**Learning Guide 6.7 Instruction: Practice Profile**



**How to use this practice profile?**

“Module 6 Instruction Practice Profile” describes example behaviors of practitioners that are associated with each DEC Recommended Practice along a continuum of expected/proficient behaviors to developmental behaviors and unacceptable behaviors.

| **Core Component** | **Expected/Proficient[[1]](#footnote-1)** | **Developmental[[2]](#footnote-2)** | **Unacceptable[[3]](#footnote-3)** |
| --- | --- | --- | --- |
| **INS1 Practitioners, with the family, identify each child's strengths, preferences, and interests to engage the child in active learning.** | *An early interventionist conducts a structured interview to gather information from a family about what they know and recognize about the child’s interests and what they have observed the child doing during everyday routines and activities.*  | *An early interventionist asks the family to talk about their child’s strengths and interests but does not take notes to use for planning engaging instructional activities.*  | *An early interventionist does not use family input about a child’s strengths, preferences and interests when planning instructional activities and often plans activities that are not engaging for the child.* |
| *An early childhood teacher observes a child’s preference for trains and turns the dramatic play area into a train station. She then provides learning opportunities for the child to “purchase” train tickets, to take turns blowing the train whistle, and to help build a pretend train station.*  | *An early childhood teacher plans many active learning activities in the classroom based on things she sees on the internet that look cute. She occasionally uses a child’s interests to engage them in learning.*  | *An early childhood teacher notices a child playing with trains in the block area every day. She thinks it’s important for the child to experience other centers so she “closes” the block area to that child and has him choose a different center.*  |
| *A team composed of the early interventionist, the speech therapist, the child’s family, and the service coordinator plans for and conducts observations to gather information about a toddler’s interests and preferences. The team collects data about the type of toys the toddler plays with, how he plays with each toy, and how long he engages in the play. They also identify people, actions, and settings the child prefers. They use this data to plan activities that will engage the child in learning and reinforce the child’s use of a particular skill.*  | *An early interventionist brings a basket of toys to his next home visit and asks the family to select the toy they think their toddler would like the most. At the end of the teaching session he brings the toys back with him.*  | *An early intervention team does not plan together or with the family to identify common reinforcers for teaching with a toddler. As a result, the family is confused about how to best support their child’s learning and the intended outcomes of the instruction are not realized.*  |
| *An early intervention provider works with the family of a toddler to identify opportunities for the child to make choices during everyday activities and routines at home and in the community.*  | *An early intervention provider tells the family that it is important to allow the child to play with toys they prefer but doesn’t provide guidance on how to work those preferences into everyday activities and routines.* | *An early intervention provider tells the family that their toddler’s wish to make choices is a normal part of development but they have to be strict with the child to engage with specific learning tasks.* |
| **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.** | *An early interventionist uses a routines-based interview to gather information from a family about routines that are difficult for the child and family and about the skills the child might need in order to engage in those routines more independently.*  | *An early interventionist listens to a family’s concerns regarding difficult routines in the home. She makes some suggestions about how to help the child be more competent in completing the tasks on his own but does not provide the necessary coaching support.*  | *An early interventionist tells a family to exclude their child from certain routines that make the child unhappy (i.e., sitting at the table for dinner) even though the family expressed interest in finding ways to include the child successfully.* |
| *An early childhood teacher, speech therapist, occupational therapist, and the child’s family observe the child in the settings in which he regularly spends time (e.g., home, car, church, school, grocery store) to identify the skills he needs to participate in the activities and routines within those settings.*  | *A team of practitioners observe the child at school to identify the skills he needs to participate in the class activities but not in other settings. They decide on an instructional target skill based on his functioning in the classroom without input from the family.*  | *An occupational therapist follows a strict sequence of skill development based on developmental trajectories without consulting with the family or other practitioners or observing the child in multiple settings.* |
| *A team of early intervention providers, the child’s family, and the service coordinator collaboratively identify priority child-focused outcomes, and skills related to these outcomes, during the Individualized Family Service Plan (IFSP) process.*  | *During the IFSP process, the early intervention providers discuss child-focused outcomes based on evaluations and observations without welcoming feedback from the parents.*  | *A team of early intervention providers writes outcomes for the IFSP that do not take into account the child’s natural and inclusive environment.*  |
