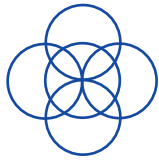


# Birth to 6 EVENTS



Waisman Center

A BULLETIN FOR THOSE WHO WANT TO LEARN MORE ABOUT SERVING YOUNG CHILDREN WITH SPECIAL NEEDS AND THEIR FAMILIES

Issue 64—Fall 2010

## Investing in Quality Child Care

Submitted by Child Care Information Center and Wisconsin Early Childhood Association

### WHAT is YoungStar?

A number of states are developing Quality Rating & Improvement Systems (QRIS) to assess and improve the quality of early care and education programs for children ages birth to five and older. Wisconsin's system is called YoungStar. **YoungStar is a five-star rating and improvement system for child care centers based on the:**

1. education of providers,
2. children's learning environment,
3. business practices of providers,
4. health and well-being of children.



Start early. Start smart. Start here.

### WHY YoungStar?

Research confirms that a child's earliest years are critical for healthy and successful growth and development. Studies show that...

Children who have quality child care are **less** likely to:

- Use drugs and alcohol
- Be involved in the criminal justice system
- Experience abuse or neglect

Children who have quality child care are **more** likely to:

- Graduate from high school
- Have higher paying jobs

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### What's New in State Infrastructure?

#### Early Childhood System Updates and Cross-Systems Collaboration

In this issue of Events, we feature several updates from three state departments including the Department of Children and Families (DCF), Department of Health Services (DHS), and the Department of Public Instruction (DPI), addressing important issues related to programs and services for young children and their families. Exciting work is happening within these departments through collaborative councils. Council membership is comprised of stakeholders (including professionals and families) whose task is to determine needs, set priorities, make policy recommendations and analyze and monitor systems providing services to young children and their families. Read more about the councils in this issue!

Additionally, we are featuring a few of the quality improvement initiatives happening around the state in early care and education.

This issue's journal highlight is about early identification of young children with developmental delays, and was co-authored by one of our DHS partners, Loraine Lucinski. 

### Included in this issue of EVENTS:

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# YoungStar

When we promote quality caregiving, we are making sure more children can realize their full potential, especially those most at risk for later school failure. YoungStar will improve the quality of child care received by children across the state by rating individual child care programs and providing training and grants to providers that want to improve.

## WHAT will YoungStar do?

YoungStar will make it easier for parents to choose the best child care for their kids, and link child care provider quality to payments from the Wisconsin Shares subsidy program. It will be administered by six regional entities aligned with licensing regions. They will be responsible for a cluster of services:

- Rate child care programs based on criteria proven to measure quality and identify areas for improvement
- Administer micro-grants to purchase materials and improve quality
- Provide training and technical assistance so that centers with unequal strengths will get customized resources and training
- Help parents find child care
- Educate parents about why quality is critical
- Partner with the Department of Children and Families on child care regulation and fraud detection

## WHO participates in YoungStar?

All centers, both group and family, which are collecting Wisconsin Shares subsidy funds are required to participate in YoungStar. All others may participate, including certified and licensed in-home providers and group child care centers not receiving subsidy funds. Training and technical assistance will be available to all, as well as micro-grants needed for quality improvement. Currently the program is focusing on preschool care, birth to age 5, but as YoungStar moves forward, a school-age plan will be developed.

## HOW do I learn more?

### • Department of Children and Families

Visit the Department of Children and Families website at [dcf.wisconsin.gov/youngstar](http://dcf.wisconsin.gov/youngstar) to learn more about YoungStar.

### • Child Care Information Center

The CCIC is a free mail-order lending library and information service for anyone in Wisconsin working in the field of child care and early childhood education.

### • Supporting Families Together Association [supportingfamiliesaltogether.org](http://supportingfamiliesaltogether.org)

SFTA was created in 2007 with a merger of the Wisconsin Child Care Resource & Referral Network, the Wisconsin Child Care Improvement Project and a statewide network of Family Resource Centers. SFTA also provides training and technical assistance to existing and prospective family child care programs and group child care centers.

### • The Registry [the-registry.org](http://the-registry.org)

The Registry, Wisconsin's Recognition System for the Childhood Care and Education Profession, awards a certificate verifying entry level and continuing education requirements defined by the State of Wisconsin Department of Children and Families. Training and education are verified and represented by The Registry's Career Levels. The Registry professional credentials are sequences of specific credit-based courses designed specifically for childhood care and education practitioners.

### • Early Childhood Association [wisconsinearlychildhood.org](http://wisconsinearlychildhood.org)

WECA is a statewide, nonprofit organization, an affiliate of the National Association for the Education of Young Children (NAEYC), serving as a professional association whose members care for and educate Wisconsin's children, aged birth to eight. WECA operates the T.E.A.C.H. Scholarship program, the R.E.W.A.R.D. stipend program, CACFP, and provides professional development opportunities for early childhood professionals.

