Child Interventions

Outcomes for the Transdisciplinary Interventions Competency

- Define and describe transdisciplinary interventions
- Identify the goal of various types of child interventions
- Describe adaptation and assistive technology interventions
- Promote child’s participation and learning in family-selected activities and routines in family’s natural environments;
The Participation-Based Approach

- Learning from caregivers about activities and routines to identify what is going well and not going well;
- Writing IFSP outcomes that are centered on the children’s participation;
- Using child intervention strategies that teach caregivers to promote their child’s participation & learning;
- Teaching caregivers
- Monitoring progress in achieving the IFSP outcomes

What is the difference between **skill performance** and **participation**?
Skill performance means ---

- Ability to do something well
- Competence
- Excellence in execution

Participation Means --the fact of taking part.
Children are included when they are able to participate in typical activities and routines.

Name the routine that providers most frequently use with infants and toddlers?
What are the 2 most frequent routines that caregivers do with infants and toddlers?

So - how do we ensure participation for each child?

Embed adaptation & Assistive Technology (AT) interventions into Activities & Routines
**First Step: Assess Activity & Routine Participation**

- What environments or settings?
- What activities & routines?
- Who are the “first hand” reporters?
- How do early intervention, special education, related services personnel get information from the “first hand” people?

**Ask about Activities & Routines**

- Ask families or caregivers
- Ask child caregivers
- Observe

**Find out about Adult Perceptions of Children’s Functional Skills**

- Communication
- Socialization
- Getting Around
- Using arms and hands
Caregiver Assessment of Activities & Routines

**DIRECTIONS FOR THE CAREGIVER ASSESSMENT AS AN INTERVIEW/CONVERSATION:**

1. Ask the caregiver open ended questions about each activity/routine. For example, start by saying "tell me about bathtime and how your child participates during bathtime." Follow up by asking additional questions so that you gain an understanding of what the routine or activity looks like. Then ask the caregiver to rate the child’s participation in terms of the caregiver’s expectations (e.g., exceeds, meets, occasionally meets, does not meet). If you wish, you may ask the caregiver about how satisfied they are with the activity/routine.

2. Ask the caregiver to rate their child’s use of functional skills (e.g., socializing, communicating) within activities and routines and their satisfaction with the child’s abilities. You are not trying to find out about the child’s deficit (e.g., speech) but rather the extent to which problems with speech interfere with a child’s participation.

3. Identify any routines that may not be going well (so that you can help families make them go better). Identify routines that are positive for families/children as these will provide a context in which to show families how to teach their children identified skills.

<table>
<thead>
<tr>
<th>ROUTINE/ACTIVITY</th>
<th>EXPECTATIONS</th>
<th>SATISFACTION</th>
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<tbody>
<tr>
<td></td>
<td>Exceeds</td>
<td>Meets</td>
</tr>
<tr>
<td>BATHTIME</td>
<td>□</td>
<td>□</td>
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<tr>
<td>MORNING ROUTINE (getting up, getting dressed, etc.)</td>
<td>□</td>
<td>□</td>
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<tr>
<td>NIGHT TIME (getting ready for bed, going to bed, sleeping)</td>
<td>□</td>
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Robbie will participate at the playground by using his communication noodle to indicate choices (e.g., drink; people to play with; equipment to play on)
Will this look clearer?
Diane Paul, 7/30/2009
A 3 year old child was unable to participate in bathing by sitting in the bathtub so his mother had him sit in a laundry basket and propped him up with pieces of foam rubber.

A 3 year old was able to participate during mealtimes by feeding himself using a bent-handle spoon purchased from Toys-R-Us.
The SLP decided to teach the caregiver and the child to use signs such as “pick up,” “more” etc. so that the child would be able to respond more easily.

A child care teacher posted a schedule on the board using pictures so that all the toddlers would know what was coming next.
ICF Classification of Disability adopted by the World Health Organization (the figure is adapted from the ICF Beginners Guide available from: http://www.who.int/classifications/icf/icfapptraining/en/index.html)

TLC Transdisciplinary Interventions 2010-2011

Levels of Intervention

CUSTOM
Specialized, Individualized

DIFFERENTIATED
Needed for Some but not all Children

UNIVERSAL
Used with ALL Infants & Toddlers
Two Categories of Child Interventions

Directed to the Child by Another person
(e.g., caregiver, another adult-provider, child, sibling)

Adaptations/AT Directed to the Environment

Directed to the Child By Another Person

CUSTOM Specialized, Individualized

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Directed to the Child By Another Person

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What Strategies Are Being Directed to the Child by her Dad During the Refrigerator Activity?

• What does the dad do?
• What does the child do?
• What is the overall outcome?
Directed to the Child By Another Person

**Least Intrusive**

- Exposure & Opportunities
- Sensitive Adult Mediation
- Opportunities for practice (within and across activities & routines)
- Reinforcement (e.g., praise; success)
- Modeling another child by watching & imitating
- Modeling an adult by watching and doing
- Verbal directions
- Cueing with natural or contrived cues
- Prompting

**Adult-Directed Strategies**
(Selected Examples)

- Contrived (Teacher/Therapist Designed) Activities
- Contrived Practice (e.g., Discreet Trial Training)
- Physical Guidance or Assistance
- Therapeutic Facilitation

**Most Intrusive**
Adaptations/AT Directed to the Environment

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Use Adaptations and Assistive Technology

To help caregivers “fix” activities and routines that are going poorly

To provide opportunities for new learning and participation in activities and routines that are going well.
Adaptations as Interventions

- Environments, activities & routines, have social and physical expectations for participation
- Adaptations, including assistive technology allow participation in typical family routines and activities
- Adaptations function as a mediator to make a bridge between the child’s abilities and the “demands” or expectations of the environment
- By promoting participation, opportunities for learning are increased

When are Environmental Interventions called AT?