| **INS3 Practitioners gather and use data to inform decisions about individualized instruction.** | *A team working with a preschool-aged child makes a plan to collect, summarize, and analyze data with sufficient frequency to determine if the instructional strategies being implemented with the child are resulting in progress on priority skills or if modifications to the strategies are needed.*  | *A school-based team collects data on a preschool-aged child to determine if the instructional strategies are being implemented with fidelity and resulting in progress. However the team does not make a plan for analyzing the data and are not able to make the necessary modifications.* | *A preschool teacher is using evidence-based instructional strategies with a child based on his IEP but does not have the tools or time to collect sufficient data to determine the modifications effectiveness.*  |
| *An early interventionist works with a family to develop data sheets and other data collection strategies for the family and other caregivers to use at home and in the community.*  | *An early interventionist gives a family some pre-made data sheets to use at home and in the community without training the family in how to use them.* | *An early interventionist only collects data on instructional strategies twice a year and is unable to make informed decisions about the instruction.*  |
| *An early childhood teacher and early childhood special education itinerant teacher work together to develop a plan for using multiple methods to document a child’s progress on Individualized Education Program (IEP) goals. The plan includes frequency counts, work samples, checklists, videotapes, and photographs.*  | *An early childhood teacher talks with an early childhood special education itinerant teacher about how to help a child reach their IEP goals. They decide to gather data only using anecdotal records. They do not make a plan for how often or how they will share the data.*  | *An early childhood special education itinerant teacher asks the classroom teacher to give an informal report about the child’s progress on IEP goals.*  |
| *A preschool classroom team gathers data before and after they begin a skill-building intervention on a target behavior. They graph the data to determine if there are changes in the child’s behavior after the intervention is introduced relative to the child’s behavior before implementing the skill-building intervention.*  | *A preschool classroom team gathers data before and after a skill-building intervention for a child’s behavior. After reviewing the data briefly, the team makes a decision about whether or not to continue the intervention based on the teacher’s skill and familiarity with the intervention, rather than the child’s results.*  | *A preschool classroom team gathers data before and after an intervention but do not have the ability to display the data in a meaningful way. As a result they are not able to make informed decisions about the instructional intervention.* |
| **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.** | *An early childhood special education teacher and early childhood teacher work together to identify an effective prompting strategy that includes reinforcement for correct responding and error correction for incorrect responding for a child who needs additional instruction on a target skill.*  | *An early childhood special education teacher and early childhood teacher use both the prompting strategy and error correction strategy irregularly for additional instruction on a target skill.*  | *An early childhood teacher asks the early childhood special education teacher to work with a child on the target skill using the prompting strategy at a separate time so that it is not distracting for the other children in the classroom.*  |
| *An occupational therapist and a family identify fun and interesting learning opportunities for an infant within daily activities and routines that provide contingent feedback as a result of the child’s actions (e.g., motion-activated mobiles, rattles, musical games).*  | *An occupational therapist brings a bag of toys that provide contingent feedback to an infant’s actions and shows the families how to use the toys to encourage the infant’s motion and participation in play. At the end of the session she takes the toys for the next child.*  | *An occupational therapist does not understand a family’s daily routine and activities with their infant and as a result recommends adaptations and accommodations that are outside what is possible given the family’s support and practices.* |
| *A speech therapist, early interventionist, and the child’s family design a choice board for the family to use during mealtimes to help the child request preferred food or drink.*  | *An early intervention team provides a pre-made communication board for a family to help support the child in making food and drink requests. Many of the child’s preferred items are not included on the board.*  | *A speech therapist recommends that a family continue to make choices for their child at mealtimes until their spoken language is proficient enough to make the choice verbally.*  |
