

Today's "Triple A" Agenda Authentic Assessment

Address the pervasive problem: "Please help, I've got this kid!!!

Reduce the confusion and anxiety for GPE teachers.

Learn the difference between assessment and evaluation?

Learn what to evaluate; what are the common denominators?

Selecting an assessment? Why do you use it?

Introduction

The primary goal of an APE program is to identify, practice, and further develop functional independent lifetime skills that advance and support overall health, wellness, and recreational community access to physical activity.

A secondary goal would be to improve the overall fitness levels by restricting, and/or limiting concomitant and sedentary conditions that would impact the health of the individual due to inactivity. (CARE-R-2, 2014).





Introduction

APE Assessment can be very confusing as each student is different.

Identifying the correct assessment to use is critical in order to:

- ✓ find a baseline for PE instruction (K-12, recreation, community access?; and,
- ✓ detect strengths and weaknesses that correspond to the Healthful Living Curriculum; and,
- ✓ Provide accurate and USEFUL information.

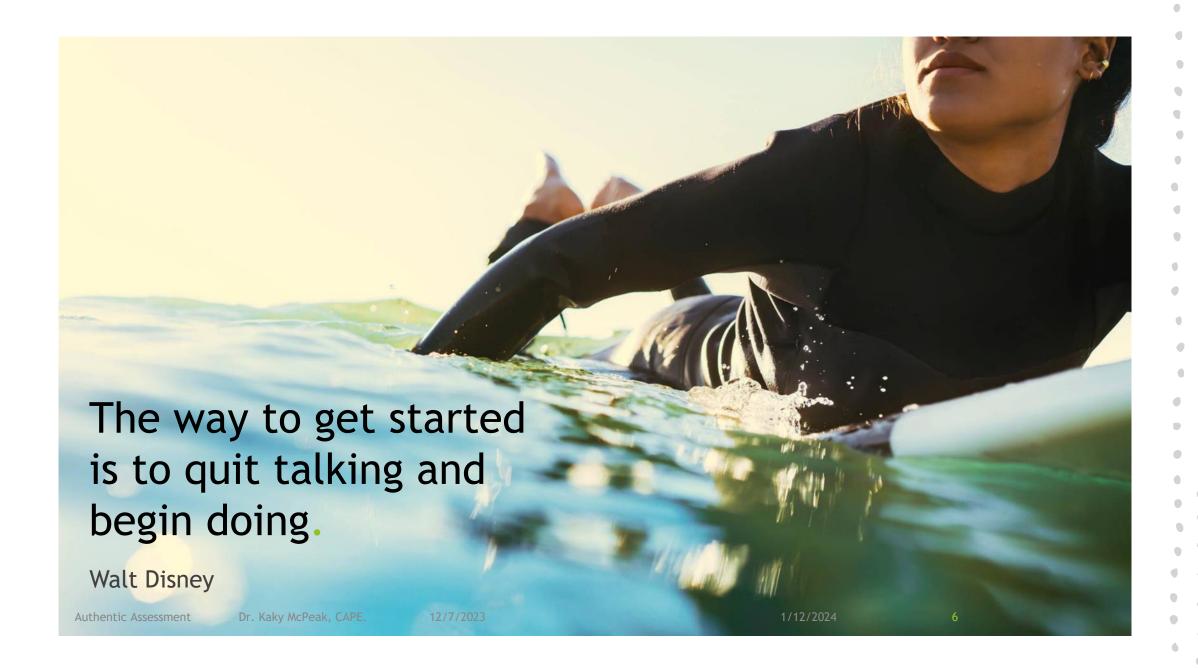


This webinar was created to help detect the common denominators among students with disabilities in order to reach these goals.

The idea here is to:

- ✓ LEARN where to begin, you can't always follow the crowd (IEP Team).
- ✓ AVOID the "perfect storm" mentality. i.e. input opinions from others.
- Provide a comprehensive "moment in time" that you can defend and present to all concerned stakeholders that makes sense.
- ✓ Identify a starting point!
- ✓ Remember, YOU ARE THE CONTENT EXPERT!







