



# Frequently Asked Questions

Many of the questions we receive are addressed in existing documents on this website. These two documents are most likely to answer your questions:

[DRDP \(2015\) Assessment Manual \(https://draccess.org/manual\)](https://draccess.org/manual) – The Introduction and Appendices contain essential information on how to use the DRDP (2015).

[DRDP Assessment Steps & Timeline \(https://draccess.org/timeline\)](https://draccess.org/timeline) – This page contains a chart of the general timelines for submitting DRDP data to the SELPA, the interactive Data Submission Timeline Tutorial, and Timeline Postcard.

If you do not find the answers to your questions in the above documents or in the list below, contact the [Desired Results Access Project \(https://draccess.org/contact.html\)](https://draccess.org/contact.html).

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## The DRDP Assessment

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### What DRDP instruments are used by special education?

The DRDP (2015) is currently in use and it has three views. They are:

- **The Infant-Toddler View:** SED-funded infant-toddler programs use this view. ([DRAccess.org/instrument\\_it](https://draccess.org/instrument_it))
- **The Preschool Fundamental View:** All preschool special education programs use the PS Fundamental View for all children with IEPs. ([DRAccess.org/instrument\\_ps](https://draccess.org/instrument_ps))

### Has the DRDP (2015) been aligned to the California Early Learning Foundations?

Yes, the DRDP (2015) is aligned with the Preschool Learning Foundations and the Infant/Toddler Learning and Development Foundations. It also aligns to the Head Start Child Development and Early Learning Framework and the California Common Core State Standards.

View the correspondence between the DRDP to the Infant/Toddler and Preschool Foundations at [desiredresults.us/drdp-2015-aligned-california-foundations](https://desiredresults.us/drdp-2015-aligned-california-foundations).

## **If a child is transitioning out of early intervention, which view of the instrument is used?**

Use the Infant/Toddler View while the child is receiving early intervention services. The Preschool View is used after the child transitions into a preschool program.

## **Can participation in the assessment be waived if the family doesn't want the child assessed?**

Yes. Families should be informed of the DRDP (2015) assessment and its benefits to teachers and programs as well as to families. Describe the assessment to families as observations of children's skills during typical routines and activities throughout the day to inform instructional planning. However, if a family is still uncomfortable, you may waive the assessment. The SELPA should track these decisions so they know that these are not missing records.

Refer to "[An Overview of the DRDP \(2015\) for Families](https://draccess.org/OverviewOfDRDP2015forFamilies.html)" for a description of the assessment for families as well as a list of the benefits. ([DRAccess.org/OverviewOfDRDP2015forFamilies.html](https://draccess.org/OverviewOfDRDP2015forFamilies.html))

## **On the Information Page, there is a field for special education eligibility. How does this apply to children in Early Start?**

If the LEA is serving children with solely low incidence disabilities and the child's information is reported to the California Department of Education, you must use the disability category from the IFSP. If the LEA is serving the child jointly with the regional center, the LEA still records the disability category. If the child is served under a vendor contract with the regional center, the DRDP (2015) is not used.

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# **Rating the Measures**

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## **Why is Building Earlier the latest level for infants and toddlers?**

The earlier levels of the DRDP (2015) through Building Earlier (which includes early preschool) describe the development of infants and toddlers sufficiently to plan their learning activities. The later levels are generally not observed in children of this age.

## **What is marked if the child is not yet at the earliest level?**

On full continuum measures or Early Development measures, mark the Responding Earlier level if you do not observe any later levels. On Later Development measures, you may mark, "Child is not yet at the earliest developmental level on this measure." Even if you have not observed the earliest level, mark it if you do not see any of the later levels. Please refer to the guidance under "Additional Rating Options on page Intro-8 in the Assessment Manual."

