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Cooperation, Coordination, Collaboration: Asking the Hard Questions

by Misty D. Goosen

For those of you who know me, you might believe I enjoy asking the hard questions, and I guess I would have to agree. I believe that asking hard questions lends itself to brainstorming and selecting potentially powerful solutions, moving groups one step closer toward their goal. In addition, I believe it is necessary to continue to ask hard questions even after the goal has been accomplished to successfully maintain excellence in our work. Let's face it, the needs of children and their families, as well as the workforce that supports them, continues to change and evolve and therefore requires constant vigilance. Ours is always a work in progress and is not for the faint of heart. So you may ask, what is the hard question to ponder today? Here it is:

“What is the difference between coordination, cooperation, and collaboration, and why is it important as an early childhood professional to understand the difference?” In retrospect, this is probably a series of hard questions but give me an inch... you get the point.



Why is it important for early childhood professionals to understand the difference between coordination, cooperation, and collaboration? There is no easy answer. Early childhood professionals often find themselves working within a group (or groups) that erroneously define themselves as “collaborative”. Using the wrong term to describe the group doesn't seem to be that important. However, groups that call themselves “collaborative partners” when in fact they are merely coordinating or cooperating often confuse and frustrate most, if not all, of their members.

Understanding the difference between the words coordination, cooperation and collaboration is taxing because they have often been used interchangeably. Indeed, if you “Google” this question you will find that there have been many attempts to clarify these words (albeit vaguely), and many continue to seek bet-



Request for Proposals for Best Practice Awards

Each year through an application process KITS, in collaboration with KDHE and KSDE, identifies programs that utilize evidence-based practices. Early in October, all Special Education Directors, Early Childhood Coordinators and Part C Network Coordinators were emailed this application packet.

The applications are reviewed by a panel of professionals in the fields of early intervention and early childhood special education. The programs identified are awarded a certificate of recognition and \$1,000 to use as an added resource.

If you have not received your application packet, contact Robin Bayless, rbayless@ku.edu, 620-421-6550 ext. 1618 or download a copy at:

<http://kskits.org/resources/index.shtml#Application>

Deadline for applications is a postmark of Friday, January 15, 2010.



Cooperation, Coordination, Collaboration continued

ter answers. After reviewing several on-line dictionaries, I found out why that may be so. All three of our “C” words include, “working together” in their primary definition. However, each word varies slightly on who is working together, and what they might be working on. Merriam-Webster Online (2009) further defined our “C” words as follows:

1. Coordination: the harmonious functioning of parts for effective results
2. Cooperation: to act together or in compliance for mutual benefit
3. Collaboration: a) to work together jointly, especially in an intellectual endeavor; b) cooperating with or willingly in assisting an enemy of one’s country, especially an occupying force.

The first two definitions were probably no surprise; however, the definition of collaboration may have been a bit eye opening. Being the “pot stirrer” that I am, I would argue that this definition can and does apply to our work in early childhood, but I will get to that later. Before we go there, let’s first take a closer look at coordination and cooperation, and discuss why most of our work may actually be falling within these two models of working together.

As stated previously, Merriam-Webster Online defines coordination as the harmonious function of parts for effective results. Work that is coordinated involves more than one person, includes shared objectives, requires an understanding of personal roles and responsibilities, and is generally overseen by someone (e.g. coordinator). There is a general assumption that there may be overlap

in work, even though different people/units come into the process working on specific pieces. In this model, the coordinator works to decrease gaps and/or overlaps and increase the harmonious functioning of each part to achieve the end result or product. Communication between individuals to the coordinator and vice versa may be all that is needed to keep the machine running smoothly. Clearly defined roles and schedules will help minimize the overlaps, and the gaps will be addressed through input to the coordinator (who ultimately makes the needed changes). Examples of coordinated efforts in early childhood include child find screening activities (that are coordinated between two or more agencies), activities specified in Memorandums of Understanding (MOU) such as record sharing/keeping between agencies, and oversight of services birth through five in Kansas (Interagency Coordinating Council – ICC). In order for coordination to be accomplished, individuals and/or departments must also cooperate.

