

IDA News

CALIFORNIA

Infant Development Association of California

Introducing California's New Professional Competencies

By Cindy Arstein-Kerslake and Nancy Sweet

The Infant Development Association (IDA) is committed to the goal of ensuring high quality services for very young children and their families. One of the most important aspects of quality is reflected in the competencies of the workforce that serves them. Over the past few years three groups in California representing different areas of professional development have been in the process of articulating competencies for personnel who work with infants, toddlers, preschoolers and their families. As of January 2011 competency documents have become available for the fields of early intervention, early care and education and infant family and early childhood mental health.

The three recently published documents include: The Inter-

agency Coordinating Council Recommended Early Start Personnel Manual (ICC ESPM), developed by the California Department of Developmental Disabilities (DDS) and the California Department of Education Special Education Division (CDE/SED) with the development contractor, WestEd Center for Prevention and Early Intervention (CPEI); The Early Childhood Educator (ECE) Competencies de-

veloped by the California Department of Education (CDE) Child Development Division (CDE/CDD) and the First 5 California Child and Families Commission with the development contractor, WestEd Center for Child and Family Studies (CCFC); and the Revised Training Guidelines and Professional Competencies for Infant Family and Early Childhood Mental Health (IFECMH) developed under the leadership of the IFECMH Center at WestEd CPEI. IDA's Interdisciplinary Collaborations for Quality Committee (formerly the Infant and Early Childhood Mental Health Committee) has followed and/or supported the development of each of these documents. One of the goals of this committee is to support the field in learning about and understanding all three of the documents. This Winter IDA Newsletter is devoted to that purpose. The ICQ collaborated with key experts involved in the development of the documents to write the articles for this newsletter and other elements of the newsletter and with WestEd CPEI and WestEd CCFC to coordinate the review of the articles by CDE/CDD, DDS and CDE-SED. WestEd CPEI developed and coordinated the content for the Matrix.

To understand the significance of these three documents, it helps to take a historical perspective on the development of services for young children and families in California. Forty years ago, early intervention services for young children with special needs were few, often started by parents, and housed in church basements. Early care and development was largely an extended family affair. Infant mental health was not a social concept,

(see **COVER STORY** page 8)

This Issue's Theme:

Competencies

veloped by the California Department of Education (CDE) Child Development Division (CDE/CDD) and the First 5 California Child and Families Commission with the development contractor, WestEd Center for Child and Family Studies (CCFC); and the Revised Training Guidelines and Professional Competencies for Infant Family and Early Childhood Mental Health (IFECMH) developed under the leadership of the IFECMH Center at WestEd CPEI. IDA's Interdisciplinary Collaborations for Quality Committee (for-

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Thanks go to Monica Crumley and Lisa Lindsey for sharing pictures of their family for use in this newsletter. Monica and Lisa are both proud parents of children with Down Syndrome. You can learn more about them on their blogs:

Monica Crumley at <http://www.monicacrumley.blogspot.com/>

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Questions:

For information related to the Early Start Personnel Manual (pages 3, 4, & 14) and to download the document go to:
www.wested.org/cs/cpei/print/docs/230 or email at cpei@wested.org

For information related to the Revised Training Guidelines and Professional Competencies for Infant Family and Early Childhood Mental Health (pages 5, 6, & 8) and to download the document go to:
www.ecmhtraining-ca.org and email via "contact us" tab at the website.

For information related to Early Childhood Educator Competencies (pages 9-11) contact Laura Bridges LBridges@cde.ca.gov.

The publication will be available from the CDE Publications Catalog <http://www.cde.ca.gov/re/pn/rc/ap/pubcat.aspx>.

MISSION

The Infant Development Association of California is a multi-disciplinary organization of parents and professionals committed to emotional outcomes for infants, birth to three with a broad range of special needs, and effective prevention and early intervention services, and provides information, education, and training to parents, professionals, decision-makers, and others.

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The California Interagency Coordinating Council Recommended Early Start Personnel Manual

by Maurine Ballard-Rosa, Wendy Parise and Kristine Pilkington

Description and Purpose:

The *Early Start Personnel Manual (ESPM)* describes the foundational principles, competencies and evidence-based practices needed for the provision of effective early intervention services by appropriately prepared and trained personnel. The manual elaborates key roles of interdisciplinary team members, strategies to support seamless service delivery and how to matriculate through the Early Start personnel preparation system. The current revision took place over a three-year process, incorporating previous efforts and evidence from research and the field that have influenced practice over the past decade. The ESPM supports the California Early Start Comprehensive System of Personnel Development (CSPD) effort to strengthen California's system of qualified personnel providing services for eligible infants and toddlers and their families and is an important contribution to the early childhood field.

The *Early Start Personnel Manual*, "A Guide for Planning and Implementing Professional Development in Support of Early Intervention Services", has been recommended to the Lead Agency for Part C of IDEA (Department of Developmental Services) by the California Interagency Coordinating Council on Early Intervention (ICC) as of November, 2010. The ICC ESPM serves as a professional preparation and training guide for early intervention personnel serving infants and toddlers and their families, including personnel working in local education agencies and regional center vendors.

Of key importance in the development of the *ESPM* are the fundamentals of family-centered care in home and community-based natural environments, established in the original IDEA Part C early intervention statute and regulations. Services must build on knowledge of typical and atypical early childhood development, child-parent interactions and relationships between families and service providers. Services in natural environments enhance children's participation in everyday routines, relationships, activities, places and partnerships that structure

family life. They reflect collaborative coaching and interdisciplinary teamwork utilizing the natural relationships, learning settings and opportunities that enhance parent ability to promote childhood experiences. They also recognize the risks and protective

factors that influence development. Service provision revolves around a core provider who acts as the primary intervention resource for families. All of these practices require sensitivity, intent, knowledge and specialized skills. In addition,

in alignment with federal and state regulations, early intervention providers must use an evidence-based practice framework in their daily work with children and families.

Key Components of the ICC ESPM:

The *ICC Early Start Personnel Manual* (www.dds.cahwnet.gov/EarlyStart/home.cfm or www.wested.org/cs/cpei/print/docs/230) contains seven sections:

1. **Introduction**, includes the purpose of the manual, the framework and philosophy, historical perspective, potential audiences and uses for the manual, and consideration of "cornerstones" of quality early intervention: personnel preparation and interdisciplinary practice. This section also describes the supervision, both direct and reflective, necessary for professional growth that is emphasized here and throughout the manual.
2. **Early Intervention Team**, provides a description of team composition and perspective on the roles of team members and how they fit within a "core provider" model.
3. **Personnel Entry and Advancement Pathways**, describes the qualifications and requirements to achieve the roles of Early Intervention Specialist (a new professional designation for providers in California) and the Early Intervention Assistant. A potential one-time "Granted Authorization" process is defined (see further description in full ICC ESPM).