**This information is provided by the Child Care Information Center and Wisconsin Early Childhood Association, largely from the most recent CCIC Newsletter.** 

# STATEWIDE COUNCILS

## Governor's Early Childhood Advisory Council

By Jane Penner-Hoppe, Department of Children and Families

<http://www.dcf.wisconsin.gov/ecac/default.htm>

The Governor's Early Childhood Advisory Council was announced in December 2008. The Council is chaired by Department of Children and Families Secretary, Reggie Bicha, and State Superintendent of Public Instruction, Tony Evers.

The Governor established the Council to help ensure that all families have access to quality early childhood programs and services. In addition, the Head Start Reauthorization Act of 2007 required the creation of a State Early Childhood Advisory Council. The council will build on the work of the Wisconsin Early Childhood Collaborating Partners (WECCP), the Children's Trust Fund Board, the Partners for Wisconsin's Economic Success, and the Governor's Birth to Three Interagency Coordinating Council.

Specific responsibilities identified for the council include the following:

- Conduct a periodic statewide needs assessment
- Identify opportunities for, and barriers to, collaboration and coordination
- Recommendations regarding the establishment of a unified data collection
- Recommendations regarding statewide professional development and career advancement plans
- Assess the capacity and effectiveness of 2- and 4-year public and private institutions of higher education in the state toward supporting the development of early childhood educators
- Make recommendations for improvements in state early learning standards and undertake efforts to develop high-quality comprehensive early learning standards, as appropriate
- Hold public hearings and provide an opportunity for public comment on the activities
- Meet periodically to review any implementation of the recommendations in such report and any changes in state and local needs, in accordance with Public Law 110-134

The Council is a high level advisory body to the Governor. Membership of the council includes high level state officials, and leaders from the public and private sectors. In addition to Secretary Bicha and Superintendent Evers, government officials include Secretaries from the Department of Health Services and the Department of Corrections as well as leaders from the University of Wisconsin – Madison and the University of Wisconsin system. Leaders from non-profit organizations and early care and education as well as philanthropists serve on the council.

The group has met several times since its creation to begin to take on the charge of the council to provide a comprehensive assessment of the early childhood system in our state and identify priorities that must be addressed to move Wisconsin's young children and their families forward. It has established the vision that: "Every Child will be healthy, nurtured, safe and successful."

The council has agreed broadly to focusing on the following system components:

- Early Care and Education
- Family Support
- Mental Health & Socio-Emotional Well-being
- Parenting Education
- Safe and Healthy Children

And, will explore these areas in the context of the following dimensions:

- Access, Outreach, and Engagement
- Accountability and Evaluation
- Financing

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# STATEWIDE COUNCILS


- Governance
- Professional Development
- Quality Standards

A system assessment was conducted for the council and presented in June, 2010. Katherine Magnuson of the UW Lafollette School authored this comprehensive overview of the existing studies on the different dimensions of early care and education that reviewed over 110 reports, briefs, and data sheets for information about system “functioning.”

The assessment looked at existing studies in the area of health, parent education, early childhood education, social and emotional health and family economic well-being. The goal of the assessment was to pinpoint what information we have to make decisions about building a stronger infrastructure to comprehensively support young children and their families in Wisconsin, gaps in data on the early childhood system as well as gaps in services we must address to better ensure Wisconsin’s young children and their families are able to thrive.

Highlights about the findings:

- Good information is available tracking health status, chronic conditions, insurance coverage and other health outcomes.
- Good data exists about the public subsidy system (Wisconsin Shares) usage, Head Start and to a lesser extent 4 year old kindergarten; limited information on general early childhood program quality and child/family outcomes; no way to collect and track information about children’s early experiences or to estimate unmet need.
- Limited information is available on mental health and safety program participation except in the area of professional training for staff; and, little understanding of program quality or unmet need, particularly for parent mental health issues.
- Limited systematic information about parenting education program outcomes are available as well as limited information about parent education program quality.

The council has heard the recommendations from the report and is considering the recommendations that have evolved from the work of the assessment, including a public comment session held with early care stakeholders across the state – the August 5 Wisconsin Early Childhood Collaborating Partners, and workgroups identified from the council to consider findings and suggest recommendation to the council. High level recommendations will be finalized by the Council in November. For more information on the council, please refer to the website at: <http://www.dcf.wisconsin.gov/ecac/default.htm> 

# STATEWIDE COUNCILS

## Overview of the State Superintendent's Advisory Council on Special Education

For more information about the Council, please contact Courtney Reed Jenkins at [courtney.jenkins@dpi.wi.gov](mailto:courtney.jenkins@dpi.wi.gov) or 608-267-9183

<http://www.dpi.state.wi.us/sped/council.html>

The council, required under the federal Individuals with Disabilities Education Act (IDEA) and state special education law, advises the Department of Public Instruction (DPI) on matters affecting the education of children and youth with disabilities.