What does it take to cooperate with someone? Like the definition implies, cooperation suggests compliance in some manner, sharing something, all for mutual benefit. Unlike coordination, the “mutual benefit” or end product may be different for each cooperating group. For example, an inmate may cooperate with the police by providing evidence against another person charged with the same crime. In this scenario, the inmate is “sharing information”, which may benefit the inmate by reducing his jail sentence, and benefit the police by helping them solve the crime. Both parties see benefit, though it is not the same. In early childhood, agencies may agree to share information or resources. For example a

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The Collaborative Calendar of Events

View at kskits.org/training

DATE	EVENT	CONTACT
11/4-6/09	<i>Governor's Conference for the Prevention of Child Abuse & Neglect, Topeka</i>	https://www.kscl.org/training_conference.aspx
11/5/09	<i>Tri-State Regional Special Education Law Conference, Omaha, Neb</i>	Kathleen Richman, 435-752-0238 ext. 26
11/6-7/09	<i>Autism Across the Lifespan: A Conference for Professionals and Families, Wichita</i>	http://kcart.ku.edu/autism-across-lifespan/ or kcart@ku.edu
11/13/09	<i>Comprehensive Planning for Students with ASD, via ITV</i>	http://www.KansasASD.com
11/16/09	<i>Part C Coordinator's Meeting, Topeka</i>	Ellen Pope, epope@kumc.edu
11/17-19/09	<i>Evidence Based Practices Institute, Kansas City</i>	Jennifer Tanquary, 913-588-7195
11/18/09	<i>SEAC/SICC Joint Meeting, Topeka</i>	
1/25/10	<i>Part C Regional Meetings, via ITV</i>	Peggy Miksch, pmiksch@ku.edu
2/25-26/10	<i>KDEC 2010: Meeting the Challenges - Early Childhood 2010, Wichita</i>	Kathy Easterly, 913-780-7410, keasterlyhlc@olatheschools.com
2/26/10	<i>Evidence-Based Practices and Autism Spectrum Disorders, via ITV</i>	http://www.KansasASD.com
4/9/10	<i>Seeing is Believing! Self-Modeling Applications for Children with Autism and Other Developmental Disabilities, via ITV</i>	http://www.KansasASD.com
6/8-11/10	<i>KITS Summer Institute</i>	Misty Goosen, mistyg@ku.edu

Links to Other Training Calendars

- KCCTO child care or CDA advisor trainings: www.kccto.org
- Families Together: www.familiestogetherinc.org
- Children's Alliance Training Team: www.childally.org/training/training.html
- KACCRRRA: www.kaccrra.org
- Capper Foundation: capper.easterseals.com
- Council for Exceptional Children: www.cec.sped.org/pd
- KSDE: www.ksde.org
- Kansas Children's Service League: www.elearningkscl.org/



Cooperation, Coordination, Collaboration continued

community preschool program may allow the district speech pathologist to use a room in their building to conduct speech screenings and provide pull out speech services. The benefit for the speech pathologist may be the ability to have a location for screening activities that he/she may

not of otherwise had, and the benefit to the preschool may be the additional visibility of their program to families who may be attending the screening whose children do not already attend their program. Both derive benefit, though the benefit is different.

Working together through coordinated or cooperative activities generally provides some type of benefit. However, in both of these models the work of the individual person or units did not inherently change all that much. Their general roles stayed

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Part C Coordinator's Corner

KDHE Infant-Toddler Services Welcomes New Staff

Sabra Shirrell has recently been hired at the Kansas Department of Health and Environment as a Health Planning Consultant for Infant-Toddler Services. For the past 10 years, Sabra was the Coordinator of Successful Connections, Shawnee County's Early Identification and Referral Program for pregnant women and families with young children. Before that she was the Director of Children's Services at TARC, Inc. for 20 years.

Sabra graduated from Kansas State in community services and earned her Masters degree in early childhood special education at Emporia State University.

She and her husband, Alan, live in Tecumseh and are the Innkeepers of the Old Stone House Along the Oregon Trail Bed & Breakfast. They have four daughters and eight grandchildren. Sabra can be reached at sshirrell@kdheks.gov.

American Recovery and Reinvestment Funds

The American Recovery and Reinvestment Act of 2009 (ARRA): Individuals with Disabilities Education Act (IDEA) Part C funds are one-time funds made available as a unique opportunity to improve early intervention services and results for infants and toddlers with disabilities. These funds are a supplement appropriation to the annual Part C grants and must be used consistently with current IDEA, Part C statutory and regulatory requirements,

including the payor of last resort and restricted indirect cost requirements. These funds may be used for any allowable purpose, including direct provision of early intervention services and implementing state-wide comprehensive, coordinated, multidisciplinary, interagency system to provide early intervention services. The funds need to be used for short-term investments that have the potential for long-term benefits. Below is the first year plan for the funding for Kansas Part C Infant-Toddler Services for KDHE and the 37 local programs.

