



Infused Course Calendar

Infants, Toddlers, and Twos

Topic	Resource	Resource Description	Activity
<p>Demonstrate understanding of early intervention practices and programs and the role of the educator in early intervention services.</p>	<p>NYC Health: Early Intervention Program https://www.youtube.com/watch?v=pHc1nLfKmBo</p>	<p>This 6:02 minute video defines early intervention and its goals. A physical therapist describes the changes in early intervention practices to a routines-based approach that has empowered families.</p>	<p>Activities should focus on helping scholars become aware of early intervention services and how practices have changed. This video, along with others suggested below, will provide information on a variety of early intervention programs so that scholars understand they are not all the same. An example of an activity to use with this resource is as follows: <u>Activity</u> Ask that scholars to view the NYC Health: Early Intervention Program twice, the second time documenting answers to the following questions: (1) Who diagnosed Andrew? What was his diagnosis? When and where did that diagnosis take place? What was the result of that diagnosis? (2) What is the goal of the NYC Health: Early Intervention Program and who does it serve? (3) As the Assistant Commissioner for Early Intervention Programs speaks, what are some phrases she uses to describe their early intervention services? (4) How does the physical therapist empower the mother in the video? (5) Do you agree with the statement, “Parents are the first and best teachers of children”? (6) As a teacher, how will you use the information in this video?</p>
<p>Demonstrate understanding of early intervention practices and programs and the role of the educator in early intervention services.</p>	<p>Evan’s Story http://www.eiexcellence.org/resources/video-library/</p>	<p>This 10:20 minute video describes the early intervention services received by a young child with Down Syndrome.</p>	<p>Activities should focus on identifying the evidence-based practices mentioned in this video (e.g., play-based learning or routines-based learning, providing intervention not only in the home but in the child care setting, providing coaching for parents and teachers, establishing specific goals and marking progress toward those goals, and informing the teacher of those goals). An example of an activity to use with this resource is as follows: <u>Activity</u> Have scholars practice the skills demonstrated in Evan’s Story.</p>



Topic	Resource	Resource Description	Activity
<p>Demonstrate understanding of early intervention practices and programs and the role of the educator in early intervention services.</p>	<p>AZ EIP Team Model e https://www.youtube.com/watch?v=QzibTuRdd4w</p>	<p>This 6:45 minute video describes the Early Intervention Program Team-Based Model of delivering services to families.</p>	<p>Activities should focus on describing the characteristics and benefits of a team-based model of delivering early intervention services compared to one in which services are provided piecemeal. An example of an activity to use with this resource is as follows: <u>Activity</u> After viewing AZ EIP Team Model e, have scholars document how this team-based model of early intervention services helps parents learn how to provide support to their child in the natural setting without having to depend on artificial props.</p>
<p>Demonstrate understanding of early intervention practices and programs and the role of the educator in early intervention services.</p>	<p>Early Intervention Home Visits https://www.youtube.com/watch?v=8fOJGmlDj0c&index=1&list=PLDRVubk70LrcvY6o-uckE93-XgEJp3R0</p>	<p>This 11:45 minute video from Connecticut’s Birth to Three System describes three main features of intervention visits that research tells us are best practice. They are: routine activities, coaching and consultation, and the primary service model.</p>	<p>Activities should focus on helping scholars understand the features described and to apply them to their roles as early childhood educators. An example of an activity to use with this resource is as follows: <u>Activity</u> Have scholars take notes while viewing Early Intervention Home Visits and use those notes to complete the following assignments: (1) From this video we learn that research tells us all children regardless of need benefit from services built around their daily routine. Those providing support should make the most of opportunities that are already occurring. Imagine that you have a child in your classroom who is receiving occupational therapy. The therapist has not informed you of the services the child is receiving and the child is being removed from the classroom to receive the services. Applying what research tells us about early intervention, and write down your thoughts about this situation. (2) The video describes coaching and consultation as the collaboration among people in a child’s life and the interventionist. Describe how coaching and collaboration with a child’s interventionist might help you as a teacher. (3) Describe the primary service provider model.</p>