(see **EARLY START** page 4)

4. **Principles and Competencies**, elaborates on three key components of the manual that build upon one another .

➤ ***“Six Foundational Principles for All Team Members”***

1. Practices shall be family-centered.
2. Practices shall be relationship-based.
3. Practices shall be culturally responsive.
4. Practices shall be collaborative and interdisciplinary.
5. Practices shall be responsive to child developmental risk and protective factors.
6. Practices shall adhere to professional and ethical standards.

➤ ***“Core Knowledge for Early Intervention Specialists and Early Intervention Assistants”***

1. The dynamics of family systems including cultural, linguistic and socio-economic factors influencing family function and care for all children.
2. The role of primary social and emotional relationships as the foundation for early learning.
3. The prenatal care, delivery and postnatal care of the infant, including variations across families, cultural and ethnic groups.
4. The range of typical infant/toddler physiological factors such as early neurological/brain development, basic health and nutrition, and physical growth and maturation.
5. The importance of play as context, method and outcome of learning.
6. The sequences of development and the interrelationships among developmental areas/factors (8 sub-topics).
7. The variety of pre- and peri-natal risk factors such as genetics, maternal health and nutrition, medical complications, prematurity/low birth weight, substance exposure and other teratogens and their effect on the developing embryo/fetus/newborn.
8. The etiology, diagnosis and characteristics of disabilities and risk factors.
9. The characteristics and influence of disabilities and risk factors on early development, learning, care giving and relationships (5 sub-topics).
10. The significance and study of team models, collaboration and relationship-based practice.

- ***“Specific Competencies for Early Intervention Specialists and Early Intervention Assistants”***, identifies fundamental knowledge and skills required of each role throughout the IFSP process as well as the ability to utilize supervision and reflective practice in early intervention:

1. Identification and Referral
2. Evaluation and Assessment
3. Individualized Family Service Plan (IFSP) Development and Review
4. Individualized Family Service Plan (IFSP) Implementation
5. Transition Planning
6. Supervision and Reflective Practice

- **Definitions of Key Concepts**
- **Appendix**
- **References and Source Materials.**

Audiences and Uses for the ICC ESPM:

The “Audience and Uses for the Manual” section provides policy and practice suggestions for ten early intervention service entities and related groups and individuals, including the California ICC, lead agency and state agency partners, regional center and local education agency personnel, regional center vendored programs, family resource centers, families and other state and local groups. Refer to the ICC ESPM for full listing of organizations and personnel who can utilize this revision of the Early Start personnel system as a tool to inform and guide high quality early intervention practice in California.

While directly related to work in early intervention for a variety of professionals and career fields, the contents of the manual will be of particular interest to Early Start service coordinators, early interventionists in vendored or local education programs, early childhood specialists/educators, early childhood mental health providers, physical, occupational and speech therapists, administrators, and support personnel as well as those interested in entering the field of early intervention. Colleges and universities will also benefit from the manual content as they continue to update curriculum and requirements for the personnel roles in early intervention and allied fields.

The Revised Training Guidelines and Professional Competencies for Infant Family and Early Childhood Mental Health

By Mary Claire Heffron

Background:

In 1996, a group of visionary leaders met to discuss what might be needed to provide effective infant family and early childhood mental health services in California. Funding for this project came from the Department of Health and Human Services Maternal and Child Health Bureau, and was awarded to the University of Southern California's University Center for Excellence in Developmental Disabilities at Children's Hospital Los Angeles. Marie Kanne Poulsen, Ph.D. served as Principal Investigator for this project.

The discussions at meetings were framed by two important questions: (1) How could California best move toward a system that would build expertise and specialized skills across a variety of disciplines and systems serving children prenatal through five years of age and their families? (2) What kinds of support and reflective facilitation are needed to support professionals in practice? Such a system was envisioned as a "value added" designation and not a new license, certification, or credential. The need was spurred by growing scientific research about the importance of infancy and early childhood and by the emerging awareness across disciplines of the importance of relationship-based preventive intervention and treatment approaches. The year-long discussions culminated in an initial set of recommendations and personnel competencies.

In 2001 based on these initial recommendations, a workgroup funded by the First Five California Children and Families Commission through the Department of Mental Health and coordinated by the WestEd Center for Prevention and Early Intervention was formed. In 2003 the group completed interdisciplinary training guidelines and personnel competencies that were then published and disseminated by CEITAN at WestEd Center for Prevention and Early Intervention. Again the focus remained on a broad cross systemic approach allowing for many ports of entry into relationship based services in such settings as education, early

intervention, family support settings, public health services, mental health programs, medical settings, and social service systems.

Four years later, a broadly representative volunteer workgroup with limited funding provided by a private donor worked diligently to refine and expand the 2003 Training Guidelines and personnel competencies and to design an endorsement system. In 2009, the revised version of the California Training Guidelines and Personnel Competencies for Infant-Family and Early Childhood Mental Health was published.

Description of Current California IFECMH Training Guidelines and Personnel Competencies:

The 2009 revised version of the California IFECMH Training Guidelines and Personnel Competencies features three domains: Knowledge, Experience, and Reflective Practice Facilitation. Endorsement requirements are described for Mental Health Core

Providers, Mental Health Specialists and Reflective Practice Facilitators. Each of the 8 areas of Knowledge includes key concepts and competencies that describe in extensive detail knowledge and process skills re-

lated to each knowledge area. (See Table: Knowledge Areas) The experience domain designates how much and what kind of experience an individual should have before seeking endorsement. The third domain, reflective practice facilitation, is an essential part of this system. This domain includes unique competencies that describe reflective practice facilitation, a process designed to allow time and support so individuals can integrate knowledge from the knowledge areas and move this information from theory into their practice using reflective approaches. (See the website www.ecmhtraining-ca.org for full descriptions of the three Domains and the 8 areas of Knowledge within the IFECMH Guidelines.)

"Endorsement requirements are described for Mental Health Core Providers, Mental Health Specialists and Reflective Practice Facilitators."

