or concerns.

Sincerely,

Jennifer L. Tenore
Lesley University Doctoral Candidate

Appendix B. Email Letter to Potential Participants

Dear Potential Participant,

As an early childhood educational leader, and a doctoral student at Lesley University, I am interested in examining the impact of videoconference IEP meetings for young children that are transitioning between early intervention and preschool special education services.

You are invited to participate in a research study that will look at team input and process for videoconference IEP meetings for children transitioning between early intervention and preschool special education during the global COVID-19 pandemic. Your participation is being sought as an individual who has participated in this process during this specific timeframe and under these unique circumstances. The results of this research study will be used as a portion of my doctoral dissertation and, in the future may be submitted to educational journals regarding special education process and family engagement.

This research consists of 2 separate parts; (a) an initial online screening survey to identify individuals who have participated in transition IEP meetings between early intervention and LEA during the global COVID-19 pandemic, and (b) an individual scheduled interview that will take approximately 45-60 minutes. The interview portion of the study will utilize an audio recording device to ensure accuracy of data collection. The individual interviews will be transcribed and each participant will receive a copy of their interview.

If you agree to participate in this research study, please reply to this email containing the attached consent form. This consent form outlines your completely voluntary participation in this study and permission to use data collected within my doctoral dissertation. Throughout the study, specific precautions will be taken to ensure confidentiality and participant anonymity. All names, places, and identifying information will be changed or removed. Within this study, I will be the only one recording, collecting, and analyzing the data. Once data is analyzed, and the dissertation is complete, all notes and materials will be deleted and destroyed.

As a current public school educational leader, I fully understand the daily work demands, particularly during a global pandemic. With this in mind, I respectfully ask for your time and assistance in this study. Please read and complete the attached consent form if you are willing to participate in this study. Please do not hesitate to email me at jtenore@lesley.edu with any questions or concerns.

Sincerely,

Jennifer L. Tenore
Lesley University Doctoral Candidate

Appendix C. Informed Consent to Participants

Dissertation Research:
***Videoconferencing to Strengthen Family School Partnerships for Children Transitioning
Between Early Intervention and Local Education Agency During Global COVID-19
Pandemic***

This study, designed and facilitated by Jennifer L. Tenore, is being conducted as part of the requirements of the Educational Leadership Doctoral Program at Lesley University. The purpose of my research is to develop a deeper understanding of the role that videoconference IEP meetings have on family engagement for families and educators of young children transitioning between early intervention and preschool special education programming during the global COVID-19 pandemic. This study will examine the impact of team input and dynamics on reciprocal relationships between school staff and families during this transition.

I will be conducting a phenomenological study that entails individual interviews with participants. I will use audio recording so that I can later transcribe each interview. Each participant will receive a written transcript of their individual interview.

I am interested in interviewing you to gain insight into your experience.

INFORMED CONSENT FORM

Participating in this research study is completely voluntary and there is no compensation for participating in this interview. You may cease participation at any time without explanation or penalty of any sort. There are no known risks associated with participation in this project. The benefit of participation in this project is the opportunity to provide information to educators and families of young children with disabilities.

You are encouraged to ask questions about this study at any time before or during this research. The researcher's contact information as well as the researcher's senior advisory's, and Lesley University's IRB contact information appear below. There is a standing Committee for Human Subjects in Research at Lesley University to which complaints or problems concerning any research project may, and should, be reported if they arise. Contact the committee chairpersons at irb@lesley.edu.

By replying to this email and inserting an "X" next to the appropriate statements, you are giving electronic consent to participate in this research study. A copy of this consent form will be to the participants for their own documentation.

Thank you for your consideration of participation in this research study!

I agree to participate in this study.

I do not agree to participate in this study.

I do not agree to allow audio recordings of interviews.