<p>Demonstrate understanding of early intervention practices and programs and the role of the educator in early intervention services.</p>	<p><u>Early Intervention and Child Care. Natural Partners in natural Environments</u></p> <p><u>https://www.youtube.com/watch?v=Ua9BliUZKsk</u></p>	<p>This video should only be 10:14 minutes (After credits role, it repeats itself). It focuses on all steps of early intervention from referral to receiving services. Although it focuses on services in Illinois, much of the information can be applied to early intervention services in other states.</p>	<p>This video provides information on early intervention and focuses on the role of the child care provider in referring a child. Activities should focus on the best practices for referring a child and the steps that are recommended. An example of an activity to accompany this video is as follows:</p> <p><u>Activity</u> After watching the video, have scholars answer the following questions: (1) When helping a family identify a developmental concern, what should a child care provider do and what should they avoid doing? (2) How can a child care provider raise awareness of the availability of early intervention services? (3) How can a child care provider contribute to a child’s early intervention outcomes? (4) What are the benefits of providing early intervention services within a child’s classroom with his or her child care providers?</p>
<p>Demonstrate knowledge of child development and how to provide information for parents on developmental delays.</p>	<p><u>Early Recognition of Child Development Problems</u></p> <p><u>https://www.youtube.com/watch?v=KrUNBfyjIBk</u></p>	<p>This 4:33 minute video provides information on the importance of recognizing and seeking help for a child with a developmental delay as early as possible. It emphasizes the need for providing information to parents on the importance of early intervention.</p>	<p>Scholars should be aware that they do not ever diagnose a child or suggest that a parent seek help; they provide information to all parents to guide those who may be worried. Activities should focus on sources of information and how to provide that information to all parents. An example of an activity to accompany this video is as follows:</p> <p><u>Activity</u> After watching <u>Early Recognition of Child Development Problems</u>, have scholars review <u>What is a Developmental Delay and What Services Are Available?</u> and brainstorm ideas for making this information available to parents of infants, toddlers, and two-year-olds. In addition, have them document the contact information of their local early intervention agency.</p>

<p>Demonstrate knowledge of the purpose and processes of the Individualized Family Services Program (IFSP) and the role of the child's teacher on the IFSP Team.</p>	<p><i>Bri IFSP Video-Chapter 1-Introductions & Family Priorities</i></p> <p>https://www.youtube.com/watch?v=ZDPM1tUie7A&index=4&list=PLF7B7F9DBF3306267</p>	<p>This 8:02 minute video introduces the family and team members, reviews the purpose of the IFSP meeting, and highlights the service coordinator's role at the IFSP meeting. It also includes discussion around family priorities and general tips to ensure families are at the center of an IFSP meeting.</p>	<p>Activities should focus on aspects of the Individualized Family Service Plan (IFSP). An example of an activity to accompany this video is as follows:</p> <p><u>Activity</u></p> <p>After watching this video, have scholars answer the following questions:</p> <p>(1) What is an IFSP? Who completes it? What is the timeline? Who attends IFSP meetings? What is the role of the service coordinator? What are the goals of writing an IFSP?</p> <p>(2) One difference between the Individualized Family Service Plan (IFSP) and the Individualized Education Program (IEP) is that the IFSP team does not necessarily have to include the child's teachers. The child's family can choose not to inform his/her teacher(s) of the plan. After watching this video, imagine that Bri is a child in your classroom. What disadvantages are there to not being informed of the services she is receiving?</p>
<p>Demonstrate knowledge of the purpose and processes of the Individualized Family Services Program (IFSP) and the role of the child's teacher on the IFSP Team.</p>	<p><i>Bri IFSP Video-Chapter 2.1-Levels of Development-Communication</i></p> <p>https://www.youtube.com/watch?v=cNpsFDdW FE&index=2&list=PL9DC2069DAD870262</p>	<p>This 9:10 minute video shows members of an IFSP team discussing the communication skills of a young child.</p>	<p>Activities should focus on communication as an aspect of levels of development addressed by the Individualized Family Service Plan (IFSP) team. An example of an activity to accompany this video is as follows:</p> <p><u>Activity</u></p> <p>After watching this video, have scholars answer the following questions:</p> <p>(1) The IFSP is a free-flowing discussion that should begin with what?</p> <p>(2) "Levels of Development" is the part of the IFSP document that captures the child's strengths and skills when?</p> <p>(3) The facilitated discussion does not allow any one provider to do what?</p> <p>(4) What is the service coordinator's responsibility?</p> <p>(5) If you were Bri's teacher, what information could you have shared with this group?</p> <p>(6) At the end of the video, what does the narrator ask the viewer to remember?</p> <p>(7) In your opinion, what is missing in this conversation? Do you think that Bri's services are being delivered in a routine-based approach? Why or why not?</p>

