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# Learning Guide 4.9-

# Teaming and Collaboration Practice Profile

**Teaming and Collaboration** practices promote and sustain collaborative adult partnerships, relationships, and ongoing interactions to ensure that programs and services achieve desired child and family outcomes and goals. The family is an essential member of the team as well as practitioners from multiple disciplines. The practices are demonstrative of strategies for interacting and sharing knowledge and expertise in ways that are respectful, supportive, enhance capacity, and are culturally sensitive.

**How to use this practice profile?**

“Module 4 Teaming and Collaboration Practice Profile” connects DEC Recommended Practices for Teaming and Collaboration with how the practice contributes to family and child outcomes and describes example behavior of practitioners that are associated with each practice.

| **Core Component** | **Expected/Proficient[[1]](#footnote-1)** | **Developmental[[2]](#footnote-2)** | **Unacceptable[[3]](#footnote-3)** |
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| **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.** | *A physical therapist and special instructor meet to talk with the family about the child’s current abilities and progress and modify current strategies to align with the child’s current level of performance.* | *A physical therapist and special instructor exchange emails about the child’s current abilities and progress and then the special instructor modifies the current strategies.*  | *A physical therapist meets with the family separate from other providers to modify the family’s current strategies. She has not observed the child in various settings to get a better understanding of the child’s current level of performance.* |
| *An early childhood teacher discusses her ideas and concerns about a child’s progress with the consulting speech language pathologist and together with the family they develop additional teaching strategies.* | *An early childhood teacher has concerns about a child’s progress and asks the speech language pathologist to work on more social language during therapy.* | *An early childhood teacher has concerns about a child’s progress in speech but assumes the speech language pathologist is working on these during therapy time.* |
| **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.** | *An early childhood teacher participates in the child’s monthly team meetings convened by the service coordinator to discuss progress and share ideas for supporting goals in the classroom setting.* | *An early childhood teacher comes to a child’s monthly team meetings but feels that her input is not as important compared to the related service providers and doesn’t offer ideas for supporting goals in the classroom.* | *An early childhood teacher often forgets to set her calendar for the monthly team meetings so she has missed the last three out of four months.* |
| *A family childcare teacher spends a few minutes at pick-up and drop-off to exchange information about the child’s performance with the family.* | *A family childcare teacher shares information with families when she thinks of it.* | *A family childcare teacher does not exchange information with families unless the family specifically asks for something.* |
| *An itinerant teacher works with the classroom teacher to model and demonstrate a strategy to support a child’s development and learning during outdoor play.* | *An itinerant teacher leaves a handout of helpful ideas for the teacher to implement during outdoor play.* | *An itinerant teacher tells the classroom teacher that she can’t come observe or model during outdoor play because her schedule is already booked for the month.*  |
| **TC3 Practitioners use communication and group facilitation strategies to enhance team functioning and interpersonal relationships with and among team members.** | *A program director acknowledges gaps in communication among teachers and teacher aides and develops a plan to remedy the problems.* | *A program director recognizes the gaps in communication among her staff but finds it difficult to schedule time for teachers to meet.* | *A program director assumes that communication among teachers and teacher aides is working well without checking with her staff.* |
| *A team leader uses a round robin technique in a group meeting to ensure that all team members, including those who typically are quiet, have a chance to express their perspectives and ideas on an issue.* | *A team leader gives time during the end of the meeting for any team member to have a chance to express their perspectives or ideas.* | *A team leader finds meetings to be rushed and usually runs out of time to have other members of the team speak and express their opinions.*  |
| **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.** | *A service coordinator learns about reimbursement policies and helps families, as needed, to understand the impact of using non-public funds to pay for services.* | *A service coordinator knows that there are nonpublic funds available to pay for services and lets families know the names of organizations.* | *A service coordinator thinks that nonpublic funds are reserved only for certain kinds of families so she doesn’t share the information with the families she serves.* |
| *A social worker compiles a resource book on programs, funding options and policies to be used by families and other team members.* | *A social worker has a resource file of programs, funding options, and policies in his office.* | *A social worker haphazardly collects information on resources, programs, funding options, etc. but has no organized way to share the information.* |
| *A case manager invites contributions and perspectives of each team member about placement options to meet a child and family’s needs.* | *A case manager asks the early interventionist about placement options for a child but does not ask the speech language pathologist or occupational therapist.* | *A case manager reviews a child’s file to determine the family’s needs for a placement option and then makes a recommendation before talking with the team.* |
| **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.** | *During a home visit, the occupational therapist shares strategies with parents that were developed in conjunction with the physical therapist.* | *An occupational therapist and physical therapist collaborate on strategies but each therapist presents the strategies to the family in differing ways causing confusion.* | *Without consulting the physical therapist, the occupational therapist shows strategies to a family that the physical therapist had already demonstrated.* |
| *An early childhood teacher, who serves as the primary contact for the family, receives instruction, feedback, and support from the itinerant hearing specialist to provide individualized support for the child during transitions within the classroom.* | *The early childhood teacher is the primary contact for the family but she does not have a good system for documenting the instruction, feedback, and support from the itinerant hearing specialist and often forgets to use certain strategies.* | *The early childhood teacher who sees the family daily, does not want to serve as the primary liaison between the hearing specialist and the family so the family often misses important information on the individualized support their child needs.*  |

References

DEC (2016). DEC recommended practices in early intervention and early childhood special education with examples. Retrieved from: <https://divisionearlychildhood.egnyte.com/dl/v7NSuEwqYX>

Metz, A., Bartley, L., Blase, K., and Fixen, D. (2011). Handout 2: Practice profile examples. Retrieved from: <http://implementation.fpg.unc.edu/sites/implementation.fpg.unc.edu/files/resources/AIHub-Handout2-PracticeProfileExamples.pdf>

SISEP (2014). Practice profile planning tool. Retrieved from: <http://implementation.fpg.unc.edu/sites/implementation.fpg.unc.edu/files/NIRN-Education-PracticeProfilePlanningTool.pdf>

1. Expected/Proficient examples sourced from: DEC (2016). DEC recommended practices in early intervention and early childhood special education with examples. [↑](#footnote-ref-1)
2. Practitioners in the developmental range are ready for increased coaching and professional development to improve recommended practices. [↑](#footnote-ref-2)
3. Practitioners in the unacceptable range need more focused professional development and intensive coaching. Issues at the administrative level (hiring and credentials requirements) may also need to be addressed within a large-scale implementation infrastructure. (Metz, Bartley, Blase, & Fixen, 2011) [↑](#footnote-ref-3)