Endorsement Process:

The endorsement system was piloted in 2010, first by the workgroup members and soon after by a group of invited participants. First Five California has supported the development of the endorsement process as a Workforce Development activity. Fifty-two individuals from across the state of California have been endorsed to date across all categories of the system. Applicants documented training in the core knowledge areas, work experience, and reflective practice facilitation using a web-based electronic application process. Letters of recommendation were required. A panel carried out a thorough review of documented experience and learning. Currently, the application is being refined based on recommendations of the first wave of applicants. The system will be open for endorsement applications in January 2011.

The California Training Guidelines and Personnel Competencies for IFECMH delineate knowledge, work experience, and reflective practice facilitation needed by a variety of disciplines, working across systems with infants, young children and families in many different settings. The system spans many different kinds of agencies, programs, disciplines, and systems of care. The IFECMH system allows individuals to specify their experience and training with infants prenatal to three, preschoolers, or the full range of prenatal to five. The endorsement does not supplant or replace any existing licensing or credentialing, but rather designates a voluntary system of endorsement to signal specialized knowledge and expertise focused on a relational model of service delivery with infants, young children and families.

Purpose of the IFECMH Competencies and Personnel Guidelines:

The California IFECMH Competencies and Personnel Guidelines are intended to help individuals, agencies, policy makers and training institutions. An individual might already have the licensing needed in order to be able to bill or to work in a specific system, but often that training does not include specialty work in the field of services to young children birth to five and their families. The additional endorsement through

the IFECMH Training Guidelines and Personnel Competencies demonstrates specific knowledge and skills in the infant family and early childhood mental health area. Employers seeking qualified staff or hoping to expand or assess the skills of existing staff can use the system for guidance. The California IFECMH Training Guidelines and Personnel Competencies have important implications for policy makers and program developers. Quality service delivery in all models of service across

service systems will only happen if staff providing services are well trained and well supported. The California system outlines a realistic set of standards that sets a baseline for quality services for young children and families that also encourages continued professional growth and support for staff providing services.

Uses:

For training programs educating individuals to work in various sectors of the infant family and early childhood mental health field such as specialty programs at universities, freestanding training groups, or professional organizations like IDA, the competencies provide a useful framework. Coursework, training programs, and professional development workshops can be developed to align with knowledge areas, specific competencies within those knowledge areas, and reflective practice facilitation needs. For agencies and individuals that provide professional development through individual or group reflective practice facilitation, the system outlines a set of competencies for reflective practice facilitators. These competencies and endorsement of reflective practice facilitators are steps in assuring that reflective practice facilitation and supervision are solid investments that build provider skills and increase reflective capacities for providers.

Training:

Several training programs around the state are using the California Training Guidelines and Personnel Competencies as guidance for their program development. These programs help participants to meet



KNOWLEDGE AREAS FOR EACH OF THE THREE COMPETENCY DOCUMENTS

Infant Family and Early Childhood Mental Health Training Guidelines

Knowledge Domains

- A. Parenting, Caregiving, Family Functioning and Parent-Child Relationships
- B. Infant, Toddler and Preschool Development
- C. Biological and Psychosocial Factors Impacting Outcomes
- D. Risk and Resiliency
- E. Observation, Screening and Assessment
- F. Diagnosis and Intervention
- G. Interdisciplinary/Multidisciplinary Collaboration
- H. Ethics

(NOTE: Each of the 8 areas of Knowledge includes key concepts and competencies that describe in extensive detail knowledge and process skills related to each knowledge area. The Reflective Practice Facilitation domain includes unique competencies to move this information from theory into practice using reflective practices.)

ICC Early Start Personnel Manual

Core Knowledge Areas

1. The dynamics of family systems including cultural, linguistic and socio-economic factors influencing family function and care for all children.
2. The role of primary social and emotional relationships as the foundation for early learning.
3. The prenatal care, delivery and postnatal care of the infant, including variations across families, cultural and ethnic groups.
4. The range of typical infant/toddler physiological factors such as early neurological/brain development, basic health and nutrition, and physical growth and maturation.
5. The importance of play as context, method and outcome of learning.
6. The sequences of development and the interrelationships among developmental areas/factors (8 sub-topics).
7. The variety of pre- and peri-natal risk factors such as genetics, maternal health and nutrition, medical complications, prematurity/low birth weight, substance exposure and other teratogens and their effect on the developing embryo/fetus/newborn.
8. The etiology, diagnosis and characteristics of disabilities and risk factors.
9. The characteristics and influence of disabilities and risk factors on early development, learning, care giving and relationships (5 sub-topics).
10. The significance and study of team models, collaboration and relationship-based practice.

(NOTE: Foundational Principles for all Early Start personnel and Specific Competencies for the EIS and EIA are found in the full ESPM)

Early Childhood Educator Competencies

Competency Areas

1. Child Development and Learning
2. Culture, Diversity, and Equity
3. Relationships, Interactions, and Guidance
4. Family and Community Engagement
5. Dual-Language Development
6. Observation, Screening, Assessment, and Documentation
7. Special Needs and Inclusion
8. Learning Environments and Curriculum
9. Health, Safety, and Nutrition
10. Leadership in Early Childhood Education
11. Professionalism
12. Administration and Supervision

(NOTE: Each Competency Area includes the following sections: (a) Key Concepts, (b) Dispositions, (c) Performance Areas, (d) Topics and (e) Competency Contexts, which group knowledge and skills for each topic into four inter-related spheres of functioning and responsibility.)

some or all the endorsement requirements. Programs are encouraged to use the Training Guidelines and Personnel Competencies to align their courses for trainees; however, at this stage of implementation, programs themselves are not endorsed, only individuals. Technical assistance is available for programs interested in aligning their coursework or training offerings with the California IFECMH Training Guidelines and Personnel Competencies. Programs are encouraged to create summaries that document the number of hours of training in each knowledge area and also hours of reflective practice facilitation as these materials streamline the review process for endorsement. Available programs will eventually be listed on the California IFECMH Training Guidelines and Personnel Competencies website. (See <www.ecmhtraining-ca.org>).

Many individuals who are interested in endorsement may not have access to a training program. These individuals can seek training through various kinds of university courses, conferences, First Five funded projects, professional groups, and community workshops. Developers of such trainings are being encouraged to align their community education with the California IFECMH knowledge areas identifying

content and hours addressed on certificates of attendance. Individuals seeking endorsement can use the California IFECMH Training Guidelines and Personnel Competencies as a guide to assess their own training needs and then can provide documentation of their work when they submit their materials for endorsement. Many professionals will have met some of the knowledge requirements through their prior education or trainings. Some may also have received reflective practice facilitation through work sites or professional training.

