

Recommended Practices: EC Recommended Practices





SSIP Interactive Institutes

Albuquerque, NM; April 29-30, 2015
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Purpose

- Introduce the Recommended Practices (RPs) recently updated by the Division of Early Childhood of the Council for Exceptional Children (DEC)
- Discuss the application of the DEC RPs in improving practices within states' SSIPs
- Discuss the use of tools measuring the use of RPs in SSIP evaluation

Updating the Recommended Practices

- For over 18 months, a 13-member Recommended Practices Commission appointed by DEC guided the revisions process with the support of the ECTA Center.
- The primary goal of the RPs is to inform and improve the quality of services provided to young children with or at risk for disabilities or delays and their families.

Parameters

- Birth-5 not limited to those eligible for *IDEA* services
- “Essential,” “biggest bang,” or highest leverage/impact practices
- Observable, in active voice
- Not disability specific
- Can be delivered in all settings, including natural/inclusive environments
- Should build on, not duplicate, standards for typical early childhood settings (e.g., DAP)

Parameters

- Population: young children, birth-5 (through kindergarten), who have or are at risk for developmental delays and disabilities; not limited to those eligible for *IDEA* services (e.g., children with severe challenging behavior)
- Practices represent the “essential,” “biggest bang,” or highest leverage/impact practices
- Practices represent the breadth of the topic

More Parameters

- Practices are observable.
- Practices are written in active voice.
- Practices are not disability specific.
- Practices can be delivered in all settings, including natural/inclusive environments.
- Practices should build on, but not duplicate, standards for typical early childhood settings (e.g., DAP).

Practice, Practitioner, Research-based Practices

Topic Areas

1. Leadership
2. Assessment
3. Environment
4. Family
5. Instruction
6. Interaction
7. Teaming and Collaboration
8. Transition

DEC Recommended Practices

- DEC initiative to bridge the gap between research and practice
- Provide guidance to practitioners & families about the most effective ways to improve learning outcomes & promote development of young children (0-5 yrs) who have or are at risk for developmental delays or disabilities
- Used by individuals across a variety of early childhood settings

Assessment (11)

- A1. Practitioners work together with the family to identify family preferences for assessment processes.
- A3. Practitioners use assessment materials and strategies that are appropriate for the child's age and level of development and accommodate the child's sensory, physical, communication, cultural, linguistic, social, and emotional characteristics.

Environment (6)

- E1. Practitioners provide services and supports in natural and inclusive environments during daily routines and activities to promote the child's access to and participation in learning experiences.
- E4. Practitioners work with families and other adults to identify each child's needs for assistive technology to promote access to and participation in learning experiences.

Family (10)

- F3. Practitioners are responsive to the family's concerns, priorities, and changing life circumstances.
- F5. Practitioners support family functioning, promote family confidence and competence, and strengthen family-child relationships by acting in ways that recognize and build on family strengths and capacities.

Instruction (13)

- INS4. Practitioners plan for and provide the level of support, accommodations, and adaptations needed for the child to access, participate, and learn within and across activities and routines.
- INS13. Practitioners use coaching or consultation strategies with primary caregivers or other adults to facilitate positive adult-child interactions and instruction intentionally designed to promote child learning and development.

Interaction (5)

- INT2. Practitioners promote the child's social development by encouraging the child to initiate or sustain positive interactions with other children and adults during routines and activities through modeling, teaching, feedback, or other types of guided support.
- INT5. Practitioners promote the child's problem-solving behavior by observing, interpreting, and scaffolding in response to the child's growing level of autonomy and self-regulation.

Teaming and Collaboration (5)

- TC1. Practitioners representing multiple disciplines and families work together as a team to plan and implement supports and services to meet the unique needs of each child and family.
- TC5. Practitioners and families may collaborate with each other to identify one practitioner from the team who serves as the primary liaison between the family and other team members based on child and family priorities and needs.

Transition (2)

- TR1. Practitioners in sending and receiving programs exchange information before, during, and after transition about practices most likely to support the child's successful adjustment and positive outcomes.
- TR2. Practitioners use a variety of planned and timely strategies with the child and family before, during, and after the transition to support successful adjustment and positive outcomes for both the child and family.

Supporting Implementation Through Product Development

ECTA is collaborating with DEC and other early childhood projects (DASY, ECPC, IRIS) to develop products that support and increase their implementation and widespread use for multiple audiences. Products may include:

- Practice guides
- Assessments
- Videos
- Checklists
- Modules

Practice Guides for Practitioners and Families

- Explain the importance of practices
- Illustrate practices with vignettes and videos
- How to's
- You'll know it's working when
- Links to resources

Social Games

Adult-Child Interaction

When infants begin showing interest in their parents and other adults, the time is right to play social games. Social games are back-and-forth, your-turn/my-turn infant-adult play accompanied by short rhymes or songs that engage infants in playful interactions. Some of the results of playing social games with your child are active child participation, lots of playful bouts of back-and-forth communication, and bunches of smiles and laughter. Enjoy!

