

Welcome to the family-centered practices in early intervention presentation!

# The North Dakota Early Intervention System (NDEIS)

Early Intervention system is comprised of **both** the El Service Coordination <u>and</u> the El Service Provision

- Regional Early Intervention (EI) Program is the same as EI Service Coordination and EI Service Provision
- El Service Coordinator is the same as Developmental Disabilities Program Manager (DDPM)
- El Primary Early Intervention Professional is the same as
   Home Visitor or Primary Early Intervention Provider (PEIP) or Early Interventionist
- · El Professionals is the same as El Service Coordinator and El Provider

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Lets look a little deeper into how we use terminology around early intervention services in North Dakota. The early intervention system is comprised of both EI service coordination and EI service provision. The regional early intervention program is the same as EI service coordination and EI service provision. The EI service coordinator is the same as the developmental disabilities program manager (DDPM). The EI provider is the same as the home visitor or primary early intervention professional, also called a PEIP, or an early interventionist. EI professionals can be used to refer to an EI service coordinator or an EI provider. This is the terminology that will be used to distinguish the different roles in this presentation.

### **Happy Birthday!**



Imagine what Early Intervention would look like if we skipped the formalities and jumped right into the heart of things!

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Karen Anzola describes the importance of family-centered principles as the awe and wonder that EI professionals have if we take the time to "unwrap" the gifts that families and children bring to the table. When you go to a birthday party, the events are all about the "birthday person." Professionals working with families may need to let go of their agenda and really listen to the family. Let the family direct the conversation, then follow up by highlighting what they are saying and ask questions to "check" understanding. When meeting with families --- just like at a birthday party --- the families should feel like they are "center stage."

## This is more than listening!

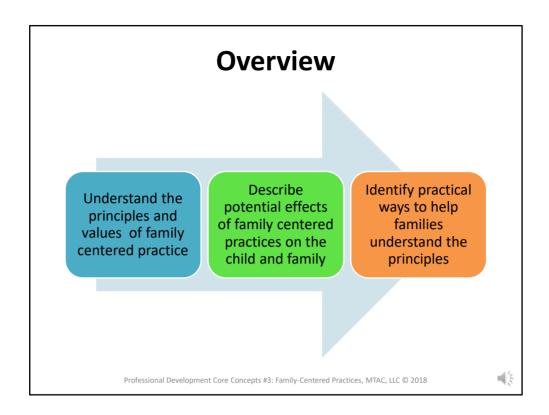


- Family centered means you must take risks and be willing to support the family in center stage.
- Unwrapping gifts requires trust, communication, comfort and clear roles.

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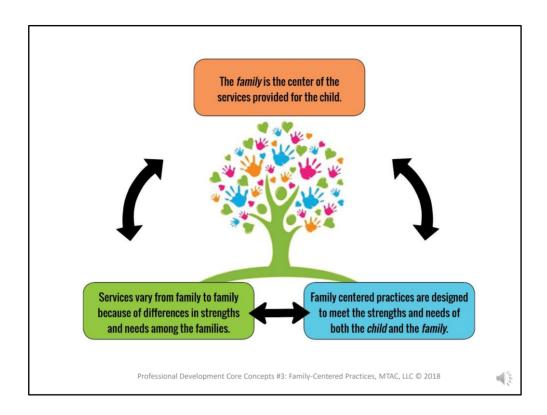


Family-centered practice is more than just listening to families! It is also celebrating where families are at and where they hope to go! It means taking risks and be willing to support the family, who should be at center stage. Unwrapping these gifts requires trust, communication, comfort, and clear roles.



When family centered practices are applied, there is not just one behavior or change that makes our practices family-centered. Family-centered practices begin with a change in our beliefs and attitudes toward families. It is important to change the way families are viewed, and value their uniqueness, to improve family-centered practices. For example, when the uniqueness of each family is understood, services will be provided that meet the family's unique needs. When family-centered practices are used, EI professionals will build upon the strengths of the family, flexibly meeting the family's changing needs, collaborating with the family, strengthening the family's capacities to function, and helping the family build partnerships with other relevant people and organizations.

The following slides go more in-depth into these practices.



