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# Learning Guide 3.9-

# Environment Practice Profile

**Environmental practices** refer to aspects of the space, materials (toys, books, etc.), equipment, routines, and activities that practitioners and families can intentionally alter to support each child’s learning across developmental domains.

## **How to use**

Module 3 Environment Practice Profile connects DEC Recommended Practices for Environment with how this practice contributes to family and child outcomes and describes example behavior of practitioners that are associated with each practice. Practitioners who exemplify practices within the expected/proficient range are able to generalize skills to a wide range of settings and contexts. Practitioners who exemplify practices within the developmental range are ready for increased coaching. The developmental range is included as a way to help practitioners identify practices that are approaching proficient but are missing essential components that contribute to family and/or child outcomes. Practitioners who exemplify practices within the unacceptable range may require more assistance in the large-scale implementation infrastructure. This can include more focused professional development and intensive coaching as well as issues at the administrative level (hiring and credentials requirements) (Metz, Bartley, Blase, & Fixen, 2011).

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| Core Component | Contribution to the Outcome | Expected/Proficient\* | Developmental | Unacceptable |
| **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.** | Practitioners must provide services and supports in ways that enhance the capacity of an environment (during daily routines and within natural and inclusive environments) to influence the capacity of the child. | *An occupational therapist visits a family during mealtime in their home to help the parents problem solve positioning or feeding strategies, so their child can eat and socialize with the entire family instead of eating before or after the rest of the family.* | *An occupational therapist works solely with the child to help improve her positioning and feeding strategies but does not extend this to actual family mealtimes.* | *An occupational therapist maintains her therapy plan working with the child on strengthening her grasp even after the family mentions the problems that are occurring during mealtimes.* |
| *A physical therapist goes on a shopping trip to assist a parent of a child who uses an assistive device for mobility, to develop a new routine to ensure the child’s safety while navigating the parking lot and store.* | *A physical therapist listens to a parent talk about their struggles with the assistive device when they are running errands. The therapist brainstorms some new routines to help the parent and child navigate safely.* | *A physical therapist does not consider the natural environment of the child when providing services related to the assistive device.* |

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| **E2. Practitioners consider Universal Design for Learning principles to create accessible environments.** | Environments that are designed within a Universal Design for Learning approach are better suited from increasing the capacity of all children. | *Program directors and early childhood teachers ensure that the physical environment of the early childhood center and classrooms are accessible to all children and allow for easy traffic flow between areas and activities.* | *Program directors and early childhood teachers make adjustments to the environment to increase accessibility and traffic flow only when a particular child’s needs necessitates a change.* | *Program directions and early childhood teachers in a community center do not make adjustments to the old building to include ramps and wider passages through cramped classrooms.* |
| *Teaching and learning opportunities are embedded throughout children’s daily routines and activities regardless of where children spend time. For example, the speech therapist supports family members to prompt their child to use the word “more” while eating dinner, taking a bath, and playing in the park.* | *Teaching and learning opportunities are accessible to children who are able to participate in traditional routines and activities, whereas children who have differentiated needs are sometimes left out. For example, a speech therapist supports family members to prompt their child to sue the word “more” only while eating dinner but has not differentiated the skill to other activities.* | *Teaching and learning opportunities are viewed narrowly as occurring only during direct instruction times (i.e. small group or circle time). For example, the speech therapist works with at child to use the word “more” during therapy time using flashcards and contrived activities.* |

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| **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.** | Collaboration among team members is essential to consider the unique contextual factors that will increase children’s participation and access. | *The itinerant early childhood special education teacher works with a childcare provider to modify transitions in the childcare setting by posting a visual schedule of the daily routine.* | *The itinerant early childhood special education teacher suggests to the childcare provider that they modify their transitions to make them smoother for children with disabilities.* | *The itinerant early childhood special education teacher does not speak up with the childcare provider when she witnesses developmentally inappropriate transition practices occurring in the setting.* |
| *A developmental specialist works with family members to find resources to modify their home so their child who uses a walker can move easily from place to place.* | *A developmental specialist provides a family an example of an ideal layout for their home to help accommodate their child with a walker.* | *A developmental specialist does not assist the family in accommodating the home for the child’s walker and as a result the child is carried to difficult to reach places rather than using his walker.* |
| *An early childhood teacher modifies a popular board game (e.g., he adds an easy to grasp foam handle to game pieces) so that a child who has difficulty grasping can access and play the game with classroom peers.* | *An early childhood teacher sits with a child who has difficulty grasping the game pieces of a board game so he can move the pieces for the child when it is her turn.* | *An early childhood teacher tells a child who has difficulty grasping to choose a different place to play when she shows frustration in accessing the board game.* |