Support for The California IFECMH Training Guidelines and Personnel Competencies has come from a variety of funding sources, and the work has largely been a volunteer labor driven by deep commitment to the children and families of California. Marie Kanne Poulsen and Nancy Sweet have led the group consistently across the various efforts. The Infant Development Association of California, WestEd Center for Prevention and Early Intervention, and First Five California have been supportive of competency and training development efforts across the years. Other professional organizations are now interested in how these guidelines might support their members. ❖

COVER STORY from page 1

though the development of attachment theory was under way.

Yet for those of us beginning in these pioneering fields, the needed future direction was very clear. It was the need for knowledge, for the understanding of the interrelated factors of infant development and family support. We learned from experience that one of the most demanding roles is to help infants and families facing complex biological, psychological, cultural and economic challenges. This role requires not only specialized knowledge, but skill in adapting understanding to meet the individual and unique needs of each baby and family.

So, very early in California's history of services for young children and their families, the concept of competency was recognized as an essential requirement of effective early intervention and family support. IDA was organized, in part, to promote competency and the growth of a competent workforce. The continuing development of research-based knowledge and clinical application to work with infants and families led to the

development of not one, but three sets of competencies for work in the infant-family field: early intervention, early care and education, and infant/early childhood mental health. These are specialized and differentiated to address the wide range of service needs within the infancy field. Yet these three sets of competencies are vitally interrelated, united by the shared goal of supporting infant development and the strength of parent-infant and family relationships to nurture the development of infants. California can celebrate the accomplishment of these three sets of competencies, which took many years to complete. Now, we can say not only why it is important to support infants and families, but how to do it well.

Cindy Arstein-Kerslake is the Chair of IDA's Interdisciplinary Collaborations for Quality Committee. Nancy Sweet, former co-chair of IDA's Infant and Early Childhood Mental Health Committee, former facilitator of the IFECMH Training Guidelines Work Group and worked in the early intervention field for over 35 years. ❖

Early Childhood Educator Competencies

By Peter Mangione, WestEd Center for Child and Family Studies

Background:

Aiming to bring attention to the significant contributions of early childhood educators and to promote the continuing growth of the profession, the California Department of Education/Child Development Division (CDE/CDD) and First 5 California collaborated to develop California's Early Childhood Educator (ECE) Competencies. The Competencies stemmed from earlier work supported by First 5 California and the David and Lucile Packard Foundation. That study on early childhood educator competencies was conducted by the Center for the Study of Child Care Employment, Institute for Research on Labor and Employment, at the University of California, Berkeley. The resulting report, *Early Childhood Educator Competencies: A Literature Review of Current Best Practices, and a Public Input Process on Next Steps for California*, gives an overview of ECE competencies created by other states and summarizes input from the early care and education field in California (Center for the Study of Child Care Employment 2008, hereafter identified as the Research Report [2008]).

Structure and Content:

The California Early Childhood Educator (ECE) Competencies identify the knowledge, skills, and dispositions that early educators need to develop in order to provide high quality care and education to young children and their families. The ECE Competencies are organized into twelve overlapping areas: (1) Child Development and Learning; (2) Culture, Diversity, and Equity; (3) Relationships, Interactions, and Guidance; (4) Family and Community Engagement; (5) Dual-Language Development; (6) Observation, Screening, Assessment, and Documentation; (7) Special Needs and Inclusion; (8) Learning Environments and Curriculum; (9) Health, Safety, and Nutrition; (10) Leadership in Early Childhood Education; (11) Professionalism; and (12) Administration and Supervision. Most of these Competency Areas mirror ECE Competencies developed by other states. In addition, similar to a small number of states, California has developed competencies in Culture, Diversity, and Equity, Dual-Language Development, and Special Needs and Inclusion.

Each Competency Area includes the following sections: (a) *Key Concepts*, which reflect the theory, research, and best practice on which the content of a competency area is based; (b) *Dispositions*, which describe the attitudes, values, approaches to learning, and motivational factors that contribute to an individual's overall development in a competency area; (c) *Performance Areas*, which organize the knowledge and skills within a competency area into a small number of topics (sub-areas); (d) *Topics*, which identify specific

knowledge and skills within a performance area; and (e) *Competency Contexts*, which group knowledge and skills for each topic into the following four inter-related spheres of functioning and responsibility. The *Competency Contexts* are: **Supporting** Early Learning and Development; **Planning & Guiding** Early Learning and Development; **Creating & Maintaining** Program Policies and Practices; and **Advancing** the Early Childhood Profession. The four contexts show how the competencies start at the core of **Supporting** early learning and development experiences and widen to **Planning & Guiding** early learning and development experiences and then to **Creating & Maintaining** program policies and then to **Advancing** the early childhood profession.

Purpose:

The ECE Competencies serve several interrelated purposes. First, they provide coherent structure and content for efforts to foster the professional development of California's early childhood workforce. Second, they inform the course of study that early childhood educators follow as they pursue study in institutions of higher education. Third, they provide guidance in the definition of ECE credentials and certifications. And fourth, they give comprehensive descriptions of the knowledge, skills, and dispositions that early childhood educators need to support young children's learning and development across program types.

It is noteworthy that efforts to improve the quality of early care and education are hampered by the complexity and fragmented nature of California's current system (Karoly and others 2007). The ECE Competencies

(see **EDUCATOR COMPETENCIES** page 10

represent a step in creating a well-designed, coordinated approach to preparing early childhood educators. In a nutshell, they specify a common reference point for institutions, organizations, and networks involved in the preparation and professional development of California's early childhood educators.

The vision of care and education that the Competencies present will contribute to a comprehensive definition of relationship-based early care and education quality. Thus, the ECE Competencies are important to individuals and organizations whose work focuses on improving the quality of care and education for all young children and advancing the profession of early care and education, including higher education faculty, child care resource and referral agencies, state policy makers and others. The ECE Competencies apply directly to everyone responsible for the care and education of young children. Examples include teachers, family child care providers, assistant teachers, program directors, education coordinators, and curriculum specialists. In particular, individuals who are interested in working in early care and education, or who already work as early childhood educators, will look to the Competencies for ideas about the type of education and professional development to pursue.