<p>Demonstrate knowledge of assistive technology used with infants, toddlers, and two-year-olds to promote their learning and development.</p>	<p><i>Lighthouse Central Florida-Grace's Story- Early Intervention</i> https://www.youtube.com/watch?v=YhaRJoF2bqg</p>	<p>This 4:11 minute video provides a description of one child's early intervention services including the use of assistive technology.</p>	<p>Activities should focus on the specific services provided for Grace. An example of an activity to accompany this video is as follows: <u>Activity</u> After watching this video, have scholars document the assistive technology used by Grace. Then have them read the article <i>Assistive Technology for Infants, Toddlers, and Young Children with Disabilities</i> retrieved from http://www.pacer.org/publications/pdfs/ALL7.pdf. Have scholars document information from this video they can apply to an inclusive classroom setting.</p>
<p>Demonstrate knowledge of most common disability categories for infants and how early childhood educators can use this knowledge to promote development and learning of young children in an inclusive setting.</p>	<p><i>Categories of Disability Under IDEA</i> http://www.parentcenterhub.org/wp-content/uploads/reports/items/gr3.pdf</p>	<p>This six page information brief published in 2012 by NICHCY reviews the categories of disability for which a child may qualify for services.</p>	<p>Activities should focus on how infants and toddlers qualify for services under the Individuals with Disabilities Education Act (IDEA) and how parents may find information about those services. An example of an activity to accompany this brief is as follows: <u>Activity</u> After reading through <i>Categories of Disability Under IDEA</i> and viewing <i>Infants and Toddlers with Disabilities: Services</i> retrieved from https://www.youtube.com/watch?v=C3KHvYHX8E, have scholars document, in their own words, the differences between categories of disability for an infant, toddler, or two-year-old compared to an individual aged three to twenty-one.</p>
<p>Demonstrate knowledge of most common disability categories for infants and how early childhood educators can use this knowledge to promote development and learning of young children in an inclusive setting.</p>	<p><i>Lincoln's Story - Early Signs of Hemiplegia Cerebral Palsy or Pediatric Stroke</i> https://www.youtube.com/watch?v=MDO6biJBRHs</p>	<p>This 4:58 minute video provides the journey leading up to a child's diagnosis of hemiplegic cerebral palsy (developmental delay in physical development) as told by his parents.</p>	<p>Activities should focus on the signs of hemiplegia cerebral palsy and the fact that early diagnosis is critical for parents. An example of an activity to accompany this video is as follows: <u>Activity</u> After scholars watch <i>Lincoln's Story - Early Signs of Hemiplegia Cerebral Palsy or Pediatric Stroke</i>, have them visit <i>Children's Hemiplegia and Stroke Association</i> at http://www.chasa.org. After reading the website page <i>Learn More about Pediatric Stroke</i> at http://chasa.org/learn-more-about-pediatric-stroke/, have them write at least 100 words the importance of this information and how it can be shared with parents, educators, and those in the medical field caring for infants.</p>

