

## 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 ---

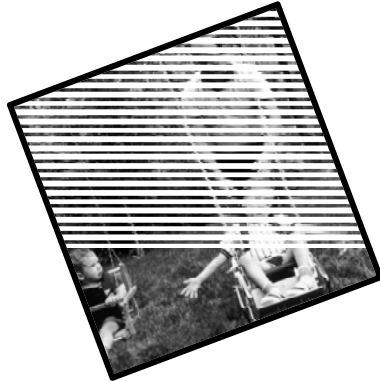
- Ability to do something well
- Competence
- Excellence in execution



# Participation Means --the fact of taking part



**Children are included when they are able to participate in typical activities and routines**



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**Name the routine that providers most frequently use with infants and toddlers?**

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**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, a picture, 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 how the activity/routine is going. For some families, this helps them to decide the routine on which they may want to focus.
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 which 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

ROUTINE/ACTIVITY	EXPECTATIONS				COMMENTS	SATISFACTION				
	Exceeds	Meets	Occasionally Meets	Does not meet		Very	is OK	Somewhat	Not	Did Not Ask
BATHTIME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MORNING ROUTINE (getting up, getting dressed, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NIGHT TIME (getting ready for bed, going to bed, sleeping)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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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)**



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**Slide 13**

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**DP2** 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

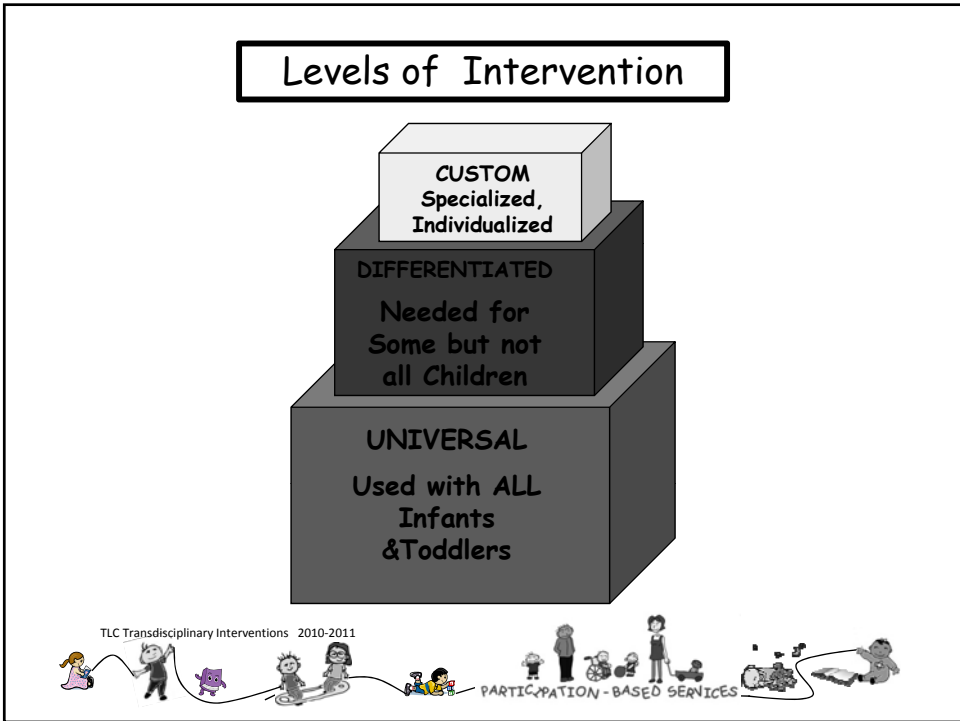
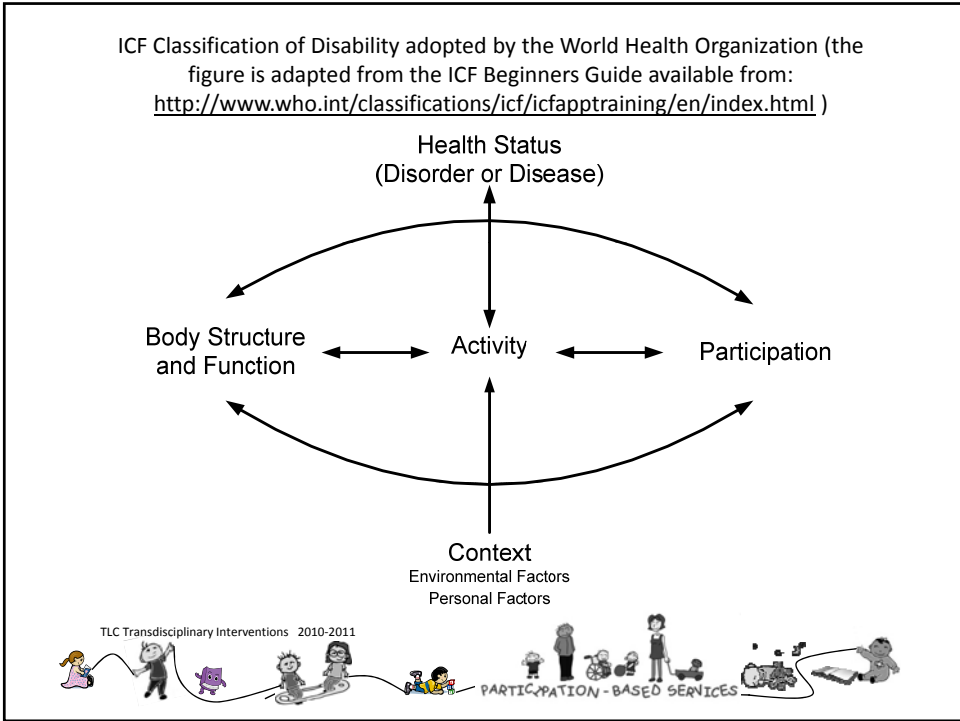