## **If the child's level of mastery is beyond the latest level of mastery that can be rated, how is the measure rated?**

Mark the latest level. If this is a full continuum measure in the Infant/Toddler View, mark the latest level that can be rated for infants and toddlers and also mark "Emerging to the next developmental level." Please refer to rating guidance on Emerging on page Intro-8 in the assessment manual.

## **What if interpreters are not available to assist assessment in the child's home language?**

Check with your administrator about obtaining these services. Additionally, many measures of the DRDP (2015) can be rated by observing the child.

## **If a child and family use ASL, are the ELD measures used?**

Check with your administrator about obtaining these services. Additionally, many measures of the DRDP (2015) can be rated by observing the child.

### **If a child and family use ASL, are the ELD measures used?**

If the child is Deaf or Hard of Hearing and not learning a spoken language, mark “No” and do not complete the ELD measures.

### **How would you rate PD-HLTH 7 Personal Care Routines: Feeding if a child is fed via a tube?**

Consider the first few levels carefully. Children with feeding tubes may react to the feeding experience as described in Responding Earlier, and possibly at the next few levels. Some children may also be learning to eat orally and may progress further on this measure. Rate the latest level of mastery.

### **How do you rate the measures if a child demonstrates regression after a summer break?**

Rate the measures to reflect the child’s current level of mastery.

### **If you rate a conditional measure in the fall, do you need to do it again in the spring?**

Yes, rate the measure again in the spring. All conditional measures are required for special education except for the ELD measures.

### **How do I complete the DRDP (2015) if a child is receiving home and hospital services or has limited access to services?**

All eligible children with IFSPs and IEPs must be assessed with the DRDP (2015), regardless of setting. If sufficient information can’t be obtained through direct observation, contact family members and other team members. If the child is not receiving services for an extended period of time, then the Unable to Rate option may be used. Refer to rating guidance in the manual pp. Intro-7 through Intro-9.

### **Can we use observations collected for other tools to help inform how we complete the DRDP (2015)?**

You can use naturalistic observations that were gathered to complete other assessment instruments, but you cannot use actual scores from any other assessment instrument to inform DRDP (2015) ratings.

## **Children Assessed**

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### **If a child attends a program for only a few days per week, do all of the items need to be rated?**

Yes, all children with IFSPs or IEPs are assessed with the full DRDP (2015) regardless of type or level of service or educational setting.

### **If an infant or toddler is dually enrolled in a LEA and a regional center program and is reported to the California Department of Education, is the DRDP (2015) used?**

Yes, if a child is reported to the California Department of Education, the child should be assessed with the DRDP (2015) Infant/Toddler View.

### **Is the DRDP (2015) used in vendored early intervention programs?**

No, the DRDP (2015) is not used by infant programs vendored by the regional center.

### **Are five-year old children with disabilities included in the DRDP (2015)?**

Yes, if a child has a preschool IEP and has not yet entered transitional kindergarten or kindergarten. The grade assignment in CALPADS may also determine which instrument to use.

## **For a child who has a signed IEP but who has not yet begun to receive services during the current assessment period, is the special education provider required to complete a DRDP (2015) for this child?**

Services are to start as soon as possible after the IEP is signed, but if for some reason a child has not started receiving services by November 1 or April 1, then a DRDP (2015) is not required until the following assessment period.

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## **Entry Dates for Fall and Spring Assessments**

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### **Who will assess and enter the data for a child who turns five in November? Does the new teacher need to submit a DRDP?**

If the child is receiving preschool services as prior to November 1, the preschool special education service provider will complete the assessment for fall. If the child has transitioned to the next program by November 1, then a DRDP is not required.

### **If a child transfers from another program and enters my program in December, am I responsible to complete and submit the fall assessment?**

No, wait until spring to submit a DRDP for the child.

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## **Personnel Who Complete the DRDP (2015)**

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### **Will Head Start use the DRDP (2015)?**

State-funded Head Start programs are required to use the DRDP (2015).