<p>Demonstrate knowledge of most common disability categories for infants and how early childhood educators can use this knowledge to promote development and learning of young children in an inclusive setting.</p>	<p><u>Early Intervention: Helping Babies with Visual Impairments</u> <u>https://www.youtube.com/watch?v=6rbHOAtBNew</u></p>	<p>This is 10:44 minute video shows progress of young children with visual impairments (physical development) who participate in the Florida Department of Education Division of Blind Services-funded Lighthouse Early Intervention Program.</p>	<p>Activities should focus on the services available for infants, toddlers and twos with visual impairments. An example of an activity to accompany this video is as follows: <u>Activity</u> After watching <u>Early Intervention: Helping Babies with Visual Impairments</u>, have scholars research and document the services available for children with visual impairments in their geographic area.</p>
<p>Demonstrate knowledge of most common disability categories for infants and how early childhood educators can use this knowledge to promote development and learning of young children in an inclusive setting.</p>	<p><u>Teaching Students with Visual Impairments</u> <u>https://www.youtube.com/watch?v=dPC--R-Ma0</u></p>	<p>This 3:47 minute video provides evidence-based practices for promoting the development and learning of young children with visual impairments (physical development).</p>	<p>Activities should focus on evidence-based practices scholars need to use when promoting the development and learning of young children with visual impairments. An example of an activity to accompany this video is as follows: <u>Activity</u> Have scholars document at least 14 best practices mentioned in <u>Teaching Students with Visual Impairments</u> and detail those they have used when working with young children.</p>

<p>Demonstrate an understanding of the importance of collaboration when teaching in an early childhood inclusive education setting.</p>	<p><u>Drew</u> <u>https://www.youtube.com/watch?v=GR6T1EhQ8c</u></p>	<p>This 6:09 minute video illustrates how Drew, one preschooler with a disability, flourished in an inclusive environment. Drew's parents and staff from various agencies describe how he transitioned from a home-based early intervention program to an Early Head Start program with early intervention services, and then onto a preschool/Head Start center where he received special education services in the classroom. Throughout the video, parents and staff provide examples of the importance of collaboration when teaching in an early childhood inclusive setting.</p>	<p>Activities should focus on scholar understanding of the array of services that may be needed when including a child with a disability in their classroom and the collaboration needed to ensure that parents' dreams for their child are realized. An example of an activity to accompany this video is as follows: <u>Activity</u> (1) After students view <u>Drew</u> one time, have them review the video again and document the individuals that make up his team. Have them note who was involved in transitioning Drew from services being provided by the health department to those provided by Early Head Start and the Lincoln Public Schools. (2) Have students write what they think Drew's Preschool Center Director meant when she said, "Peers are powerful."</p>
<p>Demonstrate the ability to identify resources that support those who educate and care for students in inclusive settings.</p>	<p><u>Center for Inclusive Child Care</u> <u>http://www.inclusivechildcare.org/c_about.cfm</u></p>	<p>The Center for Inclusive Child Care (CICC) is a comprehensive resource network for supporting inclusive care for children.</p>	<p>Activities should focus on scholar ability to find resources that support their efforts to promote the development and learning of young children in an inclusive environment. One resource, the <u>Center for Inclusive Child Care</u>, retrieved from <u>http://www.inclusivechildcare.org/index.cfm</u> or <u>http://www.inclusivechildcare.org/c_about.cfm</u>, is an example of a website that offers information to support early childhood educators. The following is an activity to be used with this resource: <u>Activity</u> Have scholars investigate this website and share how they would use it to support their teaching.</p>