Food for Thought:

What is the difference between assessment and evaluations?

Guidance Questions for the Assessment Process and Evaluation for APE.

- > What are the student strengths in PE? (MC, MS, HRF, PSR?)
- How does this child's disability impact participation in PE?
- What about Skill level? Pre-Control or Utilization BSER Framework Doc
- ▶ What are expectations in PE? BSER Doc & GLSE in NC DPI website. Read the clarifying objectives in each area.

https://www.dpi.nc.gov/documents/cte/curriculum/healthfulliv ing/new-standards/healthful-living/physical-education/open

► Motor Fitness? Hand-Eye Foot Eye coordination?

Guidance Questions for the Assessment Process and Evaluation for APE.

- Can UDL/MTSS be utilized so that participation is safe and successful?
- In order for this to happen, do we need to design instruction specifically just for her/him?
- Supplemental Aides and Services?
- ▶ Adult Assistant for redirection, intervention, safety?
- ▶ At the end of the SDI question, there is a box for additional information.
- ▶ Read it: is it blank, or does it have information?

Motor Team Membership



Mr. Jim Shortz

PE Teacher & High School Coach



Ms. B'allay Magnifico

Dance Coordinator & Lifetime Sports



Ms. OTT

Occupational Therapy Grad Student. OTR



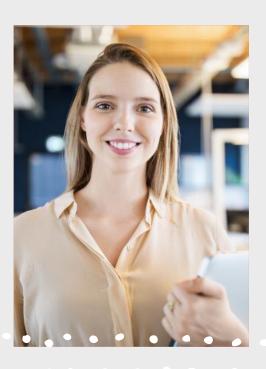
Mr. Patrick
Thomas "PT"

Clinical PT,38 yrs; 1st yr in School PT.

Motor Team Membership









Mr. Jim Shortz

PE Teacher 10 yrs. K-12 in different states

1/12/2024

Ms. Bal Lay

1/2 Elementary & 1/2 Middle PE. Travels, 2 wks each month she's yours.

Ms. OTT

School based OT 12 years experience.

Mr. Patrick
Thomas "PT"

8 yrs school-based PT

ADDITIONAL CONSIDERATIONS FOR EVALUATIONS.

► Physiological:

- ▶ Balance: Simply put it's a distribution of weight, or,
- "to put into a state of equilibrium". Two (2) types: Static and dynamic.
- Symmetry: missing limb segments; hemiplegia (1/2 of the body is affected) triplegic, spastic CP, congenital/acquired amputations,
- Muscular strength and endurance. Components of physical fitness
- Motor Planning: a skill(s) that helps us remember and perform body movements to perform tasks. MP is needed to learn fine and gross motor skills. Think sequencing of a task.

GENERAL GOALS OF APE/PE PROGRAMS

- ► A secondary goal would be to improve the overall fitness levels by restricting, and/or limiting concomitant and sedentary conditions that would impact the health of the individual due to inactivity. (CARE-R-2, 2014).
- What exactly does this mean?
- ▶ Students w/progressive diseases?
- ► Students w/sickle cell disease?
- ► Students with progressive neurological, or musculoskeletal disorders, AD Centronuclear Myopathy (DNM2) or (CNM).

Remember, Prior to the evaluation

Source: www.indstate.edu



Defining the Problem:

"Is there a problem?"

"What is it?"

"How significant?"

Evaluating Progress:

"Did the plan work?"
"What needs to
happen next?"

Analyzing the Problem:
"Why is it

happening?"

Implementing the Plan with Fidelity:

"Are you doing what you said you would do? How do you know?"