The mission of the State Superintendent's Council on Special Education is to promote the education of children with disabilities by providing broad-based input to the DPI. Specific duties of the council include:


- advising the DPI of unmet educational needs of children with disabilities,
- advising the DPI in the development and implementation of policies related to the coordination of services for children with disabilities,
- commenting publicly on any proposed rules or regulations to be issued by the state regarding the education of children with disabilities,
- advising the DPI in the development of evaluations and reports to the federal Department of Education,
- advising the DPI in the development of plans to address findings identified in federal monitoring reports, and
- assisting the DPI with any matters on which the state superintendent wishes the council's opinion.

Members are appointed by the state superintendent for three-year terms. Membership requirements are established in IDEA and state statute. The council must be composed of individuals who are involved in, or concerned with, the education of children and youth with disabilities, provide for statewide representation, and be representative of the state population.

The majority of council members must be parents of school-age children with disabilities or must be individuals with disabilities. In addition, the council must include regular education teachers, special education teachers, local education officials, administrators of programs for children with disabilities, representatives of higher education that train special education and related services personnel, representatives of private schools and charter schools, representatives from organizations that provide transition services, and representatives from other state agencies.

The DPI is encouraging groups and organizations to distribute this information to individuals who may be valuable additions to the council.

The council meets quarterly, and the public is welcome to attend Council meetings, please visit the website for dates, times and locations.

If you are interested in nominating someone, including yourself, for the Council, then please visit the Council website. The nomination form is available for you to print out and return via mail to DPI. 

# STATEWIDE COUNCILS

## Interagency Coordinating Council

*By Darsell Johns, Department of Health Services*

In December of 1988, the Interagency Coordinating Council adopted a set of “Guiding Principles.” The “Principles” are our guide to the future. They direct our planning and program decisions. As the early intervention system grows and develops, its success should be measured by the success with which we are able to realize these principles.

- **Children’s optimal development depends on their being viewed first as children and second as children with a problem or disability**
- **Children’s greatest resource is their family.**
- **Parents are partners in any activity that serves their children**
- **Just as children are best supported within the context of family, the family is best supported within the context of the community.**
- **Professionals are most effective when they can work as a team member with parents and others.**
- **Collaboration is the best way to provide comprehensive services.**
- **Early intervention enhances the development of children.**

### **Committee Structure**

Article VIII of the Governor appointed Interagency Coordinating Council (ICC) provides for the initiation of Standing Committees in accordance with the needs of the ICC and with the determination of ICC membership that the committee is needed to fulfill the obligations of the overall committee.

Members of the sub-committee include governor-appointed representatives, service providers, stakeholders, and county administrators focused on analyzing opportunities for the perpetuation of Birth to 3 programming throughout the State of Wisconsin. To that end, the Sub-committees engage in ongoing evaluation and analysis of sound Policies and Practices to provide support for innovative quality focused capacity building within Wisconsin’s continuum of Birth to 3 services.

### **Committee: Child Find**

Child Find is a component of Part C of the Individuals with Disabilities Education Act (IDEA) and DHS 90, and is defined as a continuous process of public awareness activities designed to locate, identify, and refer children birth to age three with suspected developmental concerns. Wisconsin’s Child Find subcommittee provides guidance and recommendations for the State Interagency Coordinating Council (ICC) in the areas of eligibility, interagency coordination, setting of child find targets, tracking, referral and intake, etc.

**Membership:** Dana Romary-DHS (Birth to 3 Staff), Mary Maronek-DPI, Elizabeth Wahi-WPDP, Linda Tuchman-WPDP, Jill Haglund-DPI and Sharon Fleischfresser-DHS

### **Fiscal Subcommittee**

The Committee has devoted its efforts to study fiscal data that corresponds to:

- Federal, state and local funding
- Intervention approaches emphasizing parent involvement
- Fiscal and contract management
- Service provision in natural environments
- Parental fees
- Federal and State programmatic requirements that suggest fiscal implications
- Eligibility requirements

The Fiscal Subcommittee is scheduled to meet monthly. It provides recommendations as well as information to support fiscal stability for Wisconsin’s Birth to 3 Program.

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# STATEWIDE COUNCILS


## Council on Autism

*For additional information visit:*

<http://www.dhs.wisconsin.gov/bdds/clts/autism/council/index.htm>

The **Council on Autism** was appointed by Governor Doyle in 2005 to advise the Department of Health Services on strategies for implementing statewide supports and services for children with autism. The Department was charged with providing administrative and support services to assist the council.