Sincerely,

Jennifer L. Tenore

Jennifer Tenore
PhD Candidate
Lesley University
jtenore@lesley.edu

Dr. Gail Cahill
Senior Advisor
Lesley University
gcahill@lesley.edu

Appendix D. Initial Screening Questionnaire

1. Have you participated in an IEP meeting for a child transitioning (review of referral to special education, planning a comprehensive evaluation, determining eligibility, and developing an IEP) between Early intervention and preschool special education during the global COVID-19 pandemic?
 1. Yes
 2. no
2. What platform was used for this meeting?
 1. Videoconference
 2. Telephone
 3. In person
3. What was your role in the transition IEP MEETING held via videoconference during the global COVID-19 pandemic?
 1. Parent
 2. Guardian
 3. Special Education Teacher
 4. General Education Teacher
 5. Related Service Provider
 6. Administrator
 7. Other _____
4. What value do you place on a reciprocal partnership between family and school in relation to a child's learning?
 1. Key to a child's success
 2. Can help to promote a child's learning
 3. Sets a pleasant tone, but little impact on learning
 4. No impact on child's learning
5. Would you be willing to participate in a study and share your experience?
 1. Yes
 2. No

Appendix E. Interview Protocol

Videoconference IEP MEETING Participation Interview Protocol

Introduction & Participant Welcome (*this will be repeated for each interview participant*)

1. Welcome, and thank you for agreeing to participate in this research study as part of my dissertation. As outlined within the introduction and email consent form, I am interested in looking at the links between videoconference IEP meeting participation as children transition between Early intervention and preschool special education services, and subsequent family engagement. The purpose of this research is to capture your story. This interview should take up to one hour of time.

2. Prior to commencing the interview, I want to reiterate that your participation in this study is completely voluntary. If at any time you decide that you no longer wish to participate, you can withdraw without any penalty. As outlined in the consent form, I will be utilizing audio recording technology to accurately capture the interview. All collected data will be secure on a password protected external hard drive and/or locked in a secure lockbox to which only I will have access. At the completion of this study, all recorded and/or written data will be destroyed.

3. I value what you have to share in your story. As you answer questions and share, there are no correct answers. My goal is to gain details about your experience.

4. Do you have any questions before we begin the interview?

Opening Demographic Questions

1. What is your name?

2. Is your IEP meeting experience in an urban, suburban, or rural community?

3. Approximately how many IEP meetings have you participated in during the global COVID-19 pandemic for children transitioning between Early intervention and preschool special education?

Appendix F. Interview Questions for Family Participants

Families: Guiding Interview Questions
1. How was the IEP document explained to you?
2. How was the IEP MEETING process explained to you?
3. How did the team solicit your input into the development of the IEP?
4. How did you prepare for the IEP meeting?
5. Was there time and space to ask clarifying questions before/during/after the IEP MEETING?
6. Were there times where you did not agree with information that was being shared? If yes, did you share this with the team and what was the result?
7. Did the team record information that you shared about your child’s present levels of developmental performance?
8. Were you able to view the DRAFT IEP during the meeting?
9. Did the meeting start and end at the expected time? Was there enough time allotted for sharing input?
10. Did you feel heard during the videoconference IEP meeting to determine initial eligibility and develop your child’s IEP? Please provide examples.
11. As a result of the IEP meeting would you contact your child’s teacher to share updates on progress at home? Ideas about possible educational goals?
12. How do you view your partnership with the school team?
13. Describe your experience contributing to the development of your child’s IEP?
14. Is there anything else that you would like to share specific to your experience with videoconference IEP meetings for your child as they transitioned between early intervention and the LEA during the global COVID-19 pandemic?

Thank you for your participation in the interview today. Your contribution to this research is greatly appreciated. Do you have any additional questions?

Appendix G. Interview Questions for LEA Participants

LEA Staff: Guiding Interview Questions
1. How do you explain the IEP document to family participants?
2. How do you explain the IEP MEETING process to families?
3. How do you create space for family participation in the IEP MEETING process?
4. How did you prepare for the IEP meeting?
5. Are there specific questions that you ask all families? If so, what are they?
6. Were there times where you did not agree with information that was being shared? If yes, did you share this with the team?
7. Did you, or someone else on the team, record information shared by the family about the child's present levels of developmental performance?
8. Did you share a DRAFT of the IEP during the meeting?
9. Do you recall if the meeting started and ended at the expected time? Was there enough time allotted for sharing input?
10. Did you feel heard during the videoconference IEP MEETING transition meeting to determine initial eligibility? Please provide examples.
11. As follow-up to this transition IEP MEETING, how might you reach out to this child's family to share educational updates?
12. How do you view your partnership with the school team?
13. Describe your experience contributing to the development of this specific IEP?
14. Is there anything else that you would like to share specific to your experience with videoconference IEP meetings for children transitioning between early intervention and LEA during the global COVID-19 pandemic?

Thank you for your participation in the interview today. Your contribution to this research is greatly appreciated. Do you have any additional questions?