The SLP decided to teach the caregiver and the child to use signs such as "pick up," "more" etc. so that the child would be able to respond more easily.






A child care teacher posted a schedule on the board using pictures so that all the toddlers would know what was coming next.



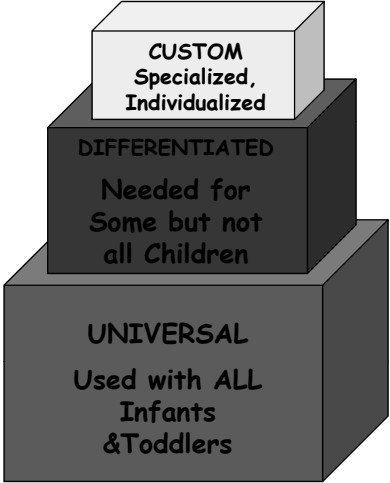


## Two Categories of Child Interventions


<p><b>Directed to the Child by Another person</b> (e.g., caregiver, another adult-provider, child, sibling)</p>  <p style="font-size: small;">TLC Transdisciplinary Interventions 2010-2011</p>	<p><b>Adaptations/AT Directed to the Environment</b></p>  <p style="font-size: small;">PARTICIPATION-BASED SERVICES</p>
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## Directed to the Child By Another Person



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**Directed to the Child By Another Person**