**Goals of the Council.** The initial goals of the council addressed issues related to the implementation of the Children's Long Term Support Waiver services for children with autism, which is administered through the Department of Health Services. More recently, the council has expanded its focus to topics such as transitions, coordination with other services and resources (e.g., autism insurance benefit, education) and the implementation of evidence-based practices.

**Membership of the Council.** Council members are appointed by the Governor, who specified that a majority of the 13 council members must be parents of children with autism. The remaining members of the Council may include the following individuals: providers of services to children with autism; local government officials; persons with knowledge of the issues relating to autism; and public members. 

## State of Wisconsin Office of the Commissioner of Insurance – Autism Treatment Working Group

Wisconsin has a new insurance benefit for children with autism. Wisconsin's 2009-2011 biennial budget included a mandate for disability insurance policies and self-insured health plans sponsored by the state, county, city, town, village or school district to cover certain services for children with an autism spectrum disorder (ASD). This would include coverage for the intensive in-home behavioral treatment as well as non-intensive services. The mandate became effective on November 1, 2009 with the provision that insurers would implement the coverage as policies are renewed or, in the case of collective bargaining agreements, when the agreement is either renewed or expires.

The **Autism Treatment Working Group** [link- <http://oci.wi.gov/advcoun/autism.htm>] was created to advise the Commissioner of Insurance on how to define several terms related to autism. The working group's membership is comprised of three legislators, four advocates, three health insurance company members, three providers, three public members, and two, Department of Health Services members. While the workgroup charge to provide input into the rules and regulations has been fulfilled, the group continues to meet every six months to review updates as well as successes and challenges in implementing the new rules. One focus of discussion is the continuity of care for children and families and the coordination of services for children participating in the Children's Long Term Support waivers.

For additional information visit these websites:

### Frequently Asked Questions on Mandated Coverage for Autism Services

[http://oci.wi.gov/rules/faq\\_autism.pdf](http://oci.wi.gov/rules/faq_autism.pdf)

### Frequently Asked Questions About How The Autism Insurance Mandate Affects Children Participating in the CLTS Waivers

<http://www.dhs.wisconsin.gov/bdds/clts/autism/autismfaq.htm> 

# STATEWIDE COUNCILS

## Children's Long-Term Support Council

By Liz Hecht, Waisman Center

<http://www.dhs.wisconsin.gov/bdds/clts/council/#members>

Wisconsin has nearly 10,000 children with disabilities who may have long-term support needs. As these children get older and eventually become adults, they may need access to supports that enable them to fully participate in school, work and community life. These individualized supports allow them to contribute to the community, particularly in cases in which children and their families are provided with needed services, supports, and other assistance. Children need the opportunity to live, learn, and participate in all aspects of community life. Family members, friends, and members of the community play a central and important role in enhancing the lives of children with long-term support needs.

The Council for Children with Long-Term Support Needs (CLTS) is charged with providing recommendations to the Wisconsin Department of Health Services (DHS) Secretary regarding the needed infrastructures, accountability measures and mechanisms, financing systems, training programs, and program design elements necessary to implement service delivery systems in communities throughout the State. Children's Long Term Supports provide information and assistance, services and supports, and other assistance that address the needs of children with long-term support needs (0-21) and their families who want to live, learn, and participate in all aspects of community life. Read the full version of the Council's Establishment, Mission and Responsibilities. The Council meets quarterly and meetings are open to the public.

### University of Wisconsin, Infant Early Childhood and Family Mental Health Certificate Program

Recruitment is underway for the second cohort of the University of Wisconsin, Infant, Early Childhood and Family Mental Health Certificate Program. The Certificate Program will begin on June 15, concurrent with the 2011 Wisconsin Alliance for Infant Mental Health Summer Institute.



It is time to consider if the Certificate Program is a good fit for you at this time. Do you have the interest, time and financial means to participate in the Certificate Program?

The Certificate Program offers an intensive, interdisciplinary 13 month continuing education program for professionals who work with children ages birth to six and their families. The certificate program is designed with an appreciation of the strengths and contributions of all the professions that touch the lives of young children. The program offers advanced learning experiences that will lead to:

- An increased specialized knowledge base and skill set.
- Confidence to provide appropriate assessment, diagnostic and therapeutic intervention services to this population.
- Extraordinary opportunities to learn from and with state and nationally recognized experts in the fields of infant, early childhood and family mental health.
- Reflective mentoring and supervision experiences necessary to provide direct clinical and/or consultation services; and
- A network of professionals with common goals and interests.