Family-centered services are supported by Part C of the Individuals with Disabilities Education Act (IDEA) for infants and toddlers, age birth through age 2, with disabilities and their families. Family-centered services describe a method of coordinating and providing services to support the child and the family based upon their unique strengths and needs. Services are based on the family priorities. Family-centered practices consist of active listening, sensitivity, responsiveness to personal and cultural values, and acknowledging individual needs when designing intervention based on family priorities.

# **Family-Centered Practices:** Who drives the car?

Two types of family centered practices:

### Relational

- Family friendly
- Practitioner attention to family activities





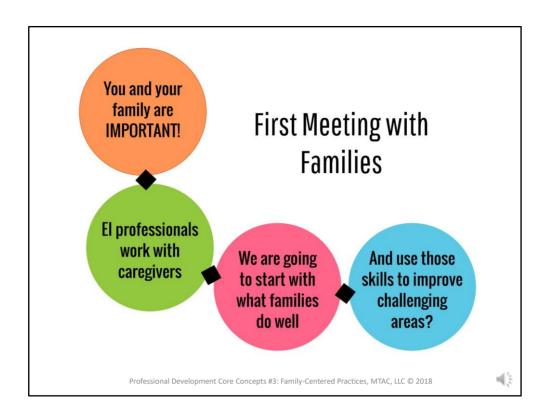
- Family choice and action
- Practitioner responsiveness and flexibility

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Family-centered services are all about putting the family in the driver seat! Familycentered practices are two-fold, including both relational and participatory components. Relational components are really about having good interpersonal skills. There is not a recipe. This really focuses on the "art" of active listening, compassion, empathy, respect and being non-judgmental.

The participatory component includes focusing on individualized services that are flexible to meet specific family needs. This is why services are based on the family's concerns and priorities. It also means that EI professionals work really hard to provide many opportunities for the family to be actively involved and for families to be the decision maker when it comes to decisions and choices in how services are delivered! This changes the role as provider to one of collaborator with the family instead of an expert making decisions for the family.



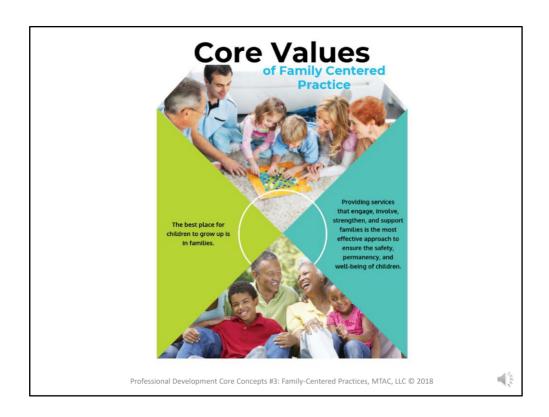
Here is some information that provides basic conversation topics that are family-centered during the first meetings with families.

First, it is important that families know that they are important...just the way they are. Families have a unique set of resources and strengths that are different from other families. Then, families need to know that in order to best help the child, El professionals will be coaching caregivers. The purpose of this is to assist the family in what is most important to them in helping meet their family's needs.

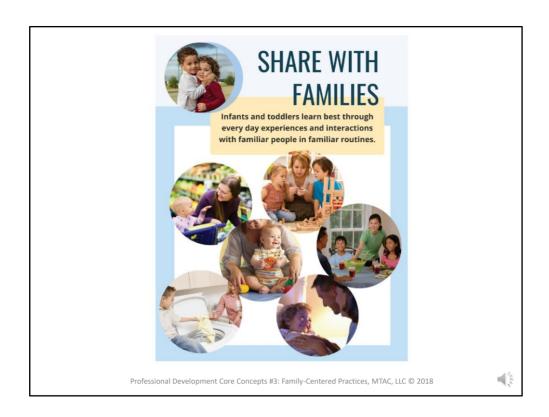


Supporting families in understanding that they have a unique set of strengths and resources is the starting point for intervention. When this is the focus, families will be more empowered to use strategies to support their child and family.

Families will feel more successful and be more likely to use these skills. While focusing on strengths, EI professionals will support areas of challenge to build the family capacity to meet their child's needs.



