Introduction to Early Intervention in Philadelphia: Providing Family-Centered Participation-Based Services within Everyday Activities and Routines



# 4 Components of Effective Participation-Based Services

- Meaningful Outcomes for adults & children;
- Child Interventions that promote participation and provide learning opportunities so that new skills are acquired and learned:
- Interventions that engage and teach adults strategies to help children participate and learn; and
- Progress Monitoring and use of progress monitoring information to show families how their children are learning and to make decisions about the benefits of interventions

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## Assessment of Family Activities & Routines

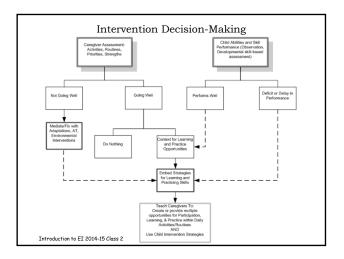
- Did you learn anything you didn't know about the family's typical activities and routines?
- Did anything surprise you?
- How have you used this information in your work with families and children?

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## Embedding Intervention Strategies to Address What is Important to Caregivers

		Family Activities and Routines (Home, School/Child Care, Community)	
		Going Well	Not Going Well
Unable to do Functional Skill(s)	Can Learn Skills via person- focused intervention	YES	NO
	Needs supports [adaptations or AT) as intervention (context-based)]	NO	YES

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### Mediating & Embedding

- What do these terms mean?
  - How do we mediate between environmental demands & child abilities?



This child is unable to perform the fine motor skills necessary to grasp, hold, manipulate objects such as toys. What interventions allow him to play by himself and without adult assistance – pretty much right away.

### Mediating & Embedding

What does embedding mean? How do we embed an intervention strategy into an activity or routine?



This child is unable to perform the fine motor skills necessary to grasp, hold, manipulate objects such as materials for an art project. What interventions allow him to complete the art project? What strategies are embedded into the art activity? How are those interventions being provided?

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# Use Adaptations and Assistive Technology to Mediate ...

• To help caregivers "fix" activities and routines that are not going well



 To support (enhance) opportunities for new learning and participation in activities and routines that are going well.

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### Adaptations

- When children have capacity challenges (impairment or delay) adaptation interventions can promote participation
- We don't have to wait for a child to acquire certain skills in order to participate
- Adaptations are a bridge between what is required to participate and what a child can do independently
- When participation is enhanced through adaptation interventions it becomes possible to embed learning and practice opportunities for new skills

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# When are Adaptations 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).

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## 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)

From <u>Campbell, P. Milbourne, S., & Wi</u>lcox, M. (2008). Adaptation interventions to promote participation in natural settings. *Infants and Young Children*, 21, (2), 94-106.

Adaptation Hierarchy Level	Examples of Environmental Modifications
Adapt Set-Up of Environment	Place all unsafe materials (such as cleaning solutions) in a locked cupboard. Have a picture schedule posted for key activities/routines so the child can prepare for the next step Reduce ambient noise levels by shutting windows to reduce distractions
Adapt/Select "Equipment"	Use boppies and bean bag chairs in a child care program so that children can sit with support Use page fluffers so a child can particpate in storytime by turning the pages Provide a loop tape device so a child can request turns
Equipment/ Adaptations for Positioning	Obtain an off-the-shelf toilet chair in which a child can sit comfortably and safely Use a stander so that the child can work with others at the sand table

Hierarchy Component	Examples	
Adapt Schedule	Allow longer times for mealtime so that a child who needs more time to self-feed will have enough time to complete the meal 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. 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	
Select or Adapt Activity		
Adapt/Select Materials & Toys		
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	

#### Embed Child-Focused, Adult-Provided Hands-On Strategies into Activities and Routines

- To teach functional and developmental skills – acquisition, practice, maintenance, generalization
- To address body structure impairments that may be present such as vision, hearing, neuromuscular situations (e.g., strength, tone, range of motion)

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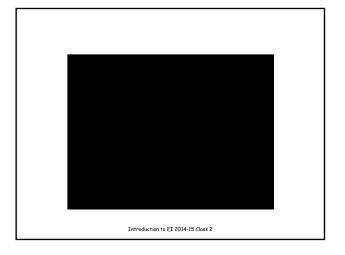
### What are examples of adultprovided embedded strategies?



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### Name those strategies!!