| *A physical therapist and early childhood special education teacher work together to analyze a preschool classroom environment to ensure that a child who is using a wheelchair can easily maneuver between centers and access toys and other materials.*  | *A physical therapist provides an early childhood special education teacher with a list of tips for how to make a preschool classroom more accessible for a child in a wheelchair.*  | *A physical therapist and early childhood special education teacher determine that a child in a wheelchair will be limited to the art area and sand table because they cannot find a way to make the interest centers accessible.*  |
| *An early intervention provider and a child’s parents monitor their own behavior to ensure that they are providing the appropriate level of support to enable the child to do a skill, and fading prompts when appropriate.*  | *An early intervention provider trains a child’s parents on a prompting strategy to help the child incorporate a new skill. However at the next meeting the provider finds the parents are overusing the accommodation and the child is unable to generalize the skill.*  | *An early intervention provider does not train the parents on a prompting strategy to use with their child because she believes the parents will not use it correctly and it will be more difficult for the child to learn the skill.*  |
| **INS5 Practitioners embed instruction within and across routines, activities, and environments to provide contextually relevant learning opportunities.** | *An early interventionist and family identify skills a child needs to learn to be more engaged, independent, and interactive in child and family routines and activities. They use this information to identify priority child learning outcomes for the IFSP and to break down each outcome into smaller and more immediate learning targets. They then discuss when, where, and how learning opportunities will occur. They identify how they will know if the child is making progress and if engagement, independence, or interactions improve in the priority routines and activities.*  | *An early interventionist and family identify the skills a child needs to be ready for preschool and write them into the IFSP. The family does not know how to embed the instruction within daily routines so instead they make a daily “learning time” which their child resists. The early interventionist visits with the family weekly to discuss progress but does not take data nor provide advice on how to make the learning opportunities more contextually relevant to the child to encourage the child’s participation and access.*  | *An early interventionist writes learning outcomes for a child’s IFSP based on a previous IFSP written for a child with similar disabilities. She presents the learning outcomes to the family without identifying immediate learning targets and lets the family know that they will check the child’s progress in 6 months and then in a year. The family is not aware of what strategies to use to help the child achieve his learning targets or the way they can monitor the child’s progress on the learning targets.*  |
| *A preschool classroom team, including the child’s family, reviews the classroom schedule and the child’s IEP goals along with the smaller and more immediate priority learning targets connected to these goals. Team members identify logical and appropriate opportunities for the child to practice and learn targeted skills during routine, planned, and child-initiated activities that occur in the classroom. They then develop activity matrices to specify how many embedded learning opportunities on which learning targets are planned within and across classroom activities or routines. They indicate when, where, and with whom embedded learning opportunities will be provided and which systematic and intentional teaching strategies will be used. They identify how they will collect, summarize, and analyze data about child progress. They use these data to help make decisions about whether the embedded instruction plan is working or if changes are needed.*  | *A preschool classroom team, including the child’s family, discusses ways to embed instruction within and across routines. The teacher is concerned that many of the learning targets will not be addressed within the existing routines and activities and suggests that the special education teacher spend more time with the child outside the classroom to ensure the child receives the appropriate instruction. The special education teacher and the classroom teacher individually collect data and analyze it on their own. They do not meet to compare their data and at their next meeting to review IEP goals they are unclear of the next steps for the child’s instruction.*  | *A preschool classroom teacher reviews a child’s IEP goals independently of other practitioners or the family and decides to embed a few things into the daily routine but does not systematically collect data or review goals to determine the instructional plan is working.*  |
| **INS6 Practitioners use systematic instructional strategies with fidelity to teach skills and to promote child engagement and learning.** | *An early childhood special educator, early care and education provider, and the child’s parents work together to develop a checklist of the steps involved in using the most-to-least prompting procedure to help the child learn to feed herself with a spoon and to monitor correct implementation of the procedure during snack and meal times in the classroom and at home.*  | *An early childhood special education educator works with the child’s parents to develop a prompting procedure to help a child learn to feed herself with a spoon. The educator and the parents monitor and take data in differing formats (i.e., one takes frequency data and the other takes data about the duration of the behavior) so they are unable to compare.*  | *An early childhood special education educator tells the family that since they do not use spoons at school that she will not be able to assist in implementing instructional techniques to show the child how to use a spoon more independently at meal times.*  |