Family-centered practices are built upon two core values. First, within family-centered practice, we believe that the best place for children to learn and grow up is in a family environment. Family can have many different meanings and include different people, depending on how a family defines itself, but the important aspect is that whatever the make-up of the family, this is the best place for children to grow and develop. Secondly, by providing services that engage, involve, strengthen, and support families, EI professionals are using the most effective approach to ensure the safety, permanency, and well-being of children.

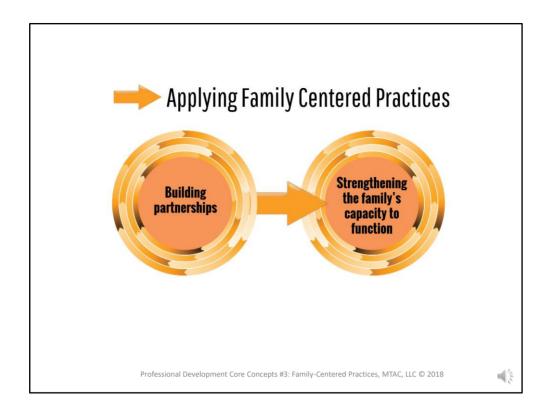


The North Dakota Early Intervention System was designed with a focus on the family because research shows that infants and toddlers learn best through their day to day experiences and interactions with familiar people in their natural, familiar environments.

The role of EI service coordinators and EI providers is to help families recognize that the focus of early intervention is to support families and their children in their everyday activities. Early Intervention in ND happens within the experiences of the family's usual routines and things that they do in the community every day. Their routines are the learning environment for intervention. The focus is on supporting caregivers so that they can support their child during all the things that happen each day.



In the North Dakota Early Intervention System, families should be actively involved in the entire early intervention process, and to do this, families are supported in every aspect of the process. The goal is for EI professionals to join the family in what they are already doing, and not to "contrive" artificial things for the families to work on with their children. The goal is not to talk TO or ABOUT families. The goal is to talk WITH families.

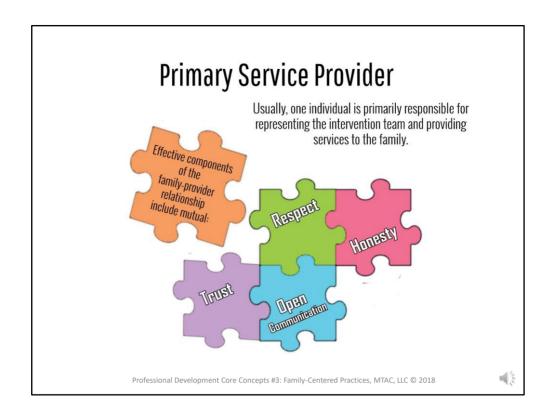


Partnerships are an important part of any person's life. In early intervention, partnerships can be made with support groups, preschool providers, therapists, community agencies, and many others. Depending on the needs of the family, EI professionals connect the family with the people and agencies that will support them where they need it.

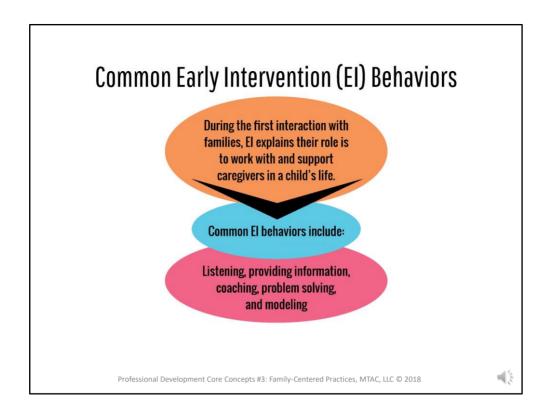
Building partnerships, in connection with the other practices described in this section, builds the family's capacity. This is especially important because early intervention ends as the child turns three. Early intervention paves the way for future success.