Development:

The CDE/CDD and First 5 California selected WestEd to coordinate the development of the ECE Competencies. Work began with the selection of a panel of expert advisers who initiated and guided the two-year development process. The panel consisted of professionals from institutions of higher education, the California Commission on Teaching Credentialing, and Zero to Three. The panel also included leaders of the California Community Colleges' Early Childhood Curriculum Alignment Project (CAP) and California State University Baccalaureate Pathways in Early Care and Education (BPECE). Collectively, the panelists possessed expertise in essential content areas, particularly social-emotional development, language and literacy development, early childhood second-language acquisition, cultural diversity, education of young children with disabilities or other special needs, family engagement, leadership and professionalism, and developmentally appropriate practice for children from birth through age five.

One of the panel's first steps was to develop a preliminary outline of the Competencies document, which was then used to draft sample competencies.

The outline became a foundation for subsequent project work. The expert panel also formed subgroups, each with the responsibility of developing a specific competency area. Experts and practitioners in the field continually refined the Competencies by gathering feedback and input through stakeholder meetings, focus groups, and a public Web site.

Current Status and Uses:

The extensive review and revision process with the ECE Competencies is now complete. They are being finalized, copy edited, and prepared for publication by the CDE. To date, no groups or organizations have formally endorsed the Competencies, but several are starting to use them. The California Early Learning Quality Improvement System Committee reviewed the draft ECE Competencies as it completed its report to the field. The California Early Learning Advisory Council (ELAC) plans to include consideration of the competencies as it moves forward with its work. In addition, in collaboration with ELAC the CDE/CDD has funded the CAP to explore ways to relate the ECE Competencies to the early childhood courses that have been included in the alignment of community college and 4-year baccalaureate coursework in ECE. At present, there are no plans to develop an ECE Competency certification process.

Alignment with Related Work in Early Care and Education:

The ECE Competencies are designed to align with significant initiatives and resources in the early care and education field, such as the CDE's learning foundations, curriculum frameworks, and Desired Results resources: Desired Results Developmental Profile (DRDP) and Desired Results for Children and Families—Parent Survey. Additionally, the Competencies are aligned with the Early Childhood Environment Rating Scale—Revised (ECERS-R), the Infant/Toddler Environment Rating Scale—Revised (ITERS-R), and the Family Child Care Environment Rating Scale—Revised (FCCERS-R), each of which was informed by research and policy. Likewise, the Competencies reflect an effort to maintain consistency with the Curriculum Alignment Project (CAP), the Baccalaureate Pathways in Early Care and Education (BPECE), and the Classroom Assessment and Scoring System (CLASS).

(see **EDUCATOR COMPETENCIES** page 11)

Vision for the Future:

In every use of the ECE Competencies, there is an opportunity to promote the early care and education profession. Early childhood educators throughout California will add the Competencies to the increasing number of aligned resources that support their individual development and the development of the profession. With a unified vision emphasizing the importance of early childhood educators, the profession will move toward the goal of providing effective services and fostering the best outcomes for all young children and their families.

References

- Center for the Study of Child Care Employment. 2008. *Early Childhood Educator Competencies: A Literature Review of Current Best Practices, and a Public Input Process on Next Steps for California*. Berkeley, CA: Center for the Study of Child Care Employment, Institute for Research on Labor and Employment, University of California at Berkeley.
- Karoly, L. A., E. Reardon, and M. Cho. 2007. *Early Care and Education in the Golden State: Publicly Funded Programs Serving California's Preschool-age Children*. Rand Preschool Study 2. Santa Monica, CA: Rand Corporation. ❖

SAVE THE DATE!

IDA's Statewide Breakfast Meeting Event and Webinar

Get Involved! Continue to Learn About California's New Professional Competencies!

Join IDA's Statewide Breakfast Meeting Event and Webinar with the experts who can answer your questions about the ICC Recommended Early Start Personnel Manual, The Training Guidelines and Professional Competencies for Infant Family and Early Childhood Mental Health and the Early Childhood Educator Competencies.

May 6, 2011 from 8:00 am to 11:00 am

Four locations throughout California will be set up so you can share this experience with colleagues and participate in the webinar in a group setting.

Presentation Description

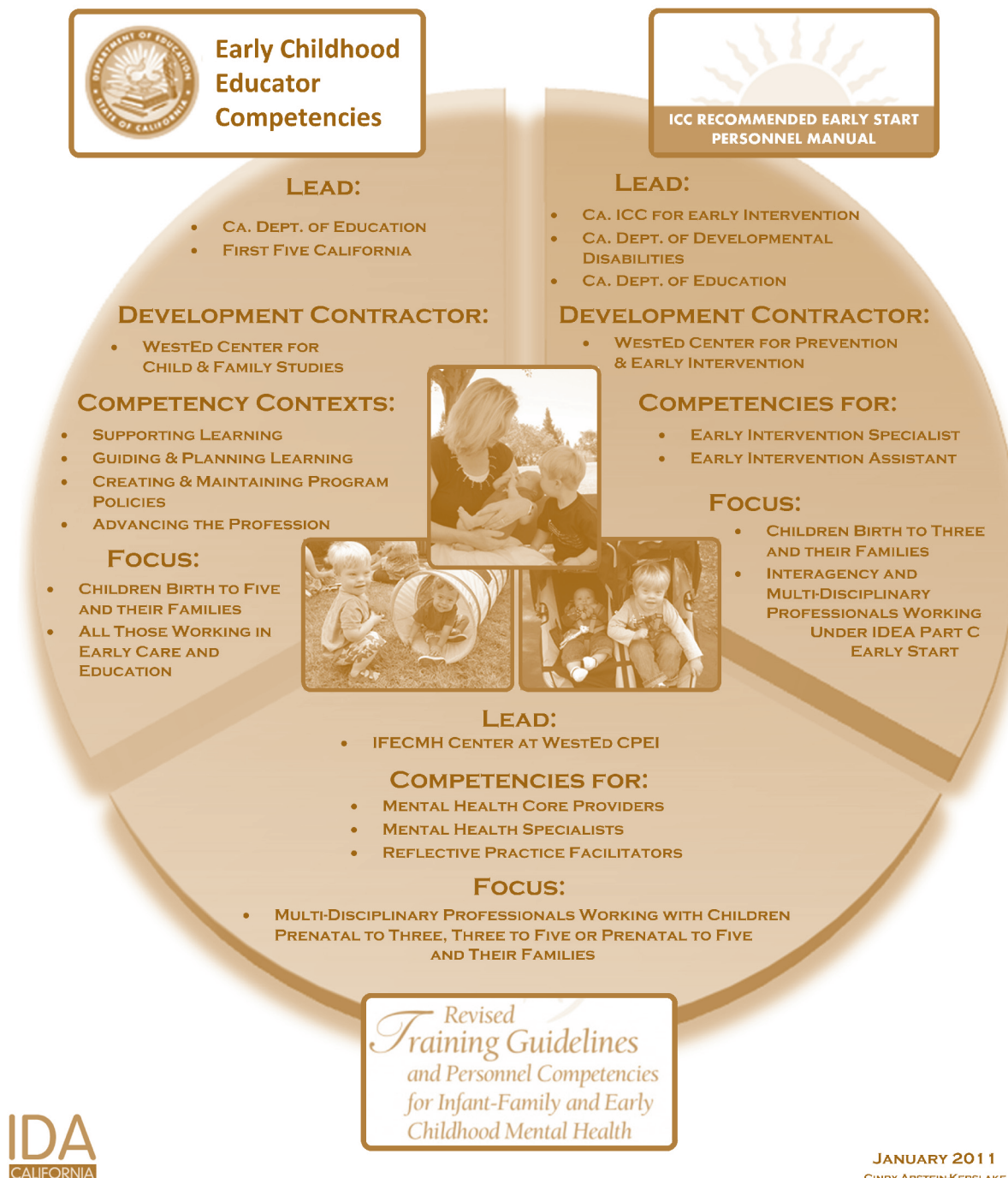
The 3 hour format begins with a networking breakfast from 8-8:30 am. Live webinar presentations by the authors of the IDA Winter Newsletter introducing each of the competency documents will be broadcast from Sacramento from 8:30 to 10:00 am followed by a facilitated discussion and a question and answer session during the last hour.