| *A speech-language therapist demonstrates using naturalistic time delay to support a toddler to request “more” during play and feeding routines and provides opportunities for the parent to practice implementing the strategy and receive feedback about implementation.*  | *A speech-language therapist explains how to use a naturalistic time delay to support the toddler to request “more” during play and feeding routines. The therapist does not observe the parents implement the instructional support and, therefore, does not provide feedback on implementation.*  | *A speech-language therapist recently learned about using a naturalistic time delay to support toddler’s language but did not complete the tutorial professional development and consequently does not implement the strategy with fidelity.*  |
| *An early childhood special educator, occupational therapist, and early care and education provider task analyze the steps involved in washing hands in a preschool classroom and use backward chaining to teach the last step first. Once the child masters the last step, the previous step is taught. The team creates a checklist based on the task analysis to monitor implementation of the backward chaining procedure and reviews it weekly to monitor the child’s progress.*  | *A preschool classroom team along with an occupational therapist task analyzes the steps in washing hands and makes a pictorial chart next to the sink in the classroom. The early care and education provider teaches the child all the steps at the same time and shows him the chart. They do not collect data to monitor the child’s progress nor provide any reinforcement to the child for completing the task correctly.*  | *An early care and education provider has difficulty with a child washing hands independently and often has to stop what she is doing to assist the child in washing hands. The provider doesn’t know that she can ask for instructional support from the occupational therapist and the occupational therapist has not observed the child washing hands so does not know that the provider might need support.* |
| *During snack time, a parent displays the food choices and waits for the child to make a request (e.g., by pointing, speaking, signing, or using their alternative communication system). If the child makes an appropriate request, descriptive feedback and access to the requested items are provided to the child. If not, a planned correction is used to help the child learn to request.*  | *A parent shows a child the food choices for snack time and waits for her to make a request. The child requests apples using her alternative communication system. The parent gives the apples to the child and then moves on to the next child to make a choice.*  | *A parent inconsistently uses a communication board to help a child make requests for preferred snacks. When the choices are displayed the child often does not make a request and the parent makes a choice for the child instead of using a planned correction to help the child learn to request.*  |
| **INS7 Practitioners use explicit feedback and consequences to increase child engagement, play, and skills.** | *An early intervention provider works with a child’s family to identify natural consequences associated with the child’s behavior that are part of the everyday activities or routines.*  | *An early intervention provider provides a list of sample natural consequences for parents to implement with their child even though they may not be natural to the everyday activities and routines.* | *An early intervention provider tells a family to use consequences that removes the child from engaging with their environment and/or play.*  |
| *An early care and education provider observes a child’s actions during circle time and comments positively and descriptively about the child’s actions in order to sustain or elaborate on the child’s engagement.*  | *An early care and education provider observes a child engaging appropriately with peers during circle time. She notes this mentally and decides to tell the parents at dismissal.*  | *An early care and education provider asks a child to sit with another teacher during circle time because the child will not stop asking questions.*  |
| *An early childhood special educator provides access to a preferred toy after a child uses a gesture and vocal approximation to request the toy while playing at the sensory table.*  | *An early childhood special educator gives verbal praise before giving access to the preferred toy after a child uses a gesture and vocal approximation to request the toy.* | *An early childhood special educator inconsistently provides reinforcement and feedback when a child uses gestures and/or vocal approximations to request preferred items* |
| *An occupational therapist demonstrates to a parent how to change a child’s engagement behaviors with developmentally appropriate toys by reinforcing each increasingly complex approximation of the desired behavior.*  | *An occupational therapist tells a family about the theory behind shaping (a technique to help change behavior) and how it can help increase their child’s desired behavior.*  | *An occupational therapist listens to a family talk about their goals for their child’s behavior. The therapist lets the family know they should continue to play with developmentally appropriate toys but gives no coaching or instruction on specific strategies.*  |
