

Since the parents and the preschool teacher (if the child is concurrently enrolled in a regular preschool program) spend a lot of time with the child and observe the aberrant behavior where problems actually occur (cf. Graubard, 1973), it is important that they attend conferences with the staff of the special program in order to exchange goals and experiences. The professionals in the special program can also be used as consultants in the regular program (cf. Fish, Garfunkel, Johannet & Coolidge, 1967; Schultz, Hirshoren, Manton & Henderson, 1971).

Ongoing diagnosis and research. Diagnosis should not stop while the child is in the program. Ongoing diagnosis helps the child to get the most appropriate help at a certain moment because his needs are changing. One can follow his progress better and find out when mainstreaming can start. Melcer et al. (1970) point out that more accurate diagnosis can be made by extended observation of the child in a school setting. Diagnosis which are made at a screening-center after one or a few hours of observation lead to the drawback of labeling. "It often appears impossible to make the diagnosis on a superficial contact....in a more relaxed environment, such as a nursery school, these difficulties can be overcome in most cases"(Havelkova, 1968, p.327). The use of videotapes make observation possible for the teacher or therapist, who can concentrate on his task knowing he can observe later the