ARRA Funding 1st YEAR 1.9 Million Per Year

- \$1.4 Direct Services to Networks
 - \$500,000 KDHE Infrastructure & Statewide Professional Development
1. \$1.4 million dispersed through Infant/Toddler Funding Formula. Each Network will track this funding separately and report how they did not supplant.*
 2. \$130,000 KITS - A) Family Service Coordinator Web-Based Toolkit & Resources - To develop an interactive Family Service Coordination (FSC) toolkit that will be housed on the KITS website. B) Early Intervention 101 Web-Based Training Modules - Identify, modify, and/or create a foundational early intervention module set which will include information on early intervention practices, early childhood development, assessment, evaluation, IFSP development, development of functional IFSP outcomes, concepts of

family centeredness, information on working with parents/family members/caregivers, information on relationship based early intervention, and information on evidence based practices-primary coaching with parents and colleagues. C) Train the Trainer- Expansion of the Part C train the trainer model.*

3. \$50,000 Kansas Association of Infant and Early Childhood Mental Health - Expand and enhance the early childhood professional development with the early childhood mental health endorsement system to create a uniform set of standards for Part C infant-toddler professionals and to support the development of infant and family professionals. This endorsement system would assure that the Part C early intervention providers/partners have access to foundational early childhood mental health/social emotional development, one of the five developmental domains infant-toddler providers evaluate for eligibility requirements.*

4. \$22,272 FIT/OT Project - EBP Coaching- To provide training, technical assistance and consultation for occupational therapist (OT), physical therapists (PT) and team members currently providing services in the Infant-Toddler Networks to infants and toddlers with developmental delay/disability and their families. OT services, describing best practices are required components of the Infant-Toddler program (Part C of IDEA).*

5. \$50,000 Autism Diagnosis and Training - Provide professional development trainings for early childhood professionals working with

American Recovery and Reinvestment Funds concludes

children ages 0-3 on diagnosis and intervention strategies of autism spectrum disorders (ASD). These professional development trainings will provide the expertise and knowledge to local Infant-Toddler Networks to assist children and their families to prepare for a successful future.*

6. \$50,000 KSD Sound Start Train the Trainer - These services include providing the Infant/Toddler Networks providers with knowledge and skills related to this population through training and technical assistance.*

7. \$23,972 Assistive Technology Project - Access to accessible information on demand for local providers including a simple "how to" electronic tool that can be left with parents, family members, and caregivers with step by step directions on how to use a device. Also a basic library of information on assistive technology devices that would remain relevant to providers and families for three years based on past development cycles in technology.*

8. \$30,000 Part C/Office of Special Education Programs (OSEP) Fiscal Requirement Training for KDHE - Provide consultation to KDHE Part C staff to assist in the preparation of fiscal procedures that said staff can use when conducting site visits of local Infant Toddler Services Networks that are currently providing services to infants and toddlers with developmental delay/disability and their families. KDHE responsibilities for fiscal oversight are required components of the Infant-Toddler Services program (Part C of IDEA). The purpose of this project is to help assure the fiscal/financial responsibility as required by OSEP and Part C of IDEA.*

9. \$13,000 Laugh2Learn - Present two and one half days of intense mediation training focusing on mediation for Part C of IDEA. Provider will provide master copies of all teaching materials. Mediation is a required component of the infant-toddler program (Part C of IDEA).

10. \$92,068 Start-up Assistance for two Networks (Dickinson and Leavenworth County).

11. \$4,250 The Kansas Statewide Low Vision Project coordinated by the Kansas State School for the Blind Outreach Department, has piloted Pediatric Low Vision Collaboration Clinics with Dr. Linda Lawrence, an ophthalmologist from Salina, Kansas. Dr. Lawrence specializes in working with infants and toddlers, many who have been diagnosed with additional challenges. This clinic is to assist families and service providers in better understanding the child's eye condition, within the context of the child's overall birth and medical history. Dr. Lawrence conducts a functional eye examination and shares a child specific impression and plan, which will assist the child in using his/her vision more efficiently. These clinics are held at the tiny-k program (or local community site) to maximize family and team members participation.*

Year 1 TOTAL \$459,312

Remaining \$40,688 for Child Find/
Public Awareness Video/Brochures,
Medical Community

* Two year projects with commitment to second year of \$373,494. Year 2 in planning process.