Following a cohort model, participants will earn a certificate from the University of Wisconsin–Madison, Division of Continuing Studies, Dept. of Professional Development and Applied Studies by completing one of two pathways: Foundations or Advanced Clinical Practice

Program information and the application are available at:

<http://www.dcs.wisc.edu/pda/mental-health/infant.htm>

**Participation is by application only. Applications are due by February 18 with notification in April, 2011. Scholarships may be available to assist with the costs of the program.**

Contact: Linda Tuchman-Ginsberg (Waisman Center), Co-Director, [tuchman@waisman.wisc.edu](mailto:tuchman@waisman.wisc.edu)

Roseanne Clark (Department of Psychiatry, UW, Co-Director, [rclark@wisc.edu](mailto:rclark@wisc.edu))

Ann Whitaker (Continuing Studies, UW-Madison), [awhitaker@dsc.wisc.edu](mailto:awhitaker@dsc.wisc.edu)

# Birth to 3 ARRA INITIATIVE

## PREPARING MENTORS PROJECT for Birth to 3

By Carol Noddings Eichinger, Waisman Center WPDP

### What is a mentor?

“Mentoring refers to a developmental relationship between a more experienced mentor and a less experienced partner, or mentee. Through regular interactions (face-to-face, on the phone or via email), the mentee relies on the mentor’s guidance to gain skills, perspective and experience. Mentoring exists in many forms: formal or informal, group or one-to-one, structured or unstructured.” (quote from Menttium website—an organization supporting global business community professional development)

A “Preparing Mentors Project” was recently launched as a component of the ARRA Consortia “Crossing Borders” Initiative. This Project is designed to build a sustainable capacity for leader to leader (and peer to peer) mentoring post ARRA initiatives. Prospective mentors were encouraged to share an area of expertise through this opportunity to explore various topics of interest more deeply. Direct service providers as well as program leaders were encouraged to apply. The intention is to build a cadre of about 20 mentors to sustain practices explored through the various ARRA initiatives “post ARRA funds,” around relationship-based early intervention in natural environments using evidence-based practices. This will also develop a peer to peer mentoring process that will connect colleagues across county borders and across areas of expertise.

A competitive application process to become a Mentor for Birth to 3 leaders and practitioners resulted in sixteen Mentor applications that were submitted for review on July 26, 2010 by a committee comprised of core staff from Department of Health Services (DHS), Waisman Birth to 3, Wisconsin Personnel Development Project (WPDP) and RESource. Thirteen applicants were accepted, representing a wide scope of disciplines: speech/language pathology, physical therapy, social work, early childhood special education, psychology, hearing impaired, administrator. Three additional applications were later submitted, for a total of sixteen “preparing mentors”. Applications from an Occupational Therapist and a parent are currently being sought. Stipends for four additional “Preparing Mentors” are still available, and further information and application materials can be found at the following link: <http://www.waisman.wisc.edu/birthto3/ARRA.php>

“Preparing Mentors” will be listed as “Practicing Mentors” on a publicized list at the end of the ARRA initiative period, after August 2011. Following is a list of the individuals who are currently preparing to be mentors, and their topic of interest.

<b>NAME of MENTOR</b>	<b>TOPIC</b>	<b>COUNTY</b>
1. Bridgette White	Coaching	Dane
2. Anne Bruss	Coaching	Brown
3. Stacy Rudig	Coaching	Outagamie
4. Vicki Mulvey	Coaching	Brown
5. Cindy Flauger	Coaching	Winnebago
6. Gwen Westlund	Coaching	Rusk
7. Nancy DeWitt	Coaching	Oneida
8. Rebecca Jarzynski	Coaching	Chippewa
9. Loretta Connor	Coaching	Juneau
10. Christine Kometer	D&HH/Supports	Milwaukee
11. Marlea Linse	Coaching/Parents	FACETS
12. John Nelsen	Use of Videotape	Rock
13. Keith Keller	Waiver/Fiscal	La Crosse
14. Liz Kraniak	Admin/System	Milwaukee
15. Diane Fett	S/E Dev/Child Find	Fond du Lac
16. Darci Fritz	S/E Development	Rock

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# Birth to 3 ARRA INITIATIVE

Nine of the mentors are investigating the evidence based practices of coaching and a primary coach approach to teaming presented by national experts, M'Lisa Shelden, PT, Ph.D and Dathan Rush, Ed.D., CCC-SLP at the April 26<sup>th</sup> and 27<sup>th</sup>, 2010 *Implementing Evidence-Based Practices in Early Intervention Intensive Institute*. The eleven Pilot Teams that completed the first Intensive Institute have been practicing these approaches with fidelity for the past six months, with ongoing technical assistance from Wisconsin REsource and WPDP personnel ("Border Guides") and the completion of coaching logs and team meetings for support in implementation. It is anticipated that another twelve teams may obtain this training and support through attendance at a second Intensive Institute on January 10<sup>th</sup> and 11<sup>th</sup>, 2011. Applications for this event should be available in November of 2010. The "Preparing Mentors" will learn alongside and also offer rich support to these teams as they begin their six month follow-up practice with ongoing support from the mentors and their "Border Guides". These mentors are also available to speak with teams as they begin to explore coaching practices, from their "discipline specific" lens.