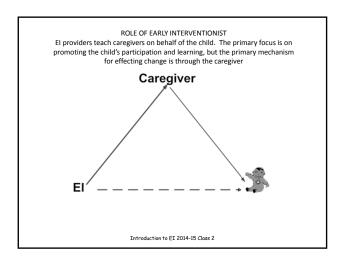
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#### A Teacher of Others

- EI providers are typically trained to teach and work with children and while all are comfortable interacting with caregivers, they are not necessarily prepared to teach caregivers how to teach their children
- Some caregivers are easier to engage and teach than others. EI providers may need additional strategies to be successful in engaging all families
- Teaching caregivers is essential to success of interventions because it is the caregivers, not the provider, who spend the most waking hours with a child

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#### What does it mean to be a teacher of others?

- What is the purpose of teaching?
  - For child to participate in activity or routine and learn skill in context
- · Who is being taught?
  - Caregivers
  - Other team members
- What are they learning to do? (what is the content/intervention being taught?)
- · How are they being taught to do it?
  - Adaptations & AT for immediate success
  - Child-focused hands-on interventions for long-term success

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#### **Provider as Teacher**

#### Planning

- Understand the activity/routine in the caregiver's context (via Caregiver Assessment of Activities and Routines, observation, informal conversations)
  Select strategies for the caregiver (or caregiver and PSP) to implement with the child to enhance children's participation in targeted, activities and create/embed learning opportunities in others

#### Teaching

Teach caregiver (or caregiver and PSP) to implement strategies

#### Evaluating/Reflecting

With caregiver (or caregiver and PSP), review strategies and make needed adjustments to promote the child's participation and learning

#### **Monitor Progress**

With caregiver (or caregiver and PSP) develop a format for monitoring and reviewing progress

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#### What do we know about Providers **Teaching Caregivers?**

- Providers "naturally" perform roles where the primary person with whom they interact is the child – the primary person they "teach" is the child.
- When providers decrease the amount of time they spend directly interacting with the child - what do you think they do instead?

# When trying to teach, providers ---

- Are successful in getting the caregiver to be part of a 3-part (provider, caregiver, child) interaction.
- Both may interact with the child, and both may talk to each other, but the provider does not talk to the caregiver about what to do with the child –in other words, the conversation is not instructional (more often than not, the conversation is to the child.)
- The interaction is primarily directed by the provider but caregivers/providers are jointly interacting with the child.

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# Planning Activities and Routines with Caregivers

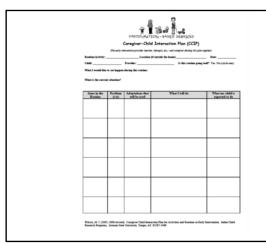
- To select effective interventions, you have to first understand how activities/routines unfold for that particular caregiver/child dyad.
- Understanding includes:
  - Steps you see in the activity/routine;
  - What successful intervention strategies the caregiver (or caregiver and PSP) are using to meet child's outcome for each step;
  - · Problems you see in any of the steps.

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# Planning Activities and Routines with Caregivers

- Similarly, caregivers need to understand the steps and processes in the activities/routines in order to both change their behavior (as needed) and to support their child's achievement of outcomes.
- Ways to understand activities/routines
  - Caregiver Assessment of Activities/Routines
  - Informal discussions
  - Observation

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#### **Teaching Strategies**

### Intentional Teaching with opportunities for caregiver to practice and receive feedback

When giving feedback, consider:

- Comment ("That went very smoothly, you said the word and then Sara tried to say it too")
- Reinforce ("That worked well, you knew just when to give Jonas support so he didn't fall over)
- Hypothesize ("I wonder what would happen if you...")

You may also use:

 Guided Practice (turn taking of provider demonstration/explanation of strategy & caregiver opportunity to practice/receive feedback)



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#### **Teaching Strategies**

## 2. Intentional Teaching without opportunities for caregiver to practice

- EI and caregiver share/discuss information
- EI and caregiver identify problem areas and jointly consider strategies

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### What are commonly used strategies that should not be used extensively (or at all)?

- EI demonstrates but does not provide verbal narrative (explanation); the primary focus is on the child and the caregiver is passively observing or not available
- Provider and caregiver interact jointly with (and teach) child but provider does not provide suggestions or feedback; provider may interact with child

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## In Summary 4 Components of Effective Participation-Based Services

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## Assignment 3: Bring to Class 3 so that you may show tape to your class

- Assignment:
  - Video 2 (a **Minimum** of 20 mins)
  - Case Study Planning and Reflection Form (and on the website at <a href="http://jeffline.tju.edu/cfsrp/tlc/">http://jeffline.tju.edu/cfsrp/tlc/</a>)

THANK YOU FOR YOUR PARTICIPATION!!!