

## V—FUNCTIONAL EXPECTANCY LEVELS FOR THE PROGRESS ASSESSMENT CHART OF SOCIAL AND PERSONAL DEVELOPMENT\*

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The **Progress Assessment Chart of Social and Personal Development (P-A-C)** (Gunzburg, 1974) provides data on the developmental status of mentally retarded children, adolescents and adults. Some of the particulars of the P-A-C's usefulness in planning, implementing and evaluating individualised programmes of teaching, training and treatment for each retarded student at Lakemary Centre for Exceptional Children, Paola, Kansas (U.S.A.), were touched upon briefly by the first author and several colleagues early last year (Throne *et al*, 1977). The emphasis in that report was on how individualised programming for Lakemary's students might be furthered by the internal service delivery system installed in 1975, called **Lakemary Centre's Unified Programming Procedures (UPP)** (Throne *et al*, 1977).

The P-A-C is the chief assessment instrument of the UPP. One reason for this is that, in line with the "developmental model" (NARC, 1972), we are committed at Lakemary to the proposition "that the development of all human beings . . . is susceptible . . . to environmental intervention" (Throne *et al*, 1977, p. 14). Furthermore, it is our belief that the chief justification for placing a student in Lakemary's residential or day care (educational) programme is to work purposefully toward maximisation of development of the retarded as individuals (Crosby, 1976). Hence the UPP. Hence, also, its developmental guideline, the P-A-C.

One way to assess the development of the retarded is in terms of P-A-C expectancy levels. These are defined by Gunzburg as "average levels of performance obtained by groups of mentally handicapped people of similar age and intelligence" (Gunzburg, 1977, p. 22). Gunzburg calculates expectancy levels by adding the number of a given cluster of P-A-C performance items achieved by such a group—that is, retarded individuals of similar age and intelligence—and dividing the sum by the number of individuals in the group to obtain the group's mean level for the performance items in question. For example, if 15 retarded individuals of similar age and intelligence score 60 successes on performance items under the heading, "Table Habits," the group's average performance level for this skill area is four. This is their expectancy level—and that of every individual in the group—for "Table Habits."

At Lakemary, we deviate from Gunzburg's method for calculating P-A-C expectancy levels in that, **rather than deducing them statistically after the fact, we induce them empirically before the fact.** That is, we do not divide the number of

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\*Based upon: Throne, J. M., Semrad, R. L. and Little, R.E. Functional expectancy levels for the *Progress Assessment Chart of Social and Personal Development*. In P. Mittler (Ed.), *Research to practice in mental retardation: Proceedings of the Fourth Congress of the International Association for the Scientific Study of Mental Deficiency. Volume 2*. Baltimore: University Park Press, 1977, 39-42.

performances a group achieves by the number of the individuals in the group to obtain the group mean for a given skill area. Instead, we group individuals according to the percentages of individuals achieving mastery of P-A-C performance items, for purposes of teaching, training or treatment. Gunzburg "expects" retarded individuals of similar age and intelligence to perform at the mean group level in a given skill area (e.g., "Table Habits"). We "expect" them to perform at levels limited only by our ingenuity in enhancing their development in that skill area, given our resources.

What we mean may be illustrated by our approach to calculating P-A-C expectancy levels in our residential groupings. Teaching, training and treatment of P-A-C objectives are an integral part of the job of every child care worker (attendant) in Lakemary's residential programme. We have P-A-C data on the students in each of our two residential units. Each unit has 18 males and 18 females. One unit houses students aged 3 to 12, the other, students aged 11 to 16. (There is some overlap in ages between units.) Sub-units in each residence, corresponding to semi-private bedrooms, are where from two to four students each, sleep.

P-A-C expectancy levels have been calculated for the students in each residential unit and sub-unit. The results do not denote the mean performance level on P-A-C objectives for the students in each unit and sub-unit, but rather the successful performances of 90% of the students in each unit and sub-unit. The results are displayed in composite form on charts. For example, if 90% of the students in a residential unit or sub-unit demonstrate mastery of a particular P-A-C skill, that skill is added to the composite residential expectancy level for that group. For each residential unit as a whole, this means that 32 students must successfully perform on the item for it to be included on the unit's composite chart (because  $.90 \times 36 = 32.40$ ). For a sub-unit of four students, the number of students passing the item must be four ( $.90 \times 4 = 3.60$ ), etc. Of course, these figures are only benchmarks; they give us objective points from which, out of administrative or programmatic considerations, we may, and do, depart.

The reason for the high cut-off point is that it is desirable in the close quarters of residential living for groups and sub-groups to be as homogeneous as possible with respect to the P-A-C objectives on which they are taught, trained and treated. It is more useful to know the predominating P-A-C performance levels of the students residing in the units and sub-units than to know how the average individual in them performs. This is true not only for purposes of precise P-A-C programming for the students already in residence, but for deciding whether or not a child should be admitted to a certain residential unit or sub-unit on the basis of his or her P-A-C scores.

Our residential and day care students are commingled in our educational programme (classrooms). The P-A-C expectancy levels in education are equally as high as in residence. But the day students bring with them a possibly different set of P-A-C skills when compared with the residential students on those skills. Therefore, the expectancy levels for groups of residential students do not apply to the groupings in education. In addition, since the educational groupings tend to address somewhat different types of skills than the residential groupings, the residential expectancy levels cannot be transferred to the new settings. Different expectancy levels for each educational sub-unit (grouping) are therefore prepared. (We do not chart composite expectancy levels for the educational programme as a whole, nor for the residential programme as a whole; there would seem to be no good reason for doing so.)

To this end, P-A-C data are collected for each of our eight classroom groupings plus our pre-school. The classrooms are grouped with no more than a four-year

chronological age span within each classroom, each containing from eight to 15 students. As in the residences, the expectancy levels for groups are compiled by obtaining information from each student's P-A-C survey, conducted annually.

In each classroom grouping there may be as few as one but as many as four P-A-C expectancy levels calculated. For a given skill, it is useful for the teacher to know which percentage of children in several sub-groups within the classroom may possess the skill, so as to plan instruction for these sub-groups accordingly and to assign new students to the sub-groups appropriately. This allows for more individualised assessment and instruction for each student.

In the pre-school, where all indices of development (chronological, intellectual, emotional, physical, etc.) tend to range more widely than in the classroom groupings in the school proper, P-A-C expectancy levels for several types of pre-school populations are obtained for determining optimal P-A-C programming goals for these children and optimal placements within the pre-school for prospective new admissions.

In conclusion, P-A-C expectancy levels, as calculated at Lakemary, enable us to group students in the first place, and assign new students to groupings in the second place, in both the residential and educational units and sub-units so as to "maximise their development" (Crosby, 1976). Help in fulfilling the highest (as opposed to merely average) expectations for our students is thus the chief function that those P-A-C expectancy levels serve at Lakemary.

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