Other topics under investigation by the mentors include:

- Support to Milwaukee via creation of a website and DVD for Birth to 3, and a peer to peer model of support for program managers.
- Physician Outreach Materials/Packets and a Physician Liaison model.
- Data collection strategies for an informed referral network and "Child Find Efforts that Work".
- Community Plan to promote the social and emotional well being of young children.
- Use of videotape in Birth to 3 environments, including use of digital camera, edit and archive processes.
- Creation of video vignettes demonstrating coaching sessions with families, joint visits, and team meeting dialogues available on Waisman website for families and practitioners to view.
- Parent Outreach and parent confidence/understanding of early intervention that builds the capacity of the family to understand and utilize strategies shared in home visits throughout the week in the family life.
- Mentoring for professionals serving children who are deaf and hard of hearing and their families.
- Use of the Social and Emotional Foundation of Early Learning (SEFEL) Pyramid Model materials and Parent Modules within Birth to 3 with families.
- Birth to 3 Waiver funding and Third Party Billing Administration (TPA) impact on funding for evidence-based practices such as the primary coach approach to teaming in early intervention.

*"If you could only sense how important you are to the lives of those you meet; how important you can be to the people you many never even dream of. There is something of yourself that you leave at every meeting with another person."* (quote from *The World According to Mister Rogers*) ☺

## Connect: The Center to Mobilize Early Childhood Knowledge

**CONNECT** is a partnership between FPG (Frank Porter Graham) Child Development Institute, The University of Kansas, & The University of Kentucky. Connect is developing web-based, instructional resources for faculty and other professional development providers that focus on and respond to challenges faced each day by those working with young children and their families in a variety of learning environments and inclusive settings.

The practice-based modules are designed to build early childhood practitioners' abilities to make evidence-based decisions. They emphasize a decision-making process, realistic problems to solve, the importance of integrating multiple perspectives and sources of evidence. For more information:

<http://community.fpg.unc.edu/connect>

# EARLY CHILDHOOD UPDATES

## Early Childhood Special Education Updates

By Erin Arango-Escalante, Department of Public Instruction

Early Childhood Special Education (ECSE) is embarking on a collaborative journey with K-12 education and other community partners. Early Childhood Program Support Teachers (EC PSTs), in conjunction with the Department of Public Instruction (DPI), are working on PK-12 initiatives for children and students of all ages and abilities. Collaboration is the common thread woven throughout these initiatives, and it doesn't end with EC PSTs and DPI. A number of state departments, organizations, and agencies are involved in ECSE initiatives that not only focus on young children, but also affect students in the K-12 system. Such initiatives include:

Wisconsin's Pyramid Model of Social Emotional Competence is a developmentally appropriate, evidence framework designed to promote social and emotional competence in young children ages birth to 5.

Young Dual Language Learners initiative provides professional development, technical assistance and resources to community partners regarding culturally and linguistically responsive practices for young children, birth-6.

Response to Intervention (RtI) is a process for achieving higher levels of academic and behavioral success for all students through high quality instruction, continuous review of student progress, and collaboration.

Wisconsin Infant and Early Childhood Mental Health Competency and Endorsement System, is a competency-based system of endorsement to recognize infant mental health knowledge and training among professionals across disciplines.

The UW Infant, Early Childhood and Family Mental Health Certificate Program, is an intensive, interdisciplinary professional development program for persons who work with children ages birth to 6 and their families.

With new information comes innovative training opportunities. EC PSTs and DPI are excited to share information via online training modules using Articulate software. Training modules are currently being developed and will be available at Wisconsin Early Childhood Collaborating Partners ([www.collaboratingpartners.com](http://www.collaboratingpartners.com)) and DPI's early childhood special education (<http://dpi.wi.gov/ec/ecspedhm.html>) websites. ☎

## Higher Education and Preschool Options Project

By Mary Joslin, Simone DeVore, Giuliana Miolo

The Cray Academy Summer Institute, developed and sponsored by CESA 10, is held every summer in late July or early August. This training opportunity for CESA 10 teachers and others offers great hands-on cutting-edge training and information.

On August 2-5, 2010, 18 professionals participated in a course entitled Collaborative Consultation in Early Learning Settings taught by Simone DeVore, Dept of Special Education and Giuliana Miolo, Dept of Communication Sciences and Disorders UW-Whitewater. This professional development opportunity was initiated by Mary Joslin, Wisconsin Preschool Options Project Coordinator. The participants, including Early Childhood Special Educators, Birth-to-3 Teachers, Speech and Language Pathologists, Physical Therapists, Head Start teachers, 4K and child care teachers, came together to learn how to develop and implement functional intervention plans for young children using a collaborative consultation service delivery model.