All families are different. Whether the family is big, small, extended, nuclear, multigenerational, one parent, two parent, gay or lesbian parents, or grandparents and children splitting time among different family members, they are a family. We become part of a family by birth, adoption, marriage, or from a desire for mutual support. The important thing to remember is that each family defines what 'family' means to them. Professionals in early intervention need to prepare themselves to work with all types of families and to be sensitive to their unique needs, strengths, and resources. It is essential that family-centered practices are individualized, flexible, and collaborative. Practices should be tailor-made for each family, while keeping in mind that families are constantly evolving and changing. Early intervention practices need to do the same as services are adapted to the changing needs of the families. Families should be assured that the diversity that each family brings is valued. There may not be a strong understanding of every culture, but EI professionals should RESPECT the diverse culture and embed the family's cultural beliefs into the early intervention services being provided.



Primary service provider means that one individual takes the primary responsibility for representing the team and interacting with the family. Families are considered partners in the relationship. All EI professionals need to ensure that they are using positive communication with families to support the family-provider relationship. Effective family-provider relationships are characterized by mutual trust, respect, honesty, and open communication. During initial contacts with families, the early intervention professionals help families understand that these are some of the traits that will be used to support an on-going relationship.

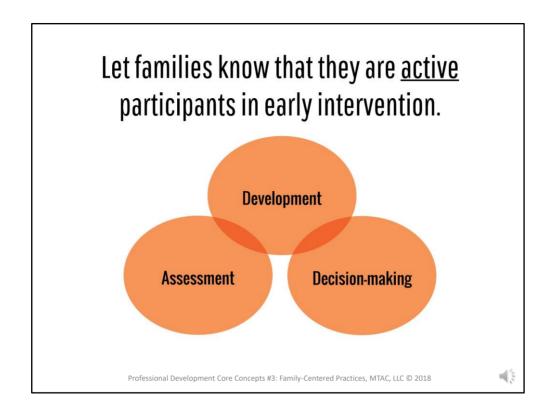


During the initial meeting with families, EI professionals share that the PRIMARY role of early intervention is to work with and support family members and caregivers in the child's life. EI professionals share that the goal is to engage with the family to enhance their confidence and competence in supporting their child. Doing this will support families in their natural role to teach their child and support the child's development across all domains. The primary early intervention provider, or PEIP, interacts in many ways with the family, as does the EI service coordinator. EI professionals listen to the family to learn about their stressors, joys, and concerns. EI professionals provide information that relates to questions, concerns, or topics to support the child's development. EI professionals may model behaviors and ways to interact with the child as well as coach families as they learn strategies to enhance interactions with their child.

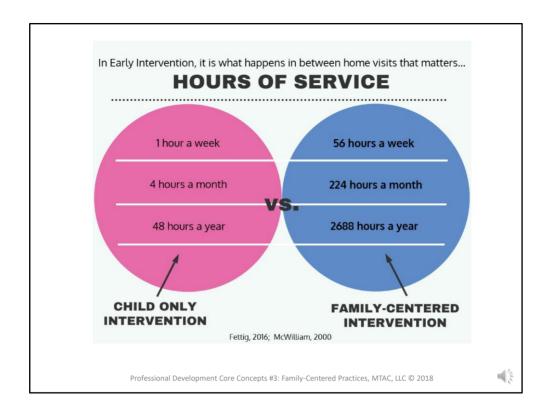


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The PEIP's primary focus is to help the family in understanding how to embed a certain strategy within the typical routines the family is already doing. It is not coming up with or contriving some artificial activity with the family. The family and PEIP will problem solve to choose a strategy to use in a routine.



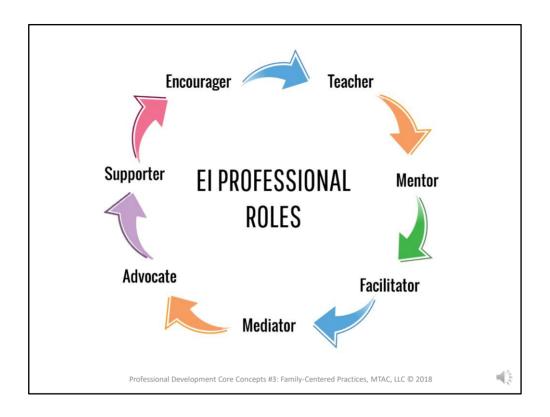
Within family centered practices, families are active participants and involved in the development of policy, program design, and evaluation. Families are also active participants in the decision making process for selecting services for themselves and their children during the IFSP meeting. Additionally, families are directly involved in assessments of their children, and these assessments should be strength-based and solution-focused.