National Autism Standards Report

The National Standards Project (NSP) was established in 2008 to conduct a comprehensive review of interventions for Autism Spectrum Disorders (ASD) that could reasonably be implemented in most school or behavioral treatment programs. The project was committed to establishing a transparent review process for evidence-based treatments for individuals under the age of 22. Specifically excluded from the NSP focus were studies of medication or nutritional supplements, complementary/ alternative medication interventions (with the exception of curative diets), individuals with psychosis or diagnosis other than ASD, and predictors of outcomes.

In September, the NSP released a 160-page report that can be downloaded from the National Autism Center (NAC) website <http://www.nationalautismcenter.org/> (Note: the appendix, including research references, makes up 60 pages of the report). You will be asked to provide your name and email address and given the option of downloading the full report, a two-page summary, and/or a report of the findings and conclusions. At

*National Autism Standards
concludes on page 7*

Part B 619 Coordinator's Corner

Birth – Five Administrator's Summit

On September 29, 2009, the first “Birth to Five Administrator’s Summit” took place in Junction City. This day provided administrators of our programs: Part C, Parents As Teachers, Four Year Old at Risk, Pre K Program, and Early Childhood Special Education to come together to learn about the diversity of early childhood programs and to discover where there may be missed opportunities for collaboration within local communities. The day began with a presentation by Dr. Jason Eberhart-Phillips who shared brain research data highlighting the importance of the early years. We then shared an overview of the programs that exist within our field. We shared some of the findings from Dr. Gayle Stuber’s research on school readiness and highlighted the things that our programs do that matter to early learning. We heard from the Hays area on the collaborative work they do with Head Start and Early Head Start as well as the school district. After lunch, we participated in an activity to see how many early childhood agencies and support or resources could be identified in our local communities and then made a plan for how we may move forward with our new knowledge. Everyone shared a couple of things they recognized from their perspective from our time together. We closed with an inspirational message from Pat Anderson from Geary County.

I wanted to share this with you because if you or your administrator attended, you have an opportunity to keep this discussion going. Consider

how you may want to contact others in your community to walk through this exercise. Who else could you include in discussions about early childhood education? What benefits to families and children may result in your community approaching the early childhood continuum (birth – third grade)? If you or your administrator were not able to attend, the presentations and handouts will be available soon on the Early Learning Services Unit page on the KSDE website — www.ksde.org.

I believe that outcomes for children, transition practices, stronger training and professional development opportunities, and meaningful family involvement are possible winners if this approach is taken. We look forward to reviewing the information shared with those who participated and in tabulating the results of the survey sent following the conference. If you weren’t able to attend, I hope that you will find someone who did and ask them about it.

We do a lot of things really well in Kansas for young children and their families. Take time to celebrate the good work that you do and plan for the next level!

–submitted by Carol Ayres, Early Childhood Section 619 Coordinator, KSDE



Cooperation, Coordination, Collaboration continued

the same, or were perhaps clarified, but the work itself did not vary much. There may have been more or less of one thing or another, but the identity of that individual or unit did not waiver. If something were to break down within either one of those models, the result would be inconvenience, and perhaps inefficiency, but in the end, the individuals or units could move back to their old ways and continue on with their work. Nothing new was created.

There are times however, when cooperation or coordination is not enough. When current systems or groups do not have the means to serve a new consumer group, or improve their services to better support their consumers, it may be necessary to join into a collaborative relationship with another group, a group that in the past would never have been considered for cooperation or coordination efforts because of their deeply contrasting ideas and philosophies. Remember how Merriam-Webster Online further defined collaboration as cooperating with or willingly assisting an enemy of one’s own country, especially an occupying force? I believe this definition helps convey the true complexity of collaboration, and hints at the inherent challenge of this model of working together.

I am not suggesting that collaborating early childhood groups started out as enemies. For our purposes, the enemy is the norms, status quo, and old way of doing something that stand in the way of creating something far more superior than what one group could have done on

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Cooperation, Coordination, Collaboration continued

it's own. The goal of collaboration is not to establish a positive relationship between partnering groups, but the pursuit of a specific result. Collaboration relies on both cooperation and coordination of efforts, but goes far beyond these two working relationships. Collaboration isn't about consensus building and not everyone needs to be part of the collaborative brainstorm. A true collaborative effort creates something new (e.g. a new philosophy, way of doing something, changes in overall personnel roles) and is ever evolving and dynamic in nature. Collaboration is hard work, and needs constant tending. It requires a great deal of time and communication. The collaborative process merges differing views and conflicting ideas, while morphing into something that was previously unimaginable.