<p>Demonstrate the ability to identify resources that support those who educate and care for students in inclusive settings.</p>	<p><u>Presented by Boston Medical Center: Special Kids Special Help: A Resource for Parents</u></p> <p><u>http://specialkidsspecialhelp.org/LearnAboutYourChildsIllness/DevelopmentalDelay/DevelopmentalDelayandFamily.aspx</u></p>	<p>This resource provides tips for parents and families of children with significantly delayed development.</p>	<p>Activities should focus on ways that educators, parents, and families take care of their own emotional and physical health.</p> <p><u>Activity</u></p> <p>After reading <u>Presented by Boston Medical Center: Special Kids Special Help: A Resource for Parents</u>, have scholars document the tips that apply to effective practices in an inclusive classroom.</p>
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The following webinar may be used to address concepts presented in Infants, Toddlers, and Twos.

Clarkschool. (2013). [Family Centered Practice for Infants and Toddlers with Hearing Loss](https://www.youtube.com/watch?v=fhGudptKEUg). Retrieved from <https://www.youtube.com/watch?v=fhGudptKEUg>.

This one hour webinar provides information on telepractice and family-centered intervention. Additional webinars from the Clarke Schools for Hearing and Speech may be retrieved from <http://clarkeschools.org/webinars>.

The following presentation may be used to address concepts presented in Infants, Toddlers, and Twos.

UC Davis, Mind Institute. (Producer). (2011). 2010-2011 Distinguished Lecture Series: Dr. Connie Kasari, University of California, Los Angeles *Engaging Autism: Developmental implications for early intervention* [Video]. Available from <http://www.youtube.com/watch?v=vZyfYQR2Wrg>

In this one hour presentation produced by the Mind Institute at UC Davis, early interventions for autism that are focused on early core developmental abilities are described. The importance of interactions with others to promote critical social skills such as shared attention is discussed.

The following research briefs may be used to address concepts presented in Infants, Toddlers, and Twos.

(1) Beuker, K., Rommelse, N., Donders, R., & Buitelaar, J. (2013). Development of early communication skills in the first two years of life. *Infant Behavior and Development, 36*, 71-83.

Retrieved from <http://www.acceptproject.org/wp-content/uploads/2013/08/APRB-2013-04-Beuker.pdf>

(2) Khetani, M. A., Cohn, E. S., Orsmond, G. I., Law, M. C., & Coster, W. J. (2013). Parent perspectives of participation in home and community activities when receiving Part C early intervention services. *Topics in Early Childhood Special Education, 32*, 234-245.

Retrieved from http://www.acceptproject.org/wp-content/uploads/2015/01/ARPB-2015-02_Khetani.pdf



2014 DEC Recommended Practices

DEC Recommended Resources for Leaders

- L1.** Leaders create a culture and a climate in which practitioners feel a sense of belonging and want to support the organization's mission and goals.
- L2.** Leaders promote adherence to and model the DEC Code of Ethics, DEC Position Statements and Papers, and the DEC Recommended Practices.
- L3.** Leaders develop and implement policies, structures, and practices that promote shared decision making with practitioners and families.
- L4.** Leaders belong to professional association(s) and engage in ongoing evidence-based professional development.
- L5.** Leaders advocate for policies and resources that promote the implementation of the DEC Position Statements and Papers and the DEC Recommended Practices.
- L6.** Leaders establish partnerships across levels (state to local) and with their counterparts in other systems and agencies to create coordinated and inclusive systems of services and supports.

All DEC Recommended Practices for Assessment

- A1.** Practitioners work with the family to identify family preferences for assessment processes.
- A2.** Practitioners work as a team with the family and other professionals to gather assessment information.
- 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.
- A4.** Practitioners conduct assessments that include all areas of development and behavior to learn about the child's strengths, needs, preferences, and interests.