CUSTOM  
Specialized,  
Individualized

DIFFERENTIATED  
Needed for  
Some but not  
all Children

UNIVERSAL  
Used with ALL  
Infants  
& Toddlers

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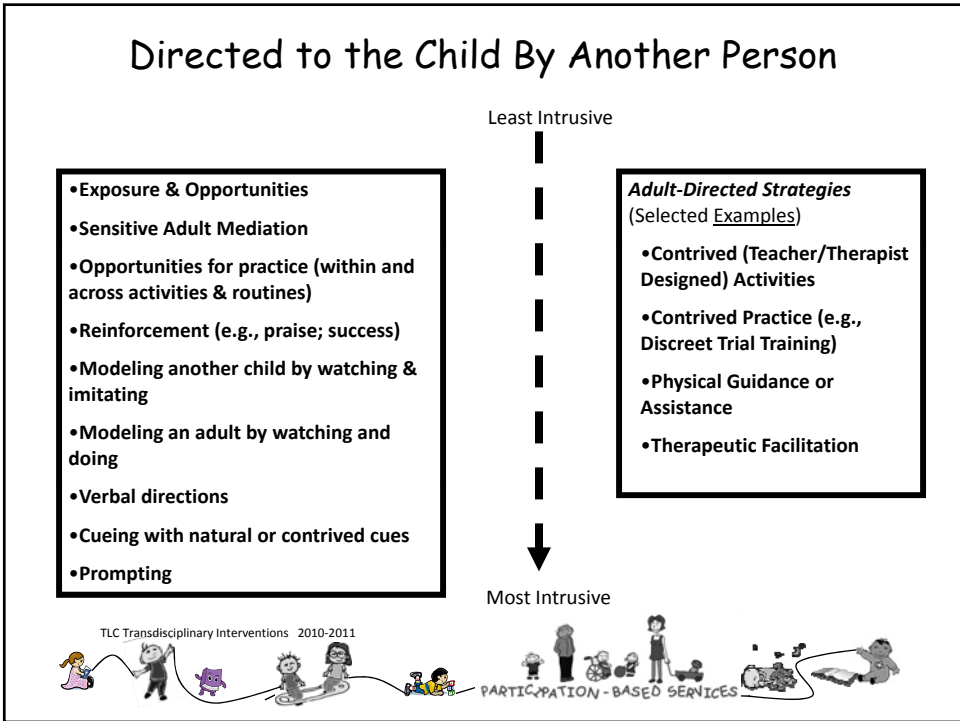
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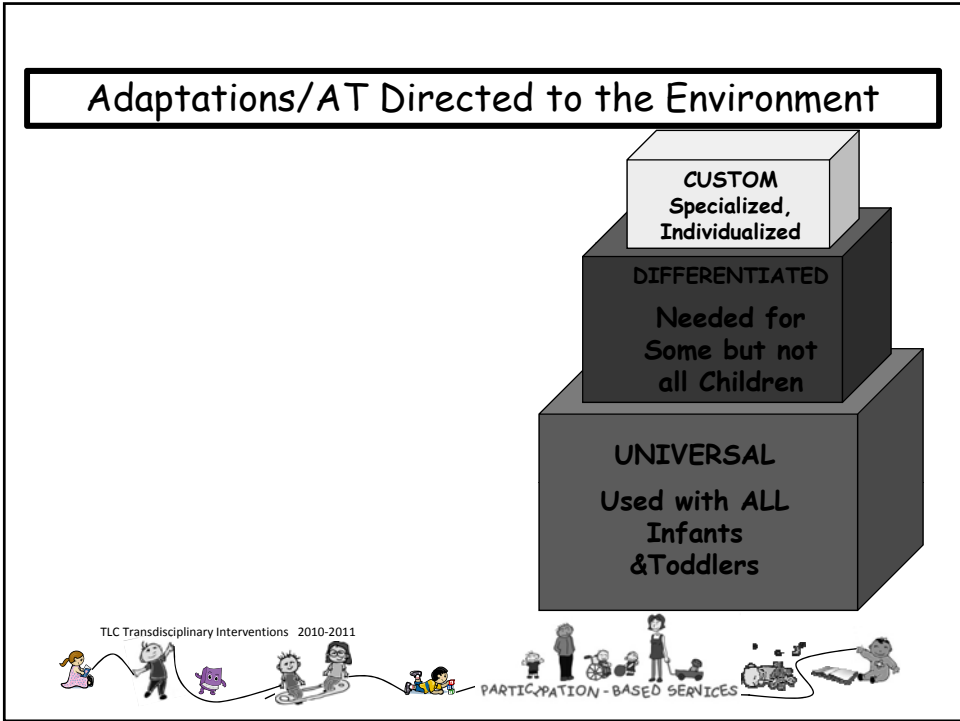
## What Strategies Are Being Directed to the Child by her Dad During the Refrigerator Activity?

- What does the dad do?
- What does the child do?
- What is the overall outcome?

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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.**

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## 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?

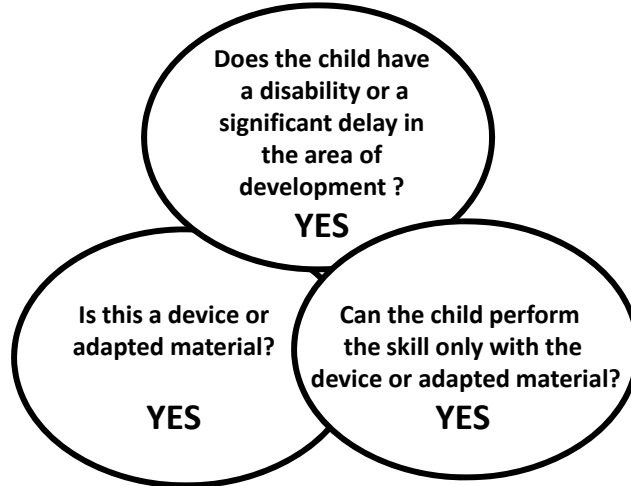
### Individuals with Disabilities Education Act

- *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.