A good example of where collaborative efforts in early childhood can benefit consumers is regarding the provision of special education services in natural or least restrictive environments. The consumers in this scenario are young children with disabilities and their families. Historically, special education services have been provided in restrictive settings with special education personnel providing all of the instruction. Regular early childhood settings did not employ staff with the needed expertise or credentials for providing specially designed instruction, and therefore did not serve this population of children. At the same time, regular early childhood settings continue to enroll children who have significant needs (though not identified as having a disability) and could benefit from the knowledge and expertise of special educators. Collaborative partnerships between these two groups are an opportunity to create something new, by morphing the old, creating a newly

shared vision that benefits all involved, especially the consumers. But for this to work, partners must understand that there is a lot of "giving up" in collaboration. If both parties are not willing to give up their old ways, and create something new, then they are not really engaging in collaboration.

Are you ready now to ask yourself the hard questions? Given what you have learned about the three "C's" what working model does your group work under? Has your role really changed since working with this other group? Has their role changed? Are you doing things you were not previously trained to do, but have taken on (with adequate training and support in the process) to achieve some type of joint goal? Do you have scheduled time where you and your collaborative partners sit down and plan together, both bringing ideas to the table, but leaving with a merging of the two, or do you coordinate so that you both continue to have a piece of something and are now clear on who does what, when and where? Do you respect your partner, and value what they are bringing to the table and vice versa? Do you find yourself plotting to "win" the debate and convince the team to follow your idea, or are all ideas considered in the development of the end product? Is one group insisting it cannot change roles, responsibilities, or any piece of the program, but it will allow you to work with them as long as you do what they say? Is that collaboration? At best, it is cooperation. Nothing new has been created, no joint vision or goal has been established, it is a working relationship, but is status quo.

If you have been working in a relationship that has been defined as collaborative when in fact you have been

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National Autism Standards Report concludes

the website, you also can request a copy of the upcoming manual for autism educators, *Evidence-based Practice and Autism in the Schools*, based on the NSP report and due to be released in October 2009.

—submitted by Phoebe Rinkel

Autism Across the Life Span A Conference for Professionals and Families

November 6-7,
2009

<http://kcart.ku.edu/autism-across-lifespan/>

kcart@ku.edu

Wichita
Airport
Hilton

Special Education Advisory Council and State Interagency Coordinating Council Joint Meeting on November 18, 2009

The Special Education Advisory Council (SEAC) and the Kansas Interagency Coordinating Council on Early Childhood Developmental Services (SICC) have advisory responsibilities regarding children with disabilities under the age of five. In Federal law, the SEAC is specifically identified to advise the State Department of Education regarding services for children age three to five. Also under Federal law, the SICC has the duty to advise and assist the lead agency for Part C, the Department of Health and Environment, regarding services for children birth to age three. However, in Kansas, under State Statute, the SICC has also been given the task to provide assistance on matters and services related to children age three through five. Therefore, in our State, these two groups have some overlap. In an effort to better coordinate, the two groups are going to meet with the intent to improve communication. This meeting, as any other meeting of these groups, is an open meeting. You are invited to join the meeting in person at the KSDE Board Room or by phone (866-620-7326, enter conference code 7852913097, Leader (host only), dial PIN 61028. To the right is the agenda for this meeting.

Agenda

9:00 am	IO	Welcome & Introductions	Eva Horn & Neil Guthrie
	AI	Approval of agenda	Eva Horn & Neil Guthrie
	AI	Approval of minutes from previous SICC meeting	Eva Horn
	AI	Approval of minutes from previous SEAC meeting	Neil Guthrie
	IO	Purpose of joint meeting	Colleen Riley & Tiffany Smith-Birk
	IO	SEAC - description of history and role of the council, membership, affiliations and how council information is shared throughout Kansas	Bert Moore
	IO	SICC - description of history and role of the council, membership, affiliations and how council information is shared throughout Kansas	Eva Horn & Doug Bowman
	IO	Resources for Early Education in Kansas: <ul style="list-style-type: none"> • KS Inservice Training System (KITS) • KS Instructional Support Network (KISN) • P-20 • KS Division for Early Childhood (KDEC) 	Misty Goosen Lee Stickle Gayle Stuber Dale Walker
11:45 am	RI	Public Forum/Public Comment	
12:00		Lunch (served on-site)	
	RI	SPP/APR Indicator update <ul style="list-style-type: none"> • Part C • Part B 	Tiffany Smith-Birk Carol Ayres
	RI	Mock OSEP Verification Visit Summary	Colleen Riley & Tiffany Smith-Birk
	RI	Agency & Council Member Reports - related to students ages birth - 5 & their families	All
	DI	Future role of SICC & SEAC <ul style="list-style-type: none"> • Joint member SEAC - role • Summer orientation • Annual joint meeting • Communication between advisory councils 	All
4:00 pm		Adjourn	