- A5.** Practitioners conduct assessments in the child’s dominant language and in additional languages if the child is learning more than one language.
- A6.** Practitioners use a variety of methods, including observation and interviews, to gather assessment information from multiple sources, including the child’s family and other significant individuals in the child’s life.
- A7.** Practitioners obtain information about the child’s skills in daily activities, routines, and environments such as home, center, and community.
- A8.** Practitioners use clinical reasoning in addition to assessment results to identify the child’s current levels of functioning and to determine the child’s eligibility and plan for instruction.
- A9.** Practitioners implement systematic ongoing assessment to identify learning targets, plan activities, and monitor the child’s progress to revise instruction as needed.
- A10.** Practitioners use assessment tools with sufficient sensitivity to detect child progress, especially for the child with significant support needs.
- A11.** Practitioners report assessment results so that they are understandable and useful to families.

DEC Recommended Practices for Environment:

- 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.
- E2.** Practitioners consider Universal Design for Learning principles to create accessible environments.
- E3.** Practitioners work with the family and other adults to modify and adapt the physical, social, and temporal environments to promote each 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.



E5. Practitioners work with families and other adults to acquire or create appropriate assistive technology to promote each child’s access to and participation in learning experiences.

E6. Practitioners create environments that provide opportunities for movement and regular physical activity to maintain or improve fitness, wellness, and development across domains

DEC Recommended Resources for Family

F1. Practitioners build trusting and respectful partnerships with the family through interactions that are sensitive and responsive to cultural, linguistic, and socio-economic diversity.

F2. Practitioners provide the family with up-to-date, comprehensive and unbiased information in a way that the family can understand and use to make informed choices and decisions.

F3. Practitioners are responsive to the family’s concerns, priorities, and changing life circumstances.

F4. Practitioners and the family work together to create outcomes or goals, develop individualized plans, and implement practices that address the family’s priorities and concerns and the child’s strengths and needs.

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.

F6. Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family’s preferences.

DEC Practices for Team Collaboration

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.

TC2. Practitioners and families work together as a team to systematically and regularly exchange expertise, knowledge, and information to build team capacity and jointly solve problems, plan, and implement interventions.



TC3. Practitioners use communication and group facilitation strategies to enhance team functioning and interpersonal relationships with and among team members.

TC4. Team members assist each other to discover and access community-based services and other informal and formal resources to meet family-identified child or family needs.

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.



DEC Recommended Practices for Instruction

INS1. Practitioners, with the family, identify each child's strengths, preferences, and interests to engage the child in active learning.

INS2. Practitioners, with the family, identify skills to target for instruction that help a child become adaptive, competent, socially connected, and engaged and that promote learning in natural and inclusive environments.

INS3. Practitioners gather and use data to inform decisions about individualized instruction.

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.

INS5. Practitioners embed instruction within and across routines, activities, and environments to provide contextually relevant learning opportunities.

INS6. Practitioners use systematic instructional strategies with fidelity to teach skills and to promote child engagement and learning.

INS7. Practitioners use explicit feedback and consequences to increase child engagement, play, and skills.

INS8. Practitioners use peer-mediated intervention to teach skills and to promote child engagement and learning.

INS9. Practitioners use functional assessment and related prevention, promotion, and intervention strategies across environments to prevent and address challenging behavior.

INS10. Practitioners implement the frequency, intensity, and duration of instruction needed to address the child's phase and pace of learning or the level of support needed by the family to achieve the child's outcomes or goals.

INS11. Practitioners provide instructional support for young children with disabilities who are dual language learners to assist them in learning English and in continuing to develop skills through the use of their home language.

INS12. Practitioners use and adapt specific instructional strategies that are effective for dual language learners when teaching English to children with disabilities.



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.

Recommended Practices for Interaction

INT1. Practitioners promote the child's social-emotional development by observing, interpreting, and responding contingently to the range of the child's emotional expressions.

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.

INT3. Practitioners promote the child's communication development by observing, interpreting, responding contingently, and providing natural consequences for the child's verbal and non-verbal communication and by using language to label and expand on the child's requests, needs, preferences, or interests.