Families may want PEIPs to focus all of their attention on the child, but it is important to help families understand that from the beginning to the end of early intervention, adult caregivers are going to be <u>actively involved</u>. This begins with the initial evaluation and assessments, to program and intervention decision making, with carry over into the family's routines and activities. PEIP's help families to understand that because they are <u>actively involved</u>, their children's development and learning will be maximized. It is the EI professional's role to help the family understand that the focus of services is helping the caregiver to help their child during the ordinary things that they do each day. If the PEIP worked directly with the child, then the child would only be supported during that hour or two that early intervention is in the home. When the family is supported, the interventions are embedded into typical activities the family is doing, and the child gets many more hours of "intervention." PEIPs and EI service coordinators will share this information with families at intake and throughout the early intervention process.

# Facts for Families North Dakors Early Intervention Street to provide guilty evidence lossed apperts and services. The purpose of Early Intervention (ED) is to provide poerats, family members, and other caregivers with respect to and resources to they one enhance the children's laurering and development. The base in the nearly and the caregivers and the

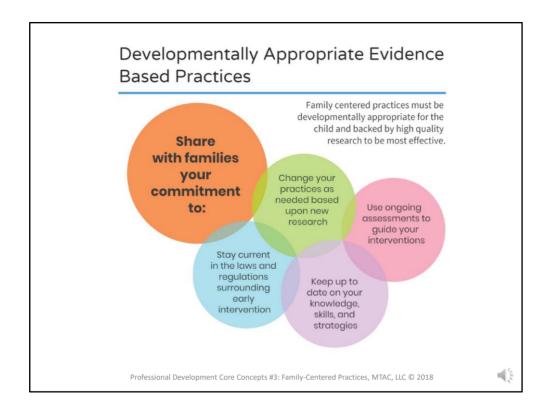
It may be helpful for EI professionals to share the "Facts for Families" document that was developed by the North Dakota Early Intervention System to help families understand what early intervention in North Dakota looks like from the very beginning.



Within family-centered practices, families should take an active role. Because families taking an active role looks different from one family to the next and from one visit to the next, the role of an EI professional constantly changes. For example, one week a PEIP may be facilitating a typical routine with the family and child, the next week the PEIP may be teaching a strategy to the family within a routine, and yet another week, the PEIP may be supporting and encouraging the family's use of the strategy while the EI service coordinator helps the family access a community service. EI professionals must be flexible and able to meet the changing needs of families.



One of the primary purposes of early intervention is to empower families to actively care for and support their child, and this should be shared with families during the first interaction. An important part of early intervention is supporting families in understanding that empowerment includes helping families to appropriately deal with their feelings, make choices and decisions, and plan for the future. Family empowerment in turn supports the well being and development of the child. All families means ALL. Regardless of income, education, race, culture, or any other variable, a core belief of family-centered practices is that when supported, all families can support their children's learning and development.



Interventions with young children and family members must be based on explicit principles, validated practices, best available research, and relevant laws and regulations. To make sure the best services are being provided, EI professionals must keep up to date with the current knowledge, laws, and regulations in early intervention. This means that EI professionals practice skills and strategies, change practices based upon the research, and use ongoing assessment to guide interventions.

In the first interaction with families, EI professionals share their commitment to continuous learning and improvement. A commitment to use developmentally appropriate, evidence-based practices ensures that children and families receive the best services possible to meet their needs.