AI=Action Item, DI=Discussion Item, RI=Receive Item, IO=Information Only

Cooperation, Coordination, Collaboration concludes

merely cooperating or working in a coordinated manner you may feel confused, frustrated, or perhaps apathetic. You may be confused because you are not seeing anything inherently new in what you or others are doing. You may be frustrated because you are being asked to change what you do when members of the other group have made no changes. You may feel apathetic because there is no clear vision of what is to be accomplished, so you are just going along. If you had a clear understanding that you were working only at a cooperative level (you or your organization is receiving some benefit from complying with this outside group) or coordinated level (your work or other work has been streamlined or gaps have been filled by working with the outside group) it might elicit the previously stated emotions. On the other hand, if you are truly working in a collaborative partnership, there will be times when you feel overwhelmed with the complexity of the partnership and at other times you will feel exhilarated and proud at what has been accomplished. Understanding the type of working relationship helps individuals have a better idea of their role, responsibility, and the intent of the partnership.

References

- Denise, L. (1999, Spring). Collaboration vs. C-three (cooperation, coordination, and communication). *Innovating*, 7(3).
- Merriam-Webster Online. Retrieved October 6, 2009, from <http://www.merriam-webster.com/dictionary/coordination>, <http://www.merriam-webster.com/dictionary/Cooperation>, <http://www.merriam-webster.com/dictionary/collaboration>

Evidence-Based Practices: Four Big Ideas in Early Childhood High Plains Education Cooperative

Editor's note: High Plains Education Cooperative is one of two preschool and three infant-toddler programs to receive the 2008-09 Best Practice Award (see http://kskits.org/resources/2008_2009winners.shtml)

High Plains Education Cooperative (HPEC) is a special education cooperative that covers 10,000 square miles and 17 school districts in Southwest Kansas. HPEC's direction over the past several years has been to move to the itinerant model and to support children in settings where they would be if they did not have a disability. HPEC currently has 10 early childhood special education (ECSE) teachers that support children aged three to five with disabilities through a continuum of services. At present, three teachers have ECSE classrooms with peer models. The three teachers also support students in their homes, daycares, play-groups, preschools, and At-Risk 4 classrooms. The remaining seven ECSE teachers are itinerant and provide special education support within homes, daycares, preschools and At-Risk 4 classrooms.

High Plains teachers and their early childhood (EC) administrator attended an *Evidenced-Based Practices in Early Intervention Institute* in 2008 with Dathan Rush and M'Lisa Shelden. From that point on, HPEC has received technical assistance from KITS to implement the "4 Big Ideas" that came out of the Institute: Primary Coach Approach to Teaming, Coaching, Routines Based Interventions and Natural Settings. Our practices are consistent with the National Early

Childhood Technical Assistance Center Workgroup on Principles and Practices in Natural Environments (November, 2007, February 2008). The evidence base for these practices can be accessed at <http://www.coachinginearlychildhood.org>, <http://www.fippcase.org>, and <http://www.nectac.org/topics/families/families.asp>

Our current practices are exemplified in our statements of Core Beliefs:

1. HPEC believes in providing services to children in their natural settings (those settings the child would attend if they did not have a disability).
2. HPEC believes in embedding a child's instructional goals within their daily activities. Learning can occur throughout each day and between visits of professionals.
3. HPEC believes children learn best through developmentally appropriate play and by participating in a variety of learning opportunities.
4. HPEC supports the concept of Primary Coaching where one member of a multidisciplinary team provides support to a family or other caregiver while receiving coaching and supports from other team members.
5. HPEC believes that parents are their children's best teachers. Coaching and collaboration occurs

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Evidence-Based Practices: Four Big Ideas in Early Childhood continued

between the EC professional and the parent to develop the most appropriate learning goals and activities for children.

6. HPEC believes in continual staff development. Research based practices and interventions are integral to support services.

HPEC has used a strategic planning process to change the model of support services for students with disabilities age three to five. By bringing services to the child and more specifically to those adults who with supports and resources can enhance their children's learning and development through everyday experiences, HPEC hopes to provide a smooth transition for families from Part C to Part B services. We have identified a specific plan for staff development, implementation of practices and tools to evaluate the effectiveness of our process. The following provides further description of HPEC's EC practices.