INT4. Practitioners promote the child's cognitive development by observing, interpreting, and responding intentionally to the child's exploration, play, and social activity by joining in and expanding on the child's focus, actions, and intent.

Recommended Practices for Transition

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.

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.



ACCEPT Standard Topics and Focus Items

- 1.0 Know and share the laws, policies, procedures and ethical principles that support and protect children birth to 5 with disabilities.
 - 1.1 Share with others the rights and responsibilities of children birth to 5 with exceptional needs, their families and other stakeholders.
 - 1.2 Use federal, state and local policies for confidential communication about early intervention team practices.
 - 1.3 Indicate knowledge of appropriate educational terminology regarding students, programs, roles, and instructional activities.
- 2.0 Develop and use instructional strategies to meet the needs of individual learners.
 - 2.1 Implement strategies that promote the self-awareness, self-regulation, self-control, self-reliance, self-esteem and independence in children birth to 5 under the guidance of the lead teacher.
 - 2.2 Demonstrate knowledge of the etiology, characteristics, and educational implications of categories of disability under IDEA.
 - 2.3 Demonstrate knowledge of Early Childhood/Special Education best practices as defined by professional organizations.
- 3.0 Build skills to promote child development and learning and lead to life and school success.
 - 3.1 Support early cognitive skills including oral communication and early literacy skills.
 - 3.2 Participate in the selection and use of appropriate instructional materials, equipment, supplies, and other resources needed to effectively teach children birth to 5 with exceptional needs.
 - 3.3 Embed learning opportunities in everyday routines, relationships, activities, and places.
- 4.0 Engage in instructional planning using data to develop and implement activities and lessons that engage all learners, provide increased feedback, and reinforce skills and concepts.
 - 4.1 Promote child development and learning through varied delivery of instruction.
 - 4.2 Increase the participation and engagement of all (with and without disabilities) children in the classroom (e.g., use knowledge of individual children's strengths, interests, and learning styles to encourage engagement in varied activities).



4.3 Promote child development and learning through varied delivery of instruction (e.g., teach individual students or small groups of students to reinforce learning and skills introduced by the teacher.)

5.0 Use assessment data from multiple sources to create, modify and adapt a safe learning environment that promotes the achievement of all learners.

5.1 Collaborate with the lead teacher and early intervention team to select, adapt, modify and use classroom instruction, curricula, materials, activities and the physical environment for children birth to 5 with exceptional needs. (e.g., Use and maintain assistive technology for children birth to 5 under the guidance of the lead teacher.)

5.2 Collect information under the guidance of the lead teacher on the needs of the children, their strengths, interests, and developmental growth.

5.3 Collect information under the guidance of the lead teacher on effectiveness of activities and lessons.

6.0 Build student skills to promote successful social interactions.

6.1 Promote peer interaction skills and development of friendship in all children (e.g., teach children to effectively communicate their emotions and feelings).

6.2 Develop and implement basic classroom rules and routines that do not undermine the dignity of the individual or the basic human right of children with disabilities.

6.3 Support children birth to 5 in their use of augmentative and alternative communication skills and other assistive technology as determined by the lead teacher and early intervention team.

7.0 Build child, family and community relationships that promote child development and learning.

7.1 Provide support to families so that they can implement health, nutrition and safety practices and procedures for children birth to 5 with exceptional needs.

7.2 Demonstrate and maintain a positive relationship with students, family members, colleagues, service professionals and early intervention team members.



7.3 Provide accurate and timely information about children birth to 5 with exceptional needs to individuals who have the need and right to know under the guidance of the lead teacher.

8.0 Engage in professional and ethical practice at all times.

8.1 Maintain the dignity, privacy, and confidentiality of all children birth to 5 with exceptional needs, families, and agency employees.

8.2 Participate as a team member to enhance communication and problem-solving.

8.3 Assist families in accessing information and resources.