| *An early childhood special educator asks a child how he is going to play, secures a verbal response from the child, observes the child play, and provides reinforcement after the play session when there is a correspondence between what the child says and what the child does.*  | *An early childhood special educator asks a child to describe how he is going to play and then observes the child play. The educator does not provide consistent reinforcing feedback to the child.*  | *An early childhood special educator only provides reinforcement after a child engages in prosocial behavior. The child’s IEP specifically states that reinforcement should be given when the child is able to make meaningful plans for play and follow through with those plans.*  |
| **INS8 Practitioners use peer-mediated intervention to teach skills and to promote child engagement and learning.** | *An early childhood teacher uses peer tutoring to promote a child’s communication skills. The teacher demonstrates to two peers in the classroom how to use descriptive talk to comment on the child’s behavior during play in order to provide a model of the child’s specific expressive language learning targets.*  | *An early childhood teacher asks two peers in the class to talk more to a child with disabilities in the class but does not provide models of the specific expressive language learning targets.* | *An early childhood teacher tells the children in the class to quiet down and not talk so much. She does not use peer-mediated interventions because she finds them too difficult to implement.*  |
| *An early childhood special education teacher uses peers to help a child learn social interaction skills. The teacher teaches peers the skills (e.g., asking another child to play, taking turns). When the peers and the child play together, the teacher carefully monitors and reinforces their interactive play without disrupting the interactions.*  | *An early childhood special education teacher uses peers to help a child learn social interaction skills. She does not teach the peers specific skills beforehand and while monitoring the play has to often jump in to model the correct behaviors. This becomes disruptive to the play and the children quickly lose interest.* | *An early childhood special education teacher notices a child with disabilities and her peers having an argument across the room. She tells them to find somewhere else to play and then goes back to organizing the papers to go into the folders for home.*  |
| *An occupational therapist uses peer modeling to increase a child’s imitative play. During a play activity in the classroom, the therapist has peers perform a desired skill for the child and encourages the child’s attention to the behavior (e.g., Wow, look what Tommy is doing with blocks. You can do that, too!).*  | *An occupational therapist decides to try peer modeling to increase a child’s imitative play. During a play activity the therapist has the focus child sit next to a peer but does not tell the peer what kinds of play to engage in. As a result the peer engages in undesirable play (e.g., throwing blocks) and the therapist becomes distracted from the focus child.*  | *An occupational therapist tells an early childhood teacher to make sure a child with disabilities does not get too close to other children during unstructured play times because she won’t be able to engage in appropriate play and it might start arguments.*  |
| *An early childhood classroom team teaches developmentally sophisticated peers how to initiate play and social interactions with target children, how to have positive exchanges with the target children, and how to persist in playing with the children, even if they are not responsive to initial attempts to engage.*  | *An early childhood classroom team discusses ways to implement peer-mediated interventions to help target children initiate play and social interactions. The teacher coaches one child how to have positive exchanges with the focus child but does not support the child in persistence and the intervention does not succeed.*  | *An early childhood classroom team discusses ways to help a target child engage in play and social interactions. One teacher wants to try peer-mediated interventions but the other professionals have had unsuccessful experiences so they decide it is not worth the effort.*  |
| **INS9 Practitioners use functional assessment and related prevention, promotion, and intervention strategies across environments to prevent and address challenging behavior.** | *Classroom teams in an inclusive program meet regularly to discuss their instructional and interactional practices to ensure that they are not promoting or maintaining children’s challenging behaviors.*  | *An inclusive program encourages teachers to meet regularly to discuss their instructional and interactional practices but administration does not provide sufficient time and space for the meetings to occur.* | *A program that claims to be inclusive regularly engages in practices that exclude children with challenging behaviors from the classroom (e.g., “taking a break in the director’s office”).* |
| *After determining that the function of a child’s hair pulling is to obtain her sister’s attention, a parent makes the hair pulling inefficient by teaching the child a replacement behavior (to gently touch her sister’s arm) to gain her attention. Touching her sister’s arm to gain attention is easier than hair pulling.*  | *A parent determines that the function of a child’s hair pulling is to obtain her sister’s attention. The parent tries a few different strategies to help the child replace the behavior but none are as effective or easier than the hair pulling so the hair pulling continues.* | *A parent struggles with her younger daughter’s hair pulling behavior and finds she has to resort to separating her children or using time out to attempt to extinguish the behavior.*  |