### **Does a service provider who sees a child for less than 10 hours per week need to complete a DRDP (2015) for this child?**

All children with IFSPs or IEPs are assessed regardless of type or level of service and regardless of educational setting.

### **Who should complete the assessment for a child who attends a private preschool or is served by another SELPA?**

The primary service provider should complete the assessment. If the child attends private preschool, the SELPA should designate a district representative to work with the program to assure that the assessment is completed.

### **If an SLP or other DIS specialist sees a child for only one hour a week for therapy and has limited opportunities to observe the child and he or she is the only service provider, how should the assessment be completed?**

Family observations are valid and reliable and are an important part of completing the DRDP, particularly for practitioners who may not have frequent opportunities to observe the child participating in a variety of routines and activities. The resources on the "[Leading Focused Conversations with Families](https://draccess.org/leadingconversations)" page ([DRAccess.org/leadingconversations](https://draccess.org/leadingconversations)) will assist in planning these conversations. See also [the document on the role of family observations in the DRDP \(2015\)](https://draccess.org/RoleOfFamilyObsv.html). ([DRAccess.org/RoleOfFamilyObsv.html](https://draccess.org/RoleOfFamilyObsv.html))

## Collaboration to Complete the DRDP (2015)

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### Who is responsible for completing the DRDP (2015) if a child is enrolled in state preschool or Head Start and also receives special education services?

The preschool teacher and the special education primary service provider should complete the assessment together. Meet with your state preschool or Head Start partners to outline an assessment plan. Coordinate calendars to meet and finalize the assessment together. Both the preschool teacher and the primary service provider are required to submit the DRDP Rating Records to their respective data systems. Refer to DRDP (2015) Assessment Manual Appendices A and F.

Observations can be gathered via conversations with other teachers and service providers, and with families. Speech and Language Pathologists should talk with their administrators about adding time twice a year dedicated to the assessment.

### What should we do when the Early Head Start, Head Start, or state preschool teacher assign a significantly different ratings to a measure?

Work as a team and 1) Go back to the descriptors of the developmental levels to ensure a common understanding; 2) Review the observations and other documentation gathered together; 3) Make sure that adaptations were in place during observations; and 4) come to consensus on a rating.

### How can we work with families to complete the assessment?

Completing the DRDP (2015) is the responsibility of the primary special education service provider. However, it is recommended practice to have conversations with the family to gather information. Arrange to make home visits to collect observations, talk with the family and other service providers, and/or use family videos (with written consent) to complete the instrument. Refer to the resources on [Leading Focused Conversations with Families](#). ([DRAccess.org/leadingconversations](http://DRAccess.org/leadingconversations))

### What strategies should be used if a family's perspective on their child's development differs from the teacher's?

Talk with the family, focusing on daily routines and activities and be specific about what you asking them to describe. Family input is valid and reliable with shared understanding. Families may also share information in various ways, such as home videos. Using the documentation gathered, including family input, the teacher is responsible for rating the measures. Refer to the resources on [Leading Focused Conversations with Families](#). ([DRAccess.org/leadingconversations](http://DRAccess.org/leadingconversations))

## Adaptations

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### When we change adaptations, do we need to amend the IEP?

No, an amendment is not required because selecting adaptations is a dynamic process. Adaptations may be added or refined many times between IFSP/IEP meetings.

### Is American Sign Language (ASL) considered an adaptation?

If ASL is the home or first language for a child, it is not considered an adaptation. If ASL is used as a bridge to spoken language, it is considered an adaptation.

### Are visual schedules considered a communication or a visual support adaptation?

Visual support refers to adaptations for children with visual impairments.

## Data Submission

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### Where is DRDP (2015) data submitted for special education?

The special educator or primary service provider completing the assessment submits DRDP (2015) data for children with IFSPs and IEPs to the SELPA, according to its instructions. The SELPA submits DRDP data to the California Department of Education's Special Education Division.

### If you are collaborating with a general education teacher in an inclusive preschool setting, when should the DRDP be completed?