Gone are the days when the only placement option offered to children with disabilities and their families was direct instruction in a self-contained classroom. Nowadays, in keeping with best practice, school districts are obliged to offer a range of preschool options which take into account the child and family's needs and preferences. One of these options involves special educators and specialists supporting the child in community-based settings indirectly through coaching and consulting with the child's education and care providers. The aim of this course was to help early childhood professionals, in the words of Pat Wesley, re-pack "...their professional suitcases" by teaching them how collaborative consultation can be used to support children with disabilities. The text used for the course was Consultation in Early Childhood Settings by Pat Wesley and Virginia Buysee. This session was modeled after the course Simone and Giuliana teach as part of a Distance Education, collaborative Master's Degree Program available throughout Wisconsin. For more information go to: <http://www.uwsp.edu/education/Graduate/GraduatePages/MasterDegrees/onlineMSEducation.aspx> ☎

## Early Identification of Developmental Delays Through Surveillance, Screening, and Diagnostic Evaluations

Kris Pizur-Barnekow, PhD; Stephanie Erickson, MS; Mark Johnston, PhD; Tamicah Bass, MS, OTR; Loraine Lucinski, MPH; Dan Bleuel, BS

*Full article can be found in the current issue of Infants & Young Children Vol. 23 No.4 pp. 323-330*


*Summary by Elizabeth Wahl, Waisman Center, WPDP*

This paper describes the importance of identifying young children with developmental delays as early as possible. Early identification through surveillance, screening and diagnostic evaluation is viewed as “best practice” and is based on mounting evidence indicating that the earlier a child is identified as having a developmental delay, and receives services the better the outcomes will be for that child later in life. Effective early identification methods lead to improved referral rates and intervention.

The authors define the various methods community health care professionals use to effectively identify young children with developmental delays. Three primary processes are described including the least formal which is developmental surveillance, followed by developmental screening practices, and finally the most formal process, diagnostic evaluation. This paper points to the American Academy of Pediatrics policy statement from 2006, which recommends that all children be screened in the early years, and reviews the AAP’s recommendations for frequency of developmental screening, appropriate instruments for screening, and age intervals when screening should be performed.

The authors surveyed a sample of community health care professionals including service providers in the fields of early intervention, WIC, Headstart, public health, and child care to better understand their screening practices. The participants were asked to complete an online survey. The survey inquired about the types of screening instruments most commonly used, the barriers to implementing and performing developmental screening, and how to improve developmental screening practices in order to increase developmental screening rates.

The survey results indicated that many community health care providers are in fact performing developmental screening, and they are using the Ages & Stages Questionnaire most commonly. These practices are consistent with the AAP’s recommendations. Participants frequently reported that time and funding were significant barriers to conducting screening. Most of the professionals surveyed do not receive reimbursement for screening. Finally, participants were asked to identify interventions that might improve developmental screening rates. Respondents indicated that education about community resources is an important factor for improving screening practices and rates. Authors noted that this type of intervention would need to be individualized to each community as resources and supports vary across communities.


This paper provides information about early identification practices with a focus on developmental screening practices. The paper also reviews methods for communicating the purpose of developmental screening to parents, provides information learned from a large population of professionals working with children ages birth to 5, and notes considerations for future research and practice about developmental screening. 

*continued from page 6*

**Fiscal Subcommittee Members 2010:** Sandra Butts, Tonya Callahan, Diane Fett, Cindy Flauger, Chris Hirbal, Keith Keller, Elizabeth Kraniak, Russell Kutz, Cynthia Lilley, Dan Rossiter, Jeffery Spitzer-Resnick, Thomas Stratton, Norma Vrieze and Julie Walsh

### **Low Incidence Subcommittee**

The Low Incidence Subcommittee of the Birth to 3 Interagency Coordinating Council (ICC) is working to find ways to support Birth to 3 Programs across Wisconsin in serving children identified with a low incidence sensory (hearing or vision) need. This subcommittee is developing guidelines and support resources for county Birth to 3 programs which will promote awareness of the resources available to Birth to 3 programs and families along with how to access and best utilize those resources. Focuses include: screening, eligibility for Birth to 3, supports and services.

**Membership:** Linda Tuchman-chair, Lori Wittemann-DHS staff, co-chair, Heidi Hollenberger, Linda Huffer, Marcy Dicker, Sherry Kimball, Cindy Flauger, Laurie Nelson, Stacy Grandt, Elizabeth Seeliger and Tricia Weis 

# JOB POSTINGS

## UNIFIED COMMUNITY SERVICES

Position Vacancy **PHYSICAL THERAPIST**  
Unified Community Services' Birth to 3 Program has a full-time Physical Therapist position available in Dodgeville and/or Lancaster. Excellent opportunity to work with children ages birth to three and their families in their home and other community settings throughout Iowa and Grant Counties. Responsibilities include conducting evaluations, providing physical therapy, and developing home exercise programs to help families enhance their child's development.