Determining
What to Do:

"What shall we do about

1/12/2024

12/7/2023

Additional information box

- ▶ Due to the significant nature of _______'s orthopedic impairment, seizures, the need for frequent rest breaks due to medications that cause early onset fatigue, the IEP team will be requesting an APE evaluation to determine eligibility for APE services.
- motor tasks throughout the day and needs significant modifications and accommodations to the GPE curriculum, the IEP team will be requesting an APE evaluation.
- ▶ **Do yourself a huge favor**, and read the physical therapy report, read the medical information, etc., It's all under "Assessment Summary" under the IEP, under Special Education in ECATS.!!!!!!

1/12/2024

WHERE DO WE START?

What is special education

- ▶ <u>300.39</u> Special education.
- (a) General.
- (1) Special education means SDI, at no cost to the parents, to meet the unique needs of a child with a disability, including—
- (ii) Instruction in physical education.
- (1) At no cost means that all SDI is provided without charge, but does not preclude incidental fees that are normally charged to nondisabled students or their parents as a part of the regular education program.

Let's check the law.

What is physical education?

(2) Physical education means—

- (i) The development of—
- (A) Physical and motor fitness;
- (B) Fundamental motor skills and patterns; and
- (C) Skills in aquatics, dance, and individual and group games and sports (including intramural and lifetime sports); and
- (ii) Includes special physical education, adapted physical education, movement education, and motor development.

- What are observable generic characteristics of a skill?
- And at what level should it be able to be demonstrated?
- ▶ Observable Characteristics of the Generic Levels of Skill Proficiency (Boyce, 2003) (Stanley, 1993).
- ► (Pre-control, control, utilization, proficiency.
- ► Four (4) levels of observable characteristics.
- ▶ Utilized for National Board Certification
- Allows for additional standardization of terms rather than, "decent", "good", a little off",etc.

https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US

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If it is observable, it is measurable, it is a qualitative description; this is key ow

- Category Name Quantitative Descriptors
 - ▶ Pre-Control Levels (</=60%) </= 6 out of 10 times
 - Qualitative Descriptor Narrative
- Pre-control Level (Beginner) (</=60%) Remember this is when the student is attempting a new task at grade level.
- ▶ Kaky is unable to repeat movements in succession; one attempt does not look like another attempt to perform the same movement. She uses extraneous movements that are unnecessary for proficiently performing the skill. Her movements seem awkward and do not approximate grade level expectations to performing the skill correctly when compared to her chronologically aged peers. Occasional correct performances are characterized more by surprise than by expectancy and often are unable to be repeated. And, when Kaky practices with a ball, or another piece of PE equipment, the equipment seems to control her.

Motor Skills

- What part of the brain is associated with motor skills?
- ► The cerebellum is located behind the brains steme While the frontal lobe controls movement, the cerebellum "fine-tunes" this movement.
- ► This area of the brain is responsible for fine motor movement, balance, and the brain's ability to determine limb position.
 - Body Orientation
 - Spatial Orientation
 - Mechanics of skills
- https://slideplayer.com/slide/1529611/
- ▶ The Four (4) Levels of Motor Development

Physiological

General factors that affect movement

- ► Cognition & Intellectual Deficits
- ▶ Vision, Depth Perception, Detached Retinas, Legally Blind.
- Physical Fitness: Cardiovascular Endurance, Muscular Strength and Endurance, & Flexibility(ROM).
- Motor Fitness Components: Specific motor fitness components include:

Agility, Balance, Coordination, Power, Reaction Time, and Speed

Guidance Questions for the SDI Question

- What are the student strengths in PE?
- What about Skill level? Pre-Control or Utilization BSER Framework Doc
- What are needs in PE? BSER Doc
- How does this child's disability impact participation in PE?
- Motor Fitness? Hand-Eye?