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| **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.** | Practitioners along with family must identify when a child might benefit from assistive technology (AT) and consider other environmental factors, such as the physical space, the beliefs and values of the family, and how and when the AT will be used. | *A physical therapist, when developing goals or objectives with family members and other members of the child’s team, discusses assistive technology as a strategy to help meet the child’s goals.* | *A physical therapist thinks that assistive technology might help a child meet her goals and tells the parents to ask the child’s teacher.* | *A physical therapist does not keep up to date with advances in assistive technology and as a result is unable to participate in an informed conversation about how to best meet the child’s goals.* |
| *A speech language pathologist works with family members to incorporate the use of a child’s voice output device across the family’s daily routines (e.g., using the device during the child’s morning routine so he can communicate what he wants to eat for breakfast).* | *A speech language pathologist brings a voice output device to her therapy session but does not coach the family in ways to incorporate the technology across routines.* | *A speech language pathologist continues working with a child to develop oral language skills without considering other communication devices to help the child participate in daily routines.* |

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| **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.** | Practitioners must take all information across caregivers, settings, and schedules, into consideration before recommending assistive technology. Also, practitioners must include family and other adults throughout the assessment and training process. | *An early childhood special education teacher lends families assistive technology devices (e.g., switches, voice-output systems, adapted electronics) from the school’s assistive technology library, so they can evaluate these devices before purchasing them.* | *An early childhood special education teacher shows a family assistive technology devices located at the school but does not allow the family to take them home to try out.* | *An early childhood special education teacher does not access assistive technology devices for a young child with expressive language delays.* |
| *A speech language pathologist supports family members as they try a communication device that has four prerecorded messages prior to deciding on a more complex device with computer- generated voice output and additional messages.* | *A speech language pathologist provides a family with a communication device that has prerecorded messages but does not train the family in the use of the device.* | *A speech language pathologist decides against providing a communication device for a child because she believes the family will not put in the necessary effort to learn how to use the device correctly.* |

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| **E6. Practitioners create environments that provide opportunities for movement and regular physical activity to maintain or improve fitness, wellness, and development across domains.** | Practitioners should gather information and support families as they discover strategies for safe and regular play that incorporates movement and exploration. | *An early childhood teacher incorporates movement and physical activities into his preschool classroom’s daily routines. For example, each day children choose a movement or stretch (e.g., hopping, marching, touching their toes) and the number of the month determines how many movements the children complete together during circle time.* | *An early childhood teacher schedules 45 minutes of outside time daily to satisfy the physical activity needs of the active children in her class. While inside the classroom, children are expected to work and play quietly and without lots of physical activity.* | *An early childhood teacher doesn’t consider children’s physical activity as important as their cognitive and social/emotional development and as a result incorporates few opportunities for movement in the daily routine.* |
| *A physical therapist works with families and other adults to identify strategies in the environment to encourage children to walk, crawl, wiggle, scoot, reach, roll, kick, or move in any other way they can. For example, she shows family members how to place desired toys in sight but out-of- reach to encourage locomotion.* | *A physical therapist works with a child to encourage walking, crawling, wiggling, scooting, reaching, etc. She does not include the family or other important adults to identify appropriate strategies for the child.* | *A physical therapist works on discrete skills a child needs (i.e. sitting unassisted) without considering the larger implications of fitness, wellness, and development across domains.* |

\*Note: Source of the examples in the expected / proficient column are adapted from: DEC (2016). DEC recommended practices in early intervention and early childhood special education with examples.

## **References**

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