Candidates must have current PT licensure in Wisconsin, valid driver's license and own transportation.

Competitive salary plus benefits, per collective bargaining agreement.

Submit resume and letter of interest to:

Cheryl Knapp  
Unified Community Services  
1122 Professional Drive  
Dodgeville, WI 53533  
(608) 935-2776  
[cknapp@unifiedservices.org](mailto:cknapp@unifiedservices.org)  
AA/EEO/CRC

## UNIFIED COMMUNITY SERVICES

Position Vacancy **SPEECH-LANGUAGE PATHOLOGIST**  
Unified Community Services' Birth to 3 Program has a Speech-Language Pathologist position available in Dodgeville and/or Lancaster. Excellent opportunity to work with children ages birth to three and their families in their home and other community settings throughout Iowa and Grant Counties.

Responsibilities include administering diagnostic and therapeutic speech services, with an emphasis on supporting the family's knowledge, skills and abilities as they interact with and raise their child.

Requires SLP licensure in Wisconsin.

Competitive salary plus benefits, per collective bargaining agreement.

Please submit a resume and letter of interest to:

Cheryl Knapp  
Unified Community Services  
1122 Professional Drive  
Dodgeville, WI 53533  
(608) 935-2776  
[cknapp@unifiedservices.org](mailto:cknapp@unifiedservices.org)  
AA/EEO/CRC

## EARLY CHILDHOOD PROFESSIONAL DEVELOPMENT SPECIALIST [Outreach Specialist]

Waisman Center Early Childhood Professional Development Program, University of Wisconsin-Madison  
This position is part of the Waisman Center – University Center for Excellence in Developmental Disabilities (UCEDD). The associate outreach/outreach specialist will be assigned specific projects that are to be completed within the time limited framework of this position, ending September 30, 2011. The focus of this position is to:

- Develop and disseminate written and electronic education materials;
- Utilize effective adult learning methods, including e-learning and distance education technologies.
- Plan and conduct professional development events.

The person in this position will:

- Complete the assigned work within the interdisciplinary team context of the early childhood professional development program of the Waisman Center UCEDD.
- Have to be successful in working independently on assigned projects, utilize consultation and input from various stakeholders, including primary health care providers, early childhood care and education programs, and other public health and family support initiatives for children ages birth to 6 and their families.
- Need to have excellent written and verbal communication skills to develop relationships with key state and community partners as well as Waisman Center UCEDD staff.

Complete position description and application guidance are available at this site:

[http://www.ohr.wisc.edu/pvl/ohrpv\\_xr\\_01\\_post.html](http://www.ohr.wisc.edu/pvl/ohrpv_xr_01_post.html)

Contact: Linda Tuchman, [tuchman@waisman.wisc.edu](mailto:tuchman@waisman.wisc.edu)

# STAFF HIGHLIGHTS

## Sarah Kate Johnson, Department of Health Services

Sarah Kate Johnson (Kate) recently started her position with the Birth to Three Program in the Department of Health Services in late September. She previously worked in substance abuse and foster care programs with the state and is excited to return to working with children and families. She received her Masters of Science in Social Work at the University of Wisconsin – Madison in 2002 and undergraduate degree in Psychology from the University of Notre Dame in 1998. In addition to working at the state, Kate worked in an elementary school in New York City and a Head Start Program and Montessori preschool in Madison. She is excited to work with the Birth to 3 Program because it combines many of her work and personal experiences and passions – helping children and families access the services they need in order to be successful. ☎

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## *Birth* to **6**EVENTS



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EVENTS is published two times each year by the Wisconsin Birth to 3 Personnel Development Project (WPDP) with funding from the Wisconsin Department of Health and Family Services, Birth to 3 Program, and the Wisconsin Department of Public Instruction. WPDP, housed at the Waisman Center, University of Wisconsin-Madison, is funded by the Birth to 3 Program to address the need for well qualified early intervention service providers in the state. WPDP offers a wide range of educational opportunities for parents, service providers from all disciplines, and program managers/administrators, through a multifaceted program. Activities include statewide and regional in-service workshops, Parents as Leaders (PALS), technical assistance, the Birth to 3 Training and Technical Assistance website, and materials development and dissemination.

For additional information, call 608-263-5022 or 1-800-532-3321, or email [sankey@waisman.wisc.edu](mailto:sankey@waisman.wisc.edu)

**WPDP website:** [www.waisman.wisc.edu/birthto3/](http://www.waisman.wisc.edu/birthto3/)