Individuals with Disabilities Education Act

- Assistive Technology is defined as "any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of a child with a disability." (34CFR 300.5)
- Surgically implanted medical devices are excluded from this definition (e.g. cochlear implants) on a case by case basis.
The 3 YES Conditions of AT

Does the child have a disability or a significant delay in the area of development?

YES

Is this a device or adapted material?

YES

Can the child perform the skill only with the device or adapted material?

YES

Adaptations/AT Directed to the Environment

CUSTOM Specialized, Individualized

DIFFERENTIATED Needed for Some but not all Children

UNIVERSAL Used with ALL Infants & Toddlers
Tier 1: Universal Adaptations/AT

Things that we might all use with infants and toddlers

- Placing toys outside reach of child to promote movement
- Safety plugs in outlets
- Bath seat
- Toys with large grips or safe to chew
- Rewards (i.e., preferred activity) after doing something that is difficult
- Break apart multi-step directions into single step (e.g., “Go to the kitchen and get the napkin” becomes 2 separate directions.)
Tier 2: Differentiated Adaptations/AT

Interventions we might use to enable children to do something that they are unable to do and may not be able to do for a while:
- Bath seat for 18 month old
- Velcro on bottom of bowl so a 24 month old child can learn to scoop
- Push play toy (e.g., baby stroller, shopping cart)
- Providing a more active child with a toy to manipulate during circle time
- Schedule picture board
Tier 3: Customized Adaptations/AT

Child Specific/Custom Interventions allow a child to do something they cannot otherwise do:

- Communication board for social interaction with siblings and cousins
- Specialized positioning equipment so that a child may sit up at a table to play, sit on the floor for circle time, sit and swing, stand at the sink
- Motorized mobility device to get around from place to place
A word about Assistive Technology (AT) and Augmentative & Alternative Communication (AAC)

AT
- Socialization
- Communication
- Getting Around
- Use of Arms & Hands

AAC
- Sign
- Picture Exchange
- Picture Board
- Single Switch
- Voice Output

TLC Transdisciplinary Interventions 2010-2011
Facilitating Children’s Participation and Learning/Adaptation Hierarchy

- Environmental Accommodations
- Adapt Room Set-Up
- Adapt/Select Child Equipment
- Equipment/Adaptations for Positioning
- Adapt Schedule (e.g., change the time of the activity/routine)
- Select or Adapt Activity (e.g., change the steps in the activity/routine)
- Adapt Materials (e.g., use AT)
- Adapt Requirements or Instructions (e.g., change expectations for a child’s response)

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<thead>
<tr>
<th>Adaptation Hierarchy Level</th>
<th>Examples of Environmental Modifications</th>
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<tbody>
<tr>
<td>Adapt Set-Up of Environment</td>
<td>• Place all unsafe materials (such as cleaning solutions) in a locked cupboard.</td>
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<td></td>
<td>• Have a picture schedule posted for key activities/routines so the child can prepare for the next step</td>
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<td></td>
<td>• Reduce ambient noise levels by shutting windows to reduce distractions</td>
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<td>Adapt/Select “Equipment”</td>
<td>• Use boppies and bean bag chairs in a child care program so that children can sit with support</td>
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<td></td>
<td>• Use page fluffers so a child can participate in storytime by turning the pages</td>
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<tr>
<td>Equipment/Adaptations for Positioning</td>
<td>• Obtain an off-the-shelf toilet chair in which a child can sit comfortably and safely</td>
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<td>• Use a stander so that the child can work with others at the sand table</td>
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<tr>
<td>Hierarchy Component</td>
<td>Examples</td>
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<tr>
<td>---------------------</td>
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<tr>
<td>Adapt Schedule</td>
<td>• Allow longer times for mealtime so that a child who needs more time to self-feed will have enough time to complete the meal</td>
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</tbody>
</table>
| Select or Adapt Activity | • Read a story using props so that children may participate actively while listening  
  • Make riding toys a part of outside play so that all children can ride. |
| Adapt/Select Materials & Toys | • Purchase an off-the-shelf puzzle with knobs so that the child can complete the puzzle independently  
  • Attach a switch to a toy so that the child can play with the toy independently  
  • Create a picture communication board for use in a favorite restaurant so the child can make food choices |
| Adapt Requirements or Instructions | • Allow a child to self-feed for the beginning of the meal and then feed the child for the remainder  
  • Read 2 very short stories and require a child who has difficulty attending to attend for one story only, or for part of a story  
  • Encourage a child to use alternative means of communication while they are learning to talk (e.g., signs, communication boards) |

Adaptation for Movement

• What adaptations are being used?
• What level do they represent – universal, differentiated, custom?
• What hierarchy level? (equipment, positioning, materials, etc.)?
• If a hands-on, directed to the child intervention was being used, what might it be?
• What is the outcome??
What's happening now?

What would you like to see happen?
Ideas to Share
The Essentials of Low Tech Materials: the Make-It, Take-It Kit

- Duct tape
- Pipe wrap
- Tri-wall (cardboard)
- Clear contact (or laminator capability)
- Access to computer & internet pictures (e.g., google) or something like Boardmaker
What Have You Learned?