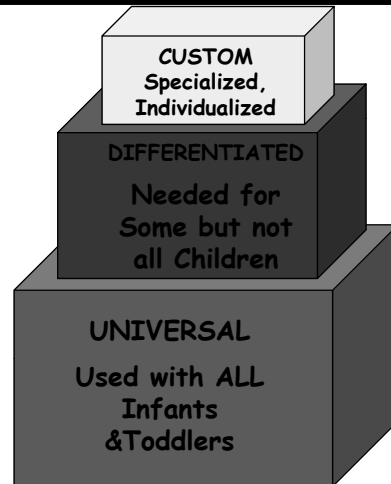




## The 3 YES Conditions of AT



## Adaptations/AT Directed to the Environment



## Tier 1: Universal Adaptations/AT

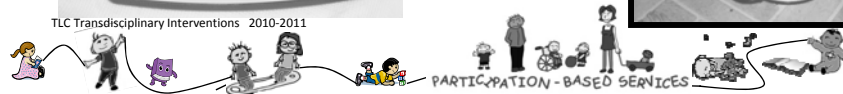
### Things that we might all use with infants and toddlers

- 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.)

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## 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



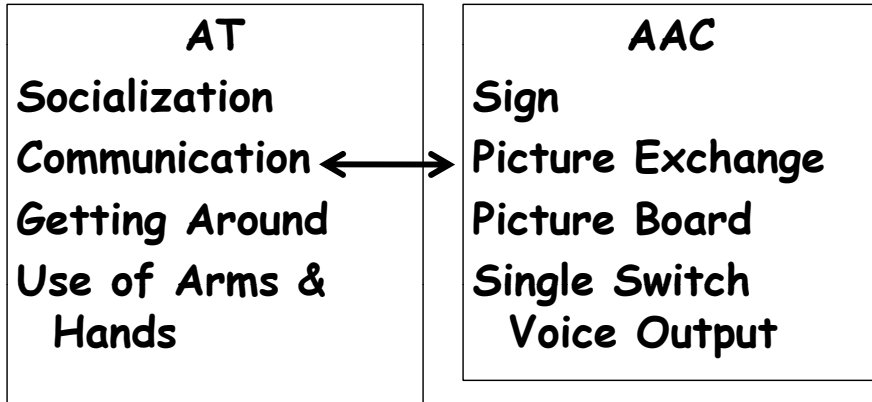
### Tier 3: Customized Adaptations/AT

**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)





Hierarchy Component	Examples
Adapt Schedule	<ul style="list-style-type: none"> <li>Allow longer times for mealtime so that a child who needs more time to self-feed will have enough time to complete the meal</li> </ul>
Select or Adapt Activity	<ul style="list-style-type: none"> <li>Read a story using props so that children may participate actively while listening</li> <li>Make riding toys a part of outside play so that all children can ride.</li> </ul>
Adapt/Select Materials & Toys	<ul style="list-style-type: none"> <li>Purchase an off-the-shelf puzzle with knobs so that the child can complete the puzzle independently</li> <li>Attach a switch to a toy so that the child can play with the toy independently</li> <li>Create a picture communication board for use in a favorite restaurant so the child can make food choices</li> </ul>
Adapt Requirements or Instructions	<ul style="list-style-type: none"> <li>Allow a child to self-feed for the beginning of the meal and then feed the child for the remainder</li> <li>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</li> <li>Encourage a child to use alternative means of communication while they are learning to talk (e.g., signs, communication boards)</li> </ul>