[Click to watch a video of this Learning Way](#)

Learning Way: Joining In

- **Begin by watching your child, paying special attention to things that appear interesting to her.** What kinds of things make your child smile or coo? If she seems interested in looking at your face or hearing your voice, she may enjoy the game of "Peek-a-boo."
- Peek-a-boo is played by covering the baby's eyes with a soft cloth and asking "Where is ____?" Then remove the cloth and exclaim, "Peek-a-boo! I see you!" Notice your child's response. She might coo, smile, make eye contact, kick her legs, or do something else that tells you she likes the game. **Follow your child's lead** by continuing the game based on her response. Cover baby's eyes and **wait for her to do something** to tell you she wants you to pull the cloth from her eyes. When the baby coos, moves her arm, or uses any other behavior that is telling you to continue, **respond immediately** by pulling the cloth from her eyes and saying "Peek-a-boo! I see you!"
- "So Big" is another engaging social game. Gently stretch the baby's arms above his head while saying, "How big is ____? SO BIG!" Then kiss or tickle his tummy or neck. Once you have played the game two or three times and know the baby likes it, **try waiting a few seconds before lifting his arms again.** If he moves his arms, coos, smiles, waves his hands, or uses another particular behavior, assume that he is telling you to do it again and **respond promptly.** When you wait for your child to respond, you are teaching **how to take turns**, and he may begin to learn that **his behavior gets you to respond with the desired consequence.** In other words: "When I wiggle, I get Daddy to play our tummy game!"
- If you play social games often and begin to notice your child is not as excited as before, you may want to add **something new**—such as a new challenge—to a game.
- Keep your games fun and simple. Smiles and laughter are important too!



A Quick Peek

Andy, 3 months old, and his father have found a fun way to play Peek-a-Boo. When Andy wakes up after sleeping, Dad hides behind Andy's favorite blanket and calls to his son: "Where's Andy? Where's Andy?" Hearing his father's voice, Andy starts cooing and wiggling with excitement. As soon as Andy "trails" back, Dad pops his head from behind the blanket and says, "Peek-a-boo! I see you!" Then Dad hides and the game begins again. Andy looks to the right and then to the left to see where his dad will appear next.

You'll know it's working if ...

- The infant tries to start a social game.
- The infant smiles or laughs when the adult responds to the child's behavior
- The infant seems to understand how a game is played

For more ideas, ask a home visitor, teacher, early interventionist, therapist, or another experienced parent. [Click here for a free booklet full of tap game ideas from Pierce County Library system of Tacoma, WA.](#)

ECTA Center Early Childhood Technical Assistance Center
www.ectacenter.org

Checklists for Practitioners and PD

INT-1 3-30-15

DEC Recommended Practices Topic Area: **INTERACTION**

Adult-Child Interaction Checklist

This checklist includes the kinds of adult (parent or practitioner) behavior that can be used to engage a child in adult-child interactive episodes to promote and support child competence. The main focus of the practice is responding contingently to a child's behavior to elicit or maintain child interactions with an adult during everyday activities and play. Adult contingent responsiveness is characterized by sensitive, prompt, and appropriate amount of adult behavior to maintain and not interrupt child interactions.

The checklist can be used to develop a plan to use the practice with a child or to promote a parent or practitioner's use of the practice. It also can be used for a self-evaluation to determine whether the different practice characteristics were part of using the practice with a child or promoting a parent's or practitioner's use of the practice.

Please indicate which of the practice characteristics were able to be used as part of interactions with a child	Not At All	Some	A Lot
1. Observe the child's participation in everyday activities and social play (INT 1, 2, 3, 4, 5)			
2. Identify the focus of the child's attention or engagement (e.g., child interests) (INT 2, 3)			
3. Follow the child's lead and his or her interests or preferences (INT 2, 4)			
4. Interpret the child's behavior and responses as an intent to interact or communicate with you (INT 1, 5)			
5. Respond contingently to the child's behavior (i.e., respond in a way that maintains a child's interactions) (INT 1, 3)			
6. Enter into the child's play or interactions to encourage your turn-my turn play (INT 4)			
7. Encourage the child to try new things (behavior elaborations) through modeling, expansions, or other types of guided support (INT 2, 4)			