| *Staff and parents “catch children being good” and comment on their appropriate behavior as frequently as possible. Adults tailor the positive feedback by making it descriptive and individualized.*  | *Staff and parents make a commitment to using more positive behavior techniques but don’t decide on a specific strategy. Each adult uses different techniques and the effects become diffused.*  | *Staff and parents disagree on the best way to reduce challenging behaviors. Some want to use positive behavior techniques while others think there needs to be more structure to the routines and activities. A decision cannot be reached and challenging behavior continues to be a problem.*  |
| *Staff members use praise and other reinforcers in varied, genuine, enthusiastic, individualized, and contingent ways.* | *Staff members are trained to use more praise and reinforcers in a specific way and it becomes rote and ineffective.* | *Staff members use nonspecific praise techniques (e.g., “good job!”) and find no effects on children’s 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.** | *An early childhood special education itinerant teacher works with a speech therapist, occupational therapist, and an early childhood educator to ensure learning opportunities are sufficient for a child who is acquiring a new communication skill, recognizing the child needs repeated and frequent opportunities in this phase of learning (i.e., acquisition).*  | *An early childhood special education itinerant teacher recognizes the need for a child to have frequent and repeated opportunities to acquire a new skill. While she works with the child she presents many opportunities but does not share the strategies so that the speech therapist, occupational therapist, family, and early childhood educator can also provide opportunities.* | *An early childhood team recognizes that a child needs to acquire a new skill to be more successful across environments and routines. However the team is not sure what frequency, intensity, and duration with which to instruct the child to achieve the desired outcome.*  |
| *An early interventionist helps a parent problem-solve about how to support a child to maintain a learned skill by identifying routines and activities in which the skill can be used.*  | *An early interventionist emphasizes to a parent the importance of repetition to help a child maintain a learned skill but doesn’t provide support to achieve the goal.* | *An early interventionist helps a child learn a new skill but does not work with parents to embed the skill into daily routines and activities.* |
| *A speech therapist and early childhood teacher consider similarities between the activity in which a child learned a communicative behavior and other routines and activities where the child needs to use the behavior (i.e., generalize the behavior across routines and activities). They decide on the planned frequency of embedded learning opportunities to use the communicative behavior in these other routines and activities.*  | *A speech therapist helps a child to learn a communicative behavior and lets the early childhood teacher know about the child’s new skill. The early childhood teacher doesn’t know how or when to provide opportunities for the child to practice the skill and the child is unable to generalize the skill outside of the therapy session.* | *A speech therapist uses the same lesson plans for each child in an age group without varying the frequency, intensity, and duration of instruction for each child depending on their needs.* |
| *An early childhood special education teacher decides to modify the instructional pacing she is using with a child for learning trials focused on the child labeling pictures in a book following a teacher-delivered prompt (e.g., What’s this?). She shortens the time interval between each instructional trial to 3 seconds*.  | *An early childhood special education teacher notices that she needs to modify the instruction for a child who is labeling pictures in a book due to the child’s inattentiveness. The teacher is unsure of how to modify the instructional task without losing its effectiveness.* | *An early childhood special education teacher does not sufficiently monitor a child’s needed level of support so is unable to make decisions about adjusting the frequency, intensity, or duration of instruction.*  |
| **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.** | *An early interventionist works with the family to select a book that family members can read with their child in their home language and in English.* | *An early interventionist tells a family it is important to read with the child in English and their home language.*  | *An early interventionist tells a family to help their child to focus on English so that they will start Kindergarten on track.*  |
| *An early childhood special education teacher and speech therapist develop a list of commonly used words in the classroom (e.g., snack, coat, all done, etc.) in the child’s home language that they can use to communicate with the child and teach the corresponding English words and phrases.* | *An early childhood special education teacher and speech therapist encourage the family to continue using the home language at home but use solely English in the classroom.*  | *An early childhood special education teacher and speech therapist are worried about a child’s progress in developing language skills. They decide it would be best for the child to only be instructed in English, both at school and at home.*  |