1. HPEC collaborates and problem solves with other adults (parents, daycare providers, and/or preschool teachers) to provide appropriate early intervention measures to support children's development to prevent them from needing special education.

2. If students require further supports, HPEC staff complete activity based assessments using the Assessment, Evaluation, and Programming System (AEPS) to best identify strengths and areas of concern. Parents or other caregivers are consulted using routines based interviews to assess the child's interests and typical daily activities.

3. All information gathered is writ-



*Dana Pfanestiel & Amy Spencer
accepting certificate of recognition for
High Plains Education Cooperative*

ten in an Education Team Report/ Individualized Education Program (IEP). Special education teams meet with parents and other caregivers to review all data and to determine if the student is eligible for and if the student needs specially designed instruction and related services (an IEP).

4. All attempts are made to provide special education support services in the child's natural setting. A continuum of support services is reviewed including consulting support as well as direct support for the child in the home, daycare, play group, preschool classroom or At-Risk 4-year-old classroom.

5. At IEP meetings, team members discuss which staff person would be most appropriate to be the Primary Coach. The Primary Coach is the person who works directly with the adults in the child's life to help structure each day with learning opportunities to help the child improve skills. All other team members meet bi-monthly with the Primary Coach to reflect and problem-solve best strategies to help children.

6. HPEC teams have been trained in coaching practices as a method

of communication with parents and other caregivers. HPEC staff does not come into the relationship as an expert but rather as a support person that helps to elicit meaningful and easily implemented activities into the child's daily routine.

7. HPEC teams bring knowledge of developmentally appropriate practices and research based strategies for helping children. Parents and other caregivers bring expertise about the child.

8. Student goals are no longer written based on skill deficits but rather focus on functional and meaningful activities that address family and caregiver's areas of need and priorities.

9. Intervention is not limited to the time the special education staff spends with the child. Intervention also happens during the child's daily routines and activities when no ECSE teacher or related service provider is present.

Next steps for HPEC are to refine our practices and to integrate our "4 Big Ideas" as we focus on positive behavior supports. We will also continue to look for positive trends in our transition data EC-LRE data and Early Childhood Outcome data.

Last year ECSE teachers and their administrator developed a matrix to describe their progress in implementing their original "4 Big Ideas". In the process they realized they also made significant changes in goal writing and assessment practices. The impact of HPEC's systems change in early childhood practices is described in the matrix on right.

—submitted by Shelly Harris

High Plains Progression of Four Big Ideas

	WE USED TO...	BUT...	NOW WE.....	SO THAT.....
ASSESSMENT	<ul style="list-style-type: none"> • Conduct Trans-disciplinary Play-Based Assessments • Conduct assessments in our own classrooms • Assess deficits in skills 	<ul style="list-style-type: none"> • ECO requirements called for more standardized assessment • We were not conducting TPBA in true sense/forms • We were not assessing the child in their natural settings • We were only getting a snapshot of child 	<ul style="list-style-type: none"> • Conduct activity based assessment using AEPS, family report, and/or SATIRE (Scale for the Assessment of Teachers' Impressions of Routines and Engagement (2003). May be downloaded at http://www.siskin.org/resources/pdf/SATIRE.pdf) to gather information • Conduct assessment based on child's interests, assets, and context of functional and meaningful interactions 	<ul style="list-style-type: none"> • We provide a more comprehensive assessment gathering information from multiple sources • We can better target interventions to routines • We can meet ECO requirements
ROUTINES-BASED INSTRUCTION	<ul style="list-style-type: none"> • Work on skills/deficits • Pull students to the side to work on skills 	<ul style="list-style-type: none"> • We were focusing on rote drill and practice • We worked on one skill at a time • The responsibility of learning fell to ECSE 	<ul style="list-style-type: none"> • Embed learning in routines throughout the day • Target the priorities of caregivers 	<ul style="list-style-type: none"> • Multiple learning opportunities are provided to the child • Caregivers' capacity is increased
NATURAL SETTINGS	<ul style="list-style-type: none"> • Have ECSE classrooms • 3 year olds came to classrooms • Not provide home visits 	<ul style="list-style-type: none"> • Parents were not involved • Children were segregated 	<ul style="list-style-type: none"> • Provide services to the child in their natural setting • Set up interventions where they are having difficulty 	<ul style="list-style-type: none"> • Children are with their peers • Parents and/or teachers with necessary supports and resources can enhance the child's learning and development