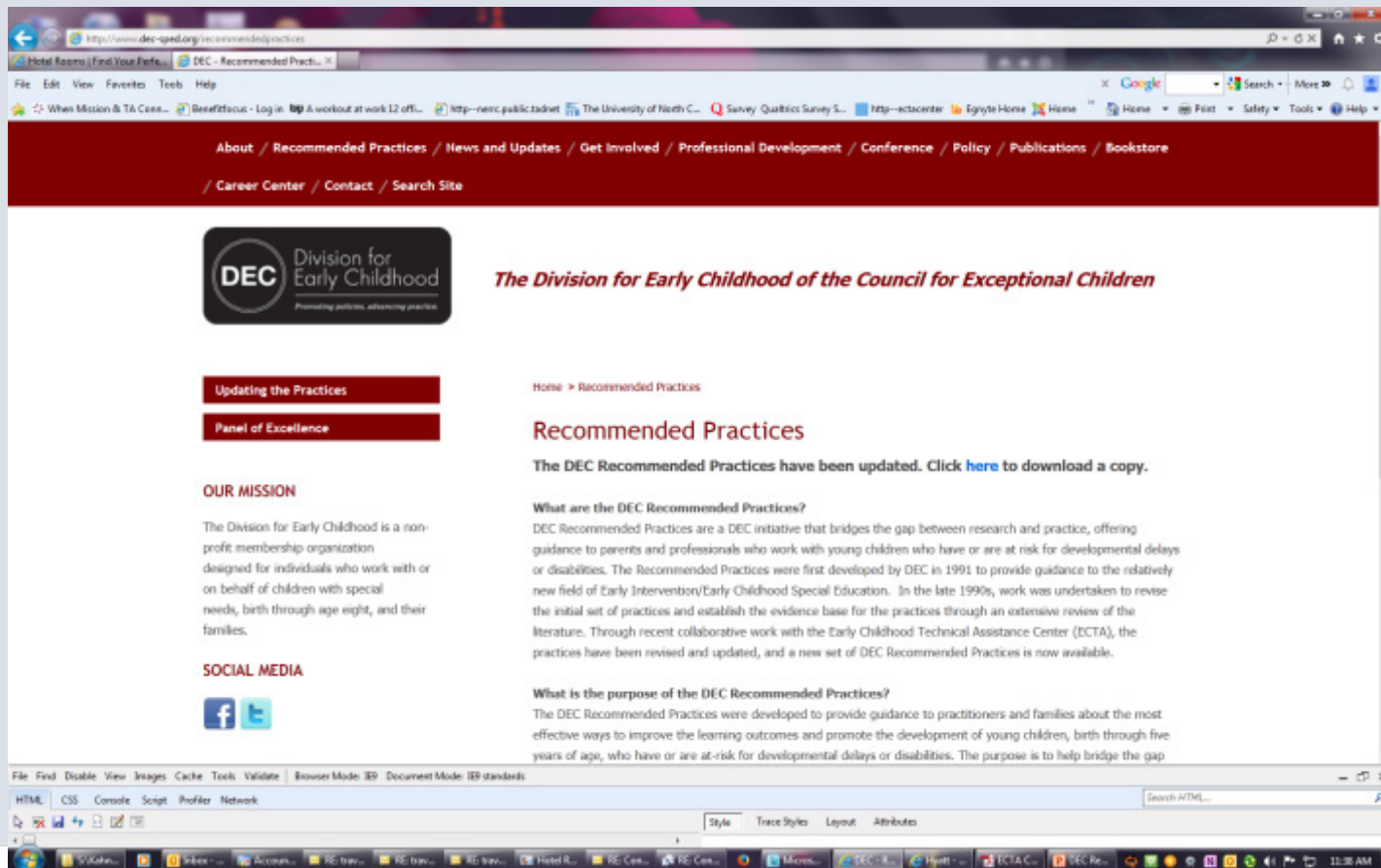
ECTA Center

www.ectacenter.org

- Analysis of key features and components of DEC RPs by topic
- Sub-topic conceptual clusters
- Practice characteristics = *checklist items*

Where you can find them

- <http://www.decrecpractices.org/>
- <http://www.dec-sped.org/recommendedpractices>



Group Discussion

- Has anyone used the DEC RPs in their SSIP work to
 - Collect data or stimulate stakeholder discussion of current status of provider practices?
 - Determine needs for changes/ improvements in practices?
 - Measure changes/ improvements in provider practices?
- How might you do so?

Resources/Tools

- DEC Recommended Practices and Resources
 - <http://www.dec-sped.org/recommendedpractices>
 - <http://decrecpractices.org/>
 - <http://ectacenter.org>

For More Information



Visit the IDC website

<http://ideadata.org/>



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