 Authentic Assessment Dr. Kaky McPeak, CAPE. 12/7/2023

- Can UDL/MTSS be utilized so that participation is safe and successful?
- In order for this to happen, do we need to design instruction specifically just for her/him?
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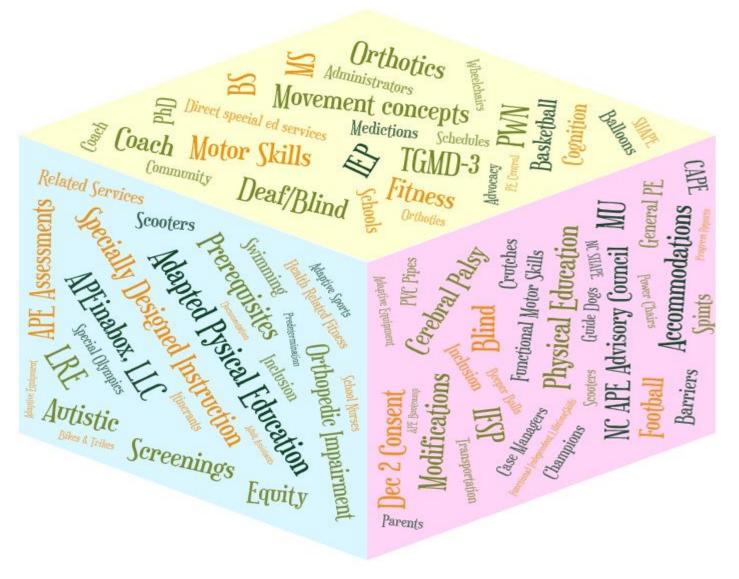
ADDITIONAL CONSIDERATIONS

Motor Planning (continued)

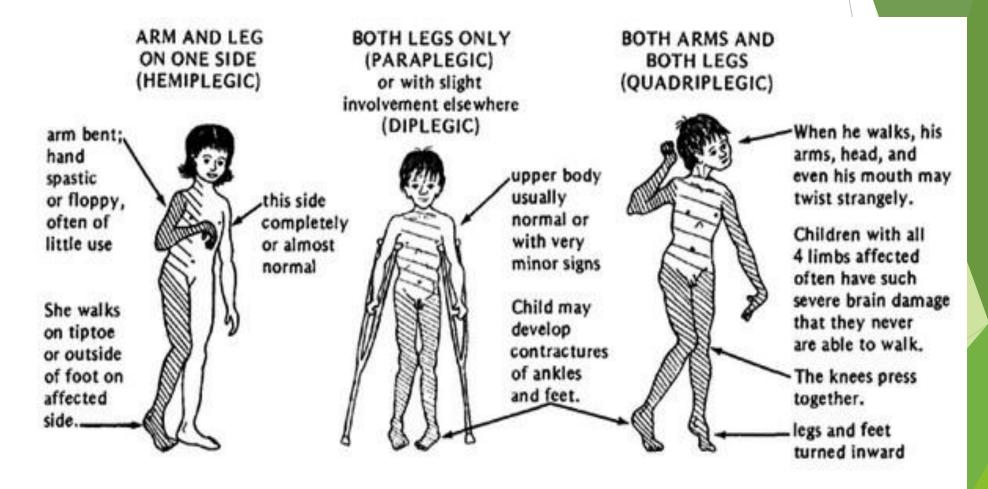
- ▶ There are four (4) steps in motor planning:
- Imagine the task (ideation)- difficult for students with cognitive deficits/visual impairments/information processing considerations.
- Plan the steps to perform the task. (task analysis is difficult. Illustrations are great)
- Carry out the task (execution). Remember: Preparation, execution and follow through phases. Again, Illustrations, videos, lots of practice time/variety.
- Collect feedback and make corrections (adaptations.)
- Provide practice opportunities scaffolding to a wide variety of equipment, skills and in various situations.

- Misalign your musculoskeletal system- Think Kinesiology- Angle of Pull?
- Wear away at your spine, making it more fragile and prone to injury
- Cause neck, shoulder, and back pain, muscular fatigue, creates a negative cycle for participation.
- Decreases flexibility and ROM through all the cardinal planes.
- Affect how well your joints move; chronic, persistent pain, limping, atypical gaits
- Affect your balance and increase your risk of falls, joint fractures, etc.
- Make it harder to digest your food, Make it harder to breathe- decreases the ability to improve cardiovascular activities.
- Limits lifetime recreational and lifetime leisure choices.