General education teachers are required to assess and submit their data 60 days from the start of school. Special education and related service providers can collect the data in the same time period, make a copy for their records and submit the DRDP (2015) results on the timeline required by the SELPA. If the due dates do not overlap, the special educator can obtain a copy of the Rating Record submitted by the general education teacher, update it, and provide the teacher with a copy.

### Do DRDP (2015) assessments need to be conducted for an individual child exactly six months apart?

Assessments should be conducted for an individual child six months apart to better measure progress.

### How long do we keep DRDP records?

Check with your administrator as to how long records are stored. Place a copy of the DRDP Rating Record in the child's cumulative file.

## Training in DR Access Learn

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### Can my administrative assistant register me for the training?

No. Each provider must register themselves by creating an account on the Learning Center.

### How will my administrator know I completed the training?

The Desired Results Access Project will send a list of participants to each SELPA director twice a year, who will then contact administrators regarding staff completion of the training.

### What happens if I do not pass the mandatory training?

Many assessment instruments require training on an assessment protocol to ensure fidelity. Special educators must complete training to use the DRDP as intended. If assessors do not successfully complete the training, they should review the "[Essential Steps in Using the DRDP for Special Education](https://draccess.org/sites/default/files/pdfs/EssentialStepsUsingDRDP.pdf)" ([DRAccess.org/sites/default/files/pdfs/EssentialStepsUsingDRDP.pdf](https://draccess.org/sites/default/files/pdfs/EssentialStepsUsingDRDP.pdf)) to determine if and where more support is needed. Assessors are encouraged to meet with their supervisors for further support. Online videos are available in the Desired Results Access Project's [Video Library](https://draccess.org/videolibrary) ([DRAccess.org/videolibrary](https://draccess.org/videolibrary)) for observation practice. Assessors who do not successfully complete training are still required to complete the DRDP (2015) for all eligible children.

## Technology Help and Resources

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This section provides you with instructions for accessing the materials on the Desired Results Access Project's website. Should you have additional questions, please contact Tom Tranfaglia [tom.tranfaglia@draccess.org](mailto:tom.tranfaglia@draccess.org)

## What are the differences between the Desired Results Access Project's various websites?

[Draccess.org](http://Draccess.org) – the main website of the Desired Results Access Project that provides information and resources to support special educators, administrators, and families of children with IFSPs and IEPs in implementing the California Department of Education's Desired Results Developmental Profile (DRDP) (2015).

[DRAccessReports.org](http://DRAccessReports.org) – this reports system is a resource for special educators, administrators, and families to create reports from DRDP (2015) results.

[Indicator7Reports.org](http://Indicator7Reports.org) – the data for Indicator 7: Child Outcomes for the that is sent to of the Office of Special Education Programs (OSEP) for the State Performance Plan (SPP).

[DRAccessLearn.org](http://DRAccessLearn.org) – the Learning Center provides professional development resources that support special educators, administrators, and families in implementing the California Department of Education's Desired Results Developmental Profile (DRDP) (2015).

## Is there an app available for the DRDP (2015)?

The Desired Results Project for Children and Families offers a DRDP (2015) app for storing documentation that can be accessed by special educators. (<https://desiredresults.us/drdp-portfolio-app>)

## What is RSS?

RSS, an abbreviation of Rich Site Summary or Really Simple Syndication, is a way to distribute content. A "feed" includes summarized text and other information about updated content. It's a way to easily stay informed about information available on our website.

## How do I access and use your RSS Feed?

You can use this URL to subscribe with a feed reader or RSS aggregator: [DRAccess.org/rss.xml](http://DRAccess.org/rss.xml) Each RSS feed reader is different and has a different process to subscribe to feeds. The instructions are usually clear. The process is likely:

- Click on the "Add Feed" button.
- Paste the URL [DRAccess.org/rss.xml](http://DRAccess.org/rss.xml) into your feed reader.