Registration & Fees (To Be Determined)

You can **RSVP** right now via email to mail@idaofcal.org if you would like to be on the invitation list to receive log-in information, location addresses, and where to send in your payment of the registration fee. **Send Email with this subject line: RSVP Competencies**

CALIFORNIA COMPETENCY DOCUMENTS

FOR INFANT & EARLY CHILDHOOD PROFESSIONALS



Graphic: Key

California Competency Documents for Infant and Early Childhood Professionals

The graphic is intended to provide comparable information on all three of the competency documents “at a glance.” Below is an explanation of each of the headings.

Lead: Identifies the organization(s) responsible for the development and implementation of the relevant document. The IFECMH Center at WestEd CPEI is also the lead for the Endorsement Process based on the document.

Development Contractor: Relevant lead state departments contracted with outside organizations to develop the ECE Competencies and the ICC ESPM. There is no development contractor for the Revised Training Guidelines and Personnel Competencies for IFECMH (2009); a volunteer group independent from the state developed this document.

Competency Contexts: Represent overlapping areas of responsibility for which competencies are articulated in the **ECE Competencies**.

Competencies For: Represents personnel categories addressed in the articulation of competencies in the ICC ESPM and IFECMH documents.

Focus: Identifies the unique field and age range that the document applies to.

Matrix of Early Childhood Competencies

	ICC Early Start Personnel Manual (ESPM)		Training Guidelines and Personnel Competencies for Infant-Family and Early Childhood Mental Health (IFECMH)		Early Childhood Educator (ECE) Competencies
Age Group	Birth to Three		Prenatal to Five		Birth to Five
Stated Purpose	The ICC ESPM supports and enhances training, hiring and supervision of highly qualified personnel providing early intervention services under IDEA Part C/ Early Start. The ICC ESPM describes the foundational principles, competencies and evidence based practices needed to provide high quality services for eligible infants and toddlers and their families. The ICC ESPM is a resource to the implementation of the Early Start Comprehensive System of Personnel Development.		The IFECMH competencies and endorsement process support the development of California's infant-family and early childhood mental health providers. The guidelines outline knowledge areas, work experience and reflective practice requirements to guide training program curriculum and individuals interested in obtaining endorsement in infant-family and early childhood mental health. Individuals work across disciplines and systems to provide services and supports to infants, young children and families.		The ECE competencies support the development of trained personnel in the field of early care and education. The competencies outline the knowledge, skills, and dispositions that early childhood educators need to support young children's learning and development in early childcare and education settings.
Where to find the document	www.dds.ca.gov/EarlyStart/home.cfm or www.wested.org/cs/cpei/print/docs/230		http://www.ecmhtraining-ca.org/		To be published and distributed by the CDE Press. Anticipated to be published in early 2011.
	Early Intervention Specialist (EIS)	Early Intervention Assistant (EIA)	Mental Health Specialist (MHS)	Mental Health Core Provider (MHCP)	Early Childhood Educator
Unique competency focus	The EIS is the core provider of early intervention services to each family and the hub of information regarding daily activities and strategies for IFSP implementation. The EIS adheres to foundational principles for all team members, demonstrates core knowledge and specific competencies for this role.	The EIA provides essential support and assists the EIS in implementation of the IFSP. The EIA adheres to foundational principles for all team members, demonstrates core knowledge and specific competencies for this role.	The MHS provides mental health treatment services in addition to promotion and preventative intervention. The MHS uses a relationship-based approach to provide prenatal, infant-family and early childhood mental health services.	The MHCP provides relationship-based mental health promotion and preventive interventions within their existing professional role. The MHCP's are from diverse professional backgrounds and include physical therapists, pediatricians, occupational therapists, speech language therapists, nurses, early interventionists, social workers, and special education.	The Early Childhood Educator provides relationship-based early care and education services to support the development and learning of infant-toddler and preschool children. The Early Childhood Educator works with children and families on a regular basis with a comprehensive focus.

Development:

Three groups are responsible for the development of this most recent manual over a three-year period from 2007 to 2010: the Qualified Personnel Committee (QPC) of the California Interagency Coordination Council on Early Intervention (ICC), the California Early Start Personnel Manual Workgroup, and the California Early Start Personnel Manual Stakeholder Group. Members of these groups together provided review and input from representatives of families, agencies, programs, professional organizations, faculty of colleges and universities, and the multiple disciplines serving infants and toddlers under Part C of IDEA known as Early Start in California.