ADDITIONAL INFORMATION, SERIOUSLY??!!



Atypical postures



Posture is everything (sitting, standing, lying

Posture is how a person "holds" their body. There are two types:

- **Dynamic posture** is how you hold or position yourself when you are moving (walking, running, or bending over to pick up something)
- Static posture is how you hold or position yourself when you are not moving (sitting, standing, or sleeping, variety of positions for sitting and standing
- How a person stands, sits, walks, or bends over has a significant impact on balance.
- Your spine has three natural curves at your neck,(cervical) mid back (thoracic), and low back (lumbar).
- Correct posture should maintain these curves, but not increase them. Your head should be above your shoulders, and the top of your shoulder should be over the hips, and your hips should be over your heels.

Body, Space, Effort & Relationships (BSER Framework)

BODY COMPONENT

- What the body does. Body Orientation.
- Actions of the body and body parts.
- Activities of the Body
- Body Shapes
- Unexpected Body Segment sizes
- Where is the Center of Mass?
- Does it remain over the Base of support?

SPACE COMPONENT

- Where the body moves.
- Areas Personal/General Space
- Directions







Levels - Low, medium, high

Pathways- straight, curved, zig zag









Extensions: large/small

Effort: Qualities of Movement Objectives

- Balance: Understand the nature of static and dynamic balance and the role of balance in movement.
- Time: Differentiate among speeds and to increase or decrease the speed of movement.
- Force: To be able to create and modify one's force to meet the demands of the task
- Flow: To combine movements smoothly and to perform movements within a restricted time or space.

- Think Motor Fitness Components
- Specific motor fitness components include:
- Agility, Balance, Coordination, Power, Reaction Time, and Speed.
- Motor fitness is sometimes referred to as skillrelated fitness. See also physical fitness.(Webster's Dictionary)
- Some of these you will not be able to change/improve in the student due to their disability and the level of severity of the disability.

Relationships - BSER

To demonstrate an understanding of: the relationship of body parts to one another and the body.

To move effectively relative to other individuals and/or within a group.

To understand the relationship between the body and its parts to objects/equipment/apparatus while stationary and while on the move https://acrobat.adobe.com/link/review ?uri=urn:aaid:scds:US:b9fa0302-3908-363f-b8de-d73a7ffcab59

- There are the students who "FLING" an object the exact same way regardless of the size, weight, or purpose of task.
- These are the students who don't understand that they can use their trunk, arm, shoulder and rotate those parts without using the whole body.
- These are the students who can't "find" their hands when holding equipment.

Movement Concepts: (1/4 of the Healthful Living)

- Problem-solving movement challenges to help students explore and understand their body.
- Improves the ability to adapt and modify movements.
- ▶ Developmentally appropriate approach to physical education, as it meets the needs of the student.
- Develops competence, self-confidence in ability to move, and encourages regular participation in physical activity.

- Non Locomotor Skills:
- The purpose of N-LM is to learn to <u>maintain the center of mass over the base of support</u> while stationary or while moving a part of the body.
- Bending/Stretching; twisting/turning; pushing/pulling; swinging.
- This is a huge task for a lot of our students with disabilities. It goes back to the "basic set" of motor skills that they utilize.
- Disturbing that basic set of skills is the challenge.

Now what?

MOVE Assessment Profile

https://static1.squarespace.com/static/571e218c59827e9ed75e4c02/t/636191ef711f105b7ab4baa3/1667338735415/QuickFacts+2022.pdf

MOVE (Mobility Opportunities Via Education/Experience) is an activity-based program used in homes, schools, day programs and the community. Using a top-down approach, MOVE combines the individuals' present abilities with an instructional process during motivational activities to help the individual improve their mobility skills of sitting, standing, walking, and transitioning – leading to improved health, independence, dignity and inclusion of the individual in the family and community. **MOVE** is a way of life!

Thank you for your time. You are the content expert on the team for PE & APE.

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Authentic Assessment Questions?