### **Roles in Family Centered Services**

### El must understand roles as family gifts are "unwrapped"

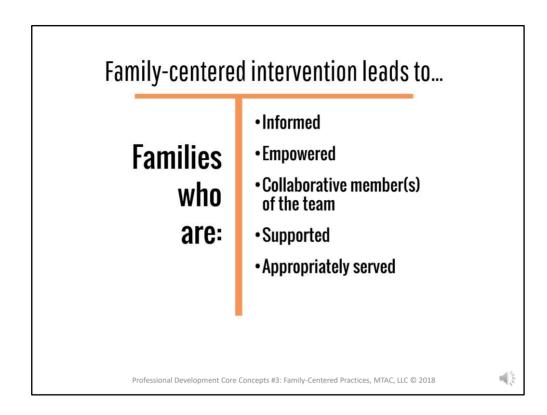
Is the early interventionist:

- A director- directing or suggesting ideas you have come up with?
- A facilitator- following the family's lead?
- A collaborator- working with the family jointly?
- A consultant engaging in active problem solving or providing support by linking family community resources?

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To reflect on family-centered practices, consider the role of early interventionist. There are times that the early interventionist needs to be "a director," but the early interventionist needs to be mindful that ultimately, he/she should strive to spend most of their time facilitating, collaborating and consulting with the family in an active role that is based on the family priorities! The facilitator follows the family's lead. The collaborator works with the family through a process of give and take. The consultant engages in active problem-solving and provides support through linking to community resources.



The ultimate outcome of family-centered interventions are families who are informed, empowered, collaborative members of the team, who are supported, and appropriately served.

### **Family-Centered Practices Reflection**



Over the next two weeks, consider family-centered practices with the following questions.

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Over the next two weeks, consider how family-centered practices are used. If you are an EI service coordinator or EI provider, it might be helpful to choose one family that you will be very comfortable in applying these practices, and a second family that will challenge your skills as an EI professional. If you are a caregiver, consider how family-centered practices are reflected in home visits with professionals.

### **Early Interventionist Reflection**

We all are pretty sure we understand family-centered practices, but do we practice what we preach? On your home visits, pay attention to how much you really collaborate with the caregiver.

 Are you doing most of the talking and the work during the visit, or are you sharing the conversation and collaborating to support parent-child interaction?



 Does the caregiver talk at least as much as you do?

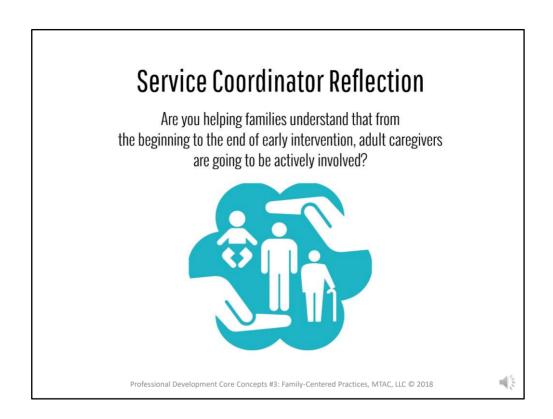
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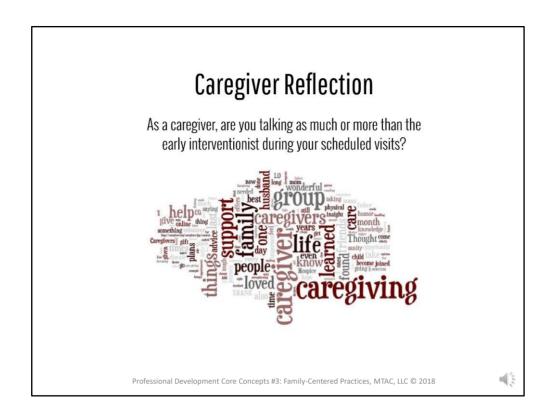
We all are pretty sure we understand family-centered practices. As early interventionists, do we practice what we preach? On your visits, pay attention to how much you really collaborate with the parent.

Are you doing most of the talking and the work during the visit, or are you sharing the conversation and collaborating to support parent-child interaction?

Does the parent talk at least as much as you do?



As a service coordinator, are you helping families understand that from the beginning to the end of early intervention, adult caregivers are going to be actively involved? Consider how you are helping families understand that they will have an active role in early intervention.



As a caregiver, are you talking as much or more than the early interventionist during your scheduled visits? If not, you may want to have a discussion with your home visitor about what your role is in early intervention.

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