Over the past decade it became clear that current research evidence and wisdom from the field needed to be brought together to describe and guide professional development in support of early intervention practice in California through the Early Start CSPD under IDEA. The request for the revision of the earlier Early Start Personnel Model came from the ICC Qualified Personnel Committee, and was sponsored by the Department of Developmental Services, with collaboration of the California Department of Education, Special Education Division, and WestEd Center for Prevention and Early Intervention. The current process was facilitated by the California ESPM Workgroup led by three co-chairs (principal writers). The work group met throughout the revision process. Statewide stakeholders (including IDA) also contributed to the document over two input periods. Through a contract with WestEd, the co-chairs met roughly bi-monthly to create content and incorporate input. Foundational principles, core knowledge and specific competencies for the EIS and EIA have been aligned with other state and national principles and standards identified through projects or agencies as important for work with infants and young children and their families. Examples include Council for Exceptional Children, Division of Early Childhood Personnel Standards, NAEYC Standards for Programs, the California Department of Education Infant/Toddler Learning and Development Foundations, Revised Training Guidelines and Personnel Competencies for Infant Family Early Childhood Mental Health, California Commission on Teacher Credentialing Standards for Education Specialist in Early Childhood Special Education, and the California Community College Early Intervention Assistant Chancellor's Certificate.

The Early Start Personnel Manual now defines and integrates the contributions of each member of the ES team and demonstrates how high quality services to infants, toddlers and their families depend on coordinated and collaborative interdisciplinary efforts of highly qualified personnel.

Current Status:

On November 7, 2010, the *Early Start Personnel Manual*, "A Guide for Planning and Implementing Professional Development in Support of Early Intervention Services", was recommended to the Lead Agency for Part C of IDEA by the California Interagency Coordinating Council on Early Intervention.

Implementation of these guidelines will support and enhance training, hiring and supervision of highly qualified early intervention personnel. Strategies and options for offering training under the Early Start Comprehensive System of Personnel Development are currently being identified and developed. ❖



Discussion: Shared Values and Unique Contributions to the Field

By Cindy Arstein-Kerslake, Maurine Ballard-Rosa, Wendy Parise, Kristine Pilkington, Mary Claire Heffron and Peter Mangione

It's readily apparent that the ICC ESPM, the IFECMH Training Guidelines and the ECE Competencies will significantly enhance professional development in the relevant fields by providing clear frameworks and detailed descriptions of competencies required for work with children and their families. Shared values are prominent as each document stresses the importance of relationships, reflective practice and the role of the family in the provision of services. Some of the differences among the documents are related to the different stages of implementation. The newly published ECE Competencies are yet to be implemented; while the competencies of the ICC ESPM have already been aligned with courses in institutions of higher education and the Training Guidelines for IFECMH are the foundation of a newly developed endorsement process. In an effort to highlight significant aspects of each document, the Infant Development Association has identified some of the commonalities and unique aspects of the three documents. The information provided below is based on review of the documents, the articles and additional information provided by the writers of the articles.

What do the three competency documents have in common?

1. Each provides a framework for professional development and a common language for quality services within a particular field of focus.
2. Each identifies and describes both knowledge areas and specific skills needed for competency in a particular field.
3. All value and promote relationships:

The ESPM endorses a relationship-based approach to engaging with children and families that maintains the caregiver-child relationship at the center of all interactions. Principle 2 is one of the six foundational principles of the ESPM and states, "Practices shall be relationship-based." This

principle highlights that all learning takes place in the context of relationships, including the parallel process of professional and therapeutic interactions. Supporting the child-caregiver relationship is seen as essential to promoting the development and well being of infants, toddlers and their families and more important than directly teaching specific skills to infants and toddlers.

"Shared values are prominent as each document stresses the importance of relationships, reflective practice and the role of the family in the provision of services."

The IFECMH Guidelines state, "Infant Family and Early Childhood Mental Health services emphasize the importance of parent-infant relationships on brain devel-

opment, attachment and the regulation of emotion and behavior." The first knowledge domain is "Parenting, Caregiving, Family Functioning and Parent-Child Relationships."

The ECE Competencies state that reciprocal relationships with families are key to building relationships with children. ECE professionals who are competent at developing reciprocal, responsive relationships strengthen children's emotional security. Effective relationships also support children's exploration and learning, their self regulation, and their capacity to form positive relationships with others. Competent ECE professionals nurture every relationship in an early care and education program. In effect, they establish positive reciprocal relationships with individual children, families, and colleagues.

All value and promote reflective practice and reflective supervision as components of professional development:

For the ESPM Maurine Ballard-Rosa, Wendy Parise and Kristine Pilkington note that "Reflective practice and reflective supervision are central to professional development of personnel providing high quality early intervention services in California. To achieve the most meaningful and applicable supervision, a relationship between supervisor and supervisee with ongoing collaboration and a reflective process is seen as key to engaging in high quality early intervention practice. They further describe the need

for both direct supervision and reflective supervision. Direct supervision can include accompanying direct service providers to their visits with children, families and other caregivers and observing the interactions and outcomes. Reflective supervision includes being able to jointly consider and discuss the meaning, the challenges and the opportunities of providing intervention strategies and supports for each family.”

According to Mary Claire Heffron, “There are three important things to consider regarding reflective facilitation, often referred to as reflective supervision, in the California **IFECMH** Training Guidelines and Personnel competencies:

1) First reflective facilitation is considered a basic training activity that helps individuals move ideas into practice and also provides a place where trainees learn to use themselves more effectively in their interventions exploring issues such as boundaries, perspectives of others, and the need for a reflective practice in all settings.

2) Reflective facilitation competencies and an endorsement process are available for Mental Health Core Providers and Infant Mental Health Specialists. The developers of the system believe that quality reflective facilitation for individuals and groups is a primary requirement for training, but also to maintain quality intervention services and support staff to continue their work and also to continue to hone their skills.

3) Currently there are not enough endorsed individuals to provide reflective facilitation to staff in the infant/toddler family and preschool field. However, there are plans to expand these numbers. Interested and qualified individuals are encouraged to seek endorsement or any additional training needed for endorsement. After 2014 those seeking endorsement will be required to use endorsed reflective facilitators.”