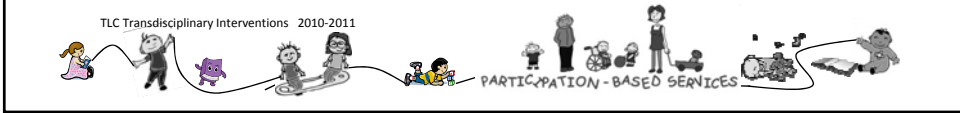
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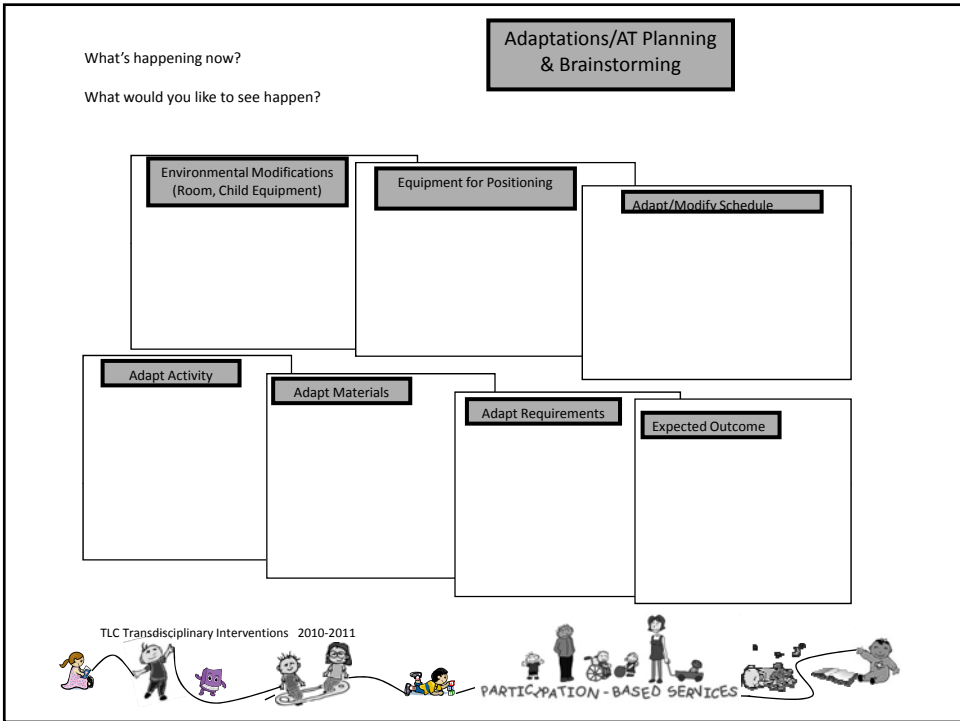


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# Adaptation for Movement

- 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??







Child & Family Studies Research Programs

Child and Family Studies Research Programs

CFSP is a part of the [Department of Psychology](#), School of Health Professions, at [Thomas Jefferson University in Philadelphia](#).

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*Improving the quality of services for families and their children with special needs in the communities in which they live.*

**Program Goals**

- Conduct research studies, identify state-of-the-art training programs and disseminate evidence-based models in order to maximize best practices for families and their infants, toddlers, and young children with disabilities (or those who are at risk for developmental delay) in the delivery of our research, training, and dissemination activities within typical systems of care to maximize research and practice.
- Provide [opportunities for students](#) from Jefferson School of Health Professions to learn and experience best practices as part of their PhD and post-graduate training experiences.

**Find out more about...**

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- [Down Syndrome](#)
- [Early Childhood Development](#)
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- [Intellectual Disability](#)
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**Assistive Technology**  
Autism Spectrum Disorders  
Cerebral Palsy  
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Early Childhood Development  
Genetics  
Intellectual Disability  
Language Development

**Child Care**  
Participation-Based Services  
The Teaching and Learning Collaborative

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# Ideas to Share



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## 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



### Ideas to Share

#### Keychains

Use key chains designed to display photographs, to increase participation in community activities. Attach the portable communication boards to aprons, backpacks or belts.

Idea from Project Participate, University of Colorado Health Science Center, 4200 E. 9th Avenue, CMH-30 Denver, CO 80262 Phone: 303-315-2318 Fax: 303-315-5444 Email: info@projectparticipate.org web: <http://www.projectparticipate.org>

\*These ideas have been gathered from various resources including (1) submissions from early interventions across the country; (2) development by Tasha-Faye Staff; or (3) extracted from various websites focusing on assistive technology. If you have an idea to submit, please send a description and photo to [tlc@colorado.gov](mailto:tlc@colorado.gov)



**TECH Ideas to Share**

### Sturdy and mess free bowl!




**Materials:**  
Bowl with raised bottom to hold pennies (see picture 3)  
Pennies  
Plastic container top  
Glue or tape

**Directions:**  
1. Turn bowl upside down and place pennies into raised bottom of bowl (however many will fit is fine)  
2. Apply glue or tape to raised edges of bottom of bowl. Also apply glue or tape to center of plastic container top (make sure edges of top are facing up). Place glued section of container top onto bottom of bowl so they are firmly connected. Apply more glue or tape as needed (see picture 2 for guidance)  
3. Turn bowl over so that plastic container is on bottom and your device is ready to use (see picture 1)!

Idea submitted by: Pennsylvania's Initiative on Assistive Technology (PIAT)  
For more information: ATInfo@ Temple.edu  
[http://ashdohhs.temple.edu/programs\\_piata/](http://ashdohhs.temple.edu/programs_piata/)

These ideas have been gathered from various resources including (1) submissions from early intervention across the country; (2) development by Tech-a-Tune staff; or (3) material from various websites focusing on assistive technology. If you have an idea to submit, please send a description and photo to [tlc.tdi@temple.edu](mailto:tlc.tdi@temple.edu)

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# What Have You Learned?

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