| **INS12 Practitioners use and adapt specific instructional strategies that are effective for dual language learners when teaching English to children with disabilities.** | *An early childhood special education teacher and a bilingual early childhood educator who speaks the child’s home language work together to develop a “what we know, what we want to know, and what we learned” table in the child’s home language and in English to support instruction in both languages as part of a thematic unit in the inclusive classroom.* | *An early childhood special education teacher develops a “what we know, what we want to know, and what we learned” table as part of a thematic unit. Later she asks the bilingual early childhood educator to translate it so there are two copies in the classroom for everyone to see.* | *An early childhood special education teacher asks the bilingual teacher to refrain from translating the charts about the thematic unit in the classroom because she wants the child to learn the English vocabulary words.* |
| *During whole-group or reading aloud time in the preschool classroom, home language supporters who are parents of a bilingual child or volunteers from the community, read aloud in the child’s home language right after reading the text in English.* | *During read aloud time in the preschool classroom the home language supporters (parents of a bilingual child or volunteers) read to the bilingual children in a small group while the rest of the class listens to a different story in English.* | *A parent volunteers to read a book in English and the home language. A preschool teacher declines to have the parent visit the classroom because she is unsure if it will be an effective use of instructional time.*  |
| *An early childhood classroom team labels both verbally and with pictures common classroom items or toys preferred by the child in the child’s home language and in English.* | *An early childhood classroom team labels two or three items in the classroom in the child’s home language and in English.* | *An early childhood classroom team does not provide print examples of a home language anywhere in the classroom.*  |
| **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.** | *An early interventionist uses coaching strategies during a home visit to support a parent who wants to learn how to embed learning opportunities for a child in everyday routines or activities. The coaching strategies involve setting the stage for the visit, observing the parent and child during the activities or routines in which embedded learning opportunities occur and providing supportive feedback, problem-solving and reflecting about the embedded learning opportunities, and discussing how the parent will implement embedded learning opportunities between visits and collect information about child responses and progress to share with the coach at the next visit.*  | *An early interventionist uses some coaching strategies during a home visit such as providing feedback to the parents and problem-solving about the embedded learning opportunities. However, the early interventionist fails to have the parent reflect on their own implementation of instructional practices between visits or help the parent to collect information about the child so that they can monitor progress for the next visit.*  | *An early interventionist wants to try to use coaching strategies during home visits to support parents in embedding learning opportunities. When the early interventionist arrives for the home visit, however, she quickly is distracted by other requests and needs of the family and does not have time to set a goal, observe the family, or provide specific supportive feedback.* |
| *An itinerant early childhood educator uses a practice-based coaching framework to support a teacher’s implementation of naturalistic instructional strategies with a child enrolled in her classroom. The itinerant teacher shares information about the naturalistic instructional strategies and video examples with the early childhood teacher. She gathers the teacher’s perspectives about her confidence and competence in implementing the naturalistic instructional strategies and observes the teacher’s implementation of the strategies. Based on these two sources of information, they jointly develop an action plan to support the teachers’ implementation of the naturalistic instructional strategies. The itinerant teacher visits the classroom once a week for several weeks to observe the teacher’s implementation. The teacher and itinerant teacher debrief and reflect for 10-15 minutes. The itinerant teacher provides supportive and constructive feedback. They discuss next steps.* | *An itinerant early childhood educator wants to use coaching and consultation strategies to support the teachers she visits but doesn’t use a framework to guide these visits. She spends the time observing practices and talking with the teachers but does not know how to provide specific feedback on the teacher’s implementation of strategies or how to write an action plan together to support further implementation of naturalistic instructional strategies.*  | *An itinerant early childhood educator knows it is important to use coaching or consultation strategies with the other teachers she visits but often feels inadequate in her knowledge or that she is wasting the teacher’s time so she does not spend the time sharing information, gathering the teacher’s perspectives, or observing the teacher’s implementation of naturalistic instructional strategies.* |

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/resources/handout-2-practice-profile-examples>

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)