Peter Mangione describes how the **ECE Competencies** address reflective practice: “An emphasis on reflective practice weaves through the ECE Competencies, particularly in the Competency Areas of Administration and Supervision, Learning Environments and Curriculum, and Culture, Diversity, and Equity. The Competency Area of Administration and Supervision is organized around the concept of reflective supervision. In addition, reflection and interpretation are central in the Learning Environments and Curriculum Competency Area. Both individually and in dialogue with others, a competent ECE professional reflects on observations and documentation of child learning and behavior. Just as important, the practice of reflecting on one’s own values, beliefs, and world view helps ECE professionals

become aware of their perceptions and expectations of others. Thus, reflective practice is considered essential in the Culture, Diversity, and Equity Competency Area.”

All value and promote the role of the family in services for the child:

In the **ESPM** the first Foundational Principle is “Practices shall be family-centered.” This foundational principle emphasizes the central role of families and infant/parent relationships in the care, development and social –emotional well being of infants and toddlers. Early Intervention supports the capacities of family members to understand and meet the needs of their infant or toddler with developmental delays or disabilities. The **ESPM competencies** promote services that are embedded in each family’s existing priorities, practices and settings of child rearing. All services must enhance a child’s participation in everyday routines, relationships, activities, places and partnerships that structure family life.

IFECMH Training Guidelines state, “These guidelines are based on the guiding principle that training for all professionals working with young children and their families is most effective when designed to foster family-centered, culturally competent and developmentally appropriate services. Parent-professional partnerships are crucial to the effective delivery of all services and all early mental health services must be based on the goal of strengthening relationships.”

The **ECE Competencies** have “Family and Community Engagement,” as a competency area. Dispositions include: Values families as the first and primary teachers of their child(ren); Values family engagement in early childhood settings.

All address children with disabilities and other special needs:

The focus of the **ICC ESPM** is on creating guidelines for the preparation of highly qualified personnel to meet the needs of infants and toddlers eligible for Early Start services and their families. The **ESPM** articulates the core knowledge and specific competencies that individuals who work with infants and toddlers with disabilities and delays must demonstrate and provides expectations applicable to both direct service and support personnel who work in the California Early Start system.

The **IFECMH** Training Guidelines include knowledge domains on “Biological and Psychosocial Factors

Impacting Outcomes,” “Risk and Resiliency,” and “Observation, Screening and Assessment,” all of which address children with disabilities and other special needs.

Generally, the **ECE Competencies** underscore the importance of inclusive practice. In addition, the Competency Area of Special Needs and Inclusion comprehensively delineates the knowledge, skills, and dispositions that ECE professionals need to acquire to include all children in care and education settings. This Competency Area covers the Performance Areas of Philosophy, Policies, and Practices, Developmentally and Individually Appropriate Practice, Collaboration with Families and Specialist Service Providers, and Environmental Access and Adaptive Equipment.

What are some unique aspects of each document?

Each has a unique field of focus. The **IFECMH Training Guidelines** focus on the unique competencies needed to address the mental health needs of children prenatal to five and their families. The **ICC ESPM** addresses professionals working with infants and toddlers (birth- three) and their families under Part C of IDEA in California Early Start (NOTE: competencies for professionals serving the preschool age population under IDEA Part B are authorized through the California Commission on Teacher Credentialing (CCTC) Early Childhood Special Education credential). The **ECE Competencies** apply to anyone working in the field of early care and education (children ages birth to five and their families.)

The ESPM Competencies are already embedded in higher education courses. The **ESPM competencies** for the EIS are aligned with the Education Specialist in Early Childhood Special Education teaching credential (which is required to provide early intervention services in local education agencies), and the California University Early Intervention Certificate. Competencies for the EIA will continue to be aligned with Community Colleges that have infused the EIA Competencies under the Community College Personnel Preparation Project, a Part C/Early Start CSPD activity, and offer Early Intervention Assistant Certificates at the AA level.

The ESPM Competencies for the Early Intervention Specialist are in alignment with the IFECMH Training Guidelines competencies for the “Mental Health Core Provider.” Maurine Ballard-Rosa, CSU Sacramento and CAPECSE, and Marie Kanne Poulsen, USC University Center for Excellence in Disabilities, were

members of both work groups responsible for the development of the two competency documents. Virginia Reynolds, WestEd CPEI, was also a member of both workgroups involved in the development of both documents. This overlap facilitated understanding of and communication about the two documents.

The IFECMH Training Guidelines is the foundation of an Endorsement Process. Individuals must complete an online application which requires documentation of knowledge, skills and experience in line with the requirements for Endorsement.

The **IFECMH Training Guidelines** document was developed with support from a series of funding sources since early 1990s, including federal grants, DDS, and most currently by First 5/ CCFC. These efforts were *always carried out in collaboration with but independent from any single California state agency.* A volunteer workgroup, including leaders of training programs in California in infant and early mental health, developed the **IFECMH Training Guidelines** and The Center for Infant Family and Early Childhood Center at WestEd CPEI is leading the Endorsement process.

The ECE Competencies specifically address administration/supervision and leadership. The **ECE Competencies** go beyond articulation of competencies for those who provide direct services for children and families and supervision of those services, by also articulating competencies for program administration and leadership in the field. The competency area on administration and supervision describes the knowledge, skills, and dispositions that early childhood educators need to have in the areas of program planning, development, and operations, human resources, and organizational systems, policies, and procedures. The leadership in early childhood education competency area identifies knowledge, skills, and dispositions that enable early educators to build an understanding of how (a) to work effectively with complex policies and services that comprise and shape the early care and education system, (b) to support adult and community development, and (c) to engage in advocacy and policy formation that ensure the success of all young children and families.

The ECE Competencies document is the first of its kind in California, unlike the other two competency documents that represent the latest evolutions built upon previously published documents. Only recently published, the **ECE Competencies** will be used to inform coursework in early care and education fields at the community college and state university level. ❖

How are the Competencies Relevant to Individuals at Different Places in Their Careers?

By Cindy Arstein-Kerslake, Mary Claire Heffron, Maurine Ballard-Rosa, Wendy Parise and Kristine Pilkington

In order to more fully understand how each of the sets of competences might apply to individuals working with very young children and their families the Infant Development Association asked the authors of the articles to create scenarios. Each scenario is intended to give an example of a person in an employment setting with a specific goal and need for training. Options for training in line with the goal or need are presented. The authors of the articles on the IFECMH Guidelines and the ESPM were able to provide some examples as versions of these two documents have been used in the field for some time now. However, it should be noted that there are clarifications of the endorsements under the IFECMH Guidelines that are currently under review as the endorsement pilot has only recently been completed. The ECE Competencies will be introduced to