High Plains Education Cooperative Progression of Four Big Ideas concludes

	WE USED TO...	BUT...	NOW WE.....	SO THAT.....
GOAL WRITING	<ul style="list-style-type: none"> • Write goals that were skill and deficit based • Write multiple goals • Write goals in each developmental domain of concern 	<ul style="list-style-type: none"> • Goals were not functional or respective of parent or teachers priorities 	<ul style="list-style-type: none"> • Write goals that are functional • Prioritize one area based on caregiver's report • Write goals that are trans-disciplinary 	<ul style="list-style-type: none"> • Child can fully participate in their natural environments • Child can use multiple learning opportunities to make progress on goals
PRIMARY COACH	<ul style="list-style-type: none"> • Be the expert • Have all team members visit the classroom or home separately • Be directive 	<ul style="list-style-type: none"> • Plans were disjointed and activities were not carried out • Teaming with professionals was hit and miss • Team members had difficulty releasing their roles 	<ul style="list-style-type: none"> • Have set team meetings • Collaborate • Identify one person as the lead person for a family 	<ul style="list-style-type: none"> • The primary provider's main goal is to strengthen the teacher or parent's capacity to provide and increase the number, frequency, variety, and quality of interest based everyday learning opportunities afforded to their children
COACHING	<ul style="list-style-type: none"> • Tell the parents and teachers what to do • Have students come to our classrooms • Come into the relationship as the "experts" 	<ul style="list-style-type: none"> • We didn't have follow through • Parents thought intervention was the responsibility of teacher • We were often frustrated and concerned about not being effective • We didn't see as much progress 	<ul style="list-style-type: none"> • Primarily work with adults, not children • Come in as equals to brainstorm ideas for routines • Strengthen parent capacity and learning 	<ul style="list-style-type: none"> • Caregivers can follow through with activities, therefore, increasing student progress • Children have multiple learning opportunities to establish skills



New Items at the Early Childhood Resource Center

- Squires, J. & Bricker, D. (2009). Ages & Stages Questionnaire-3. Also available in Spanish.
- Arick, J.; Loos, L.; Falco, R.; Krug, D. (2004) The STAR Program. Includes levels I, II, and III with training videos.
- From Landlocked Films: Language and Culture: Respecting Family Choices (2004); Full Circle: Language and Literacy at Home and at School (2007); Turning 3, from C to B: Age 3 Transitions for Kids with Special Needs (2008); The Dance of Conversation: Strategies for Encouraging Children's Language Development (2005); Beyond Words (2008).
- Santos, et al. (2007). What Works Briefs.
- From Center on Social and Emotional Foundations for Early Learning Positive Solutions for Families (2008); Practical Solutions for Teaching Social Emotional Skills (2007); Promoting Social Emotional Competence (2006); Promoting the Social and Emotional Competence of Infants and Toddlers, Training Modules (2006); Promoting Social Emotional Competence, Training Modules (2006); Promoting Social Emotional Competence, Preschool Training Modules, Spanish (2008).
- Bambara, L.; Knoster, T. (2009). Designing Positive Behavior Support Plans.
- Cornish, M., (2008). Promising Practices for Partnerships with Families in the Early Years.
- Miller, W.; Rollnick, S. (2002). Motivational Interviewing: Preparing People for Change.
- Lareau, A. (2003). Unequal Childhoods: Class, Race and Family Life.
- Fadiman, A. (1997). The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures.
- Mahoney, G.; MacDonald, J. (2007). Autism and Developmental Delays in Young Children.



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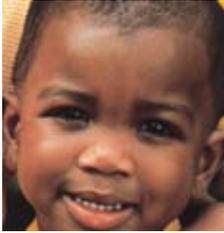
28th Annual KDEC Conference: Meeting the Challenges - Early Childhood 2010



February 25-26, 2010
Wichita Airport Hilton

The KDEC Conference Planning Committee is busy preparing for the 2010 Conference to be held in Wichita on February 25th and 26th. Our theme this year is *Meeting the Challenges*. We're excited to announce that our keynote on Thursday will be Jill Molli, from Loving Guidance. Jill is a dynamic presenter and a Conscious Discipline trainer. On Friday, Barbara Wolfe, from the University of St. Thomas will be our keynote. Barbara's presentation will be Fostering Young Children's Friendships. Both Barbara and Jill will be available for a breakout session following the keynote. Proposals for breakout session presenters are still being accepted. Additional information and Call for Proposals can be found at www.kdec.org. Please feel free to contact Kathy East-erly at keasterlyhlc@olatheschools.com for further information.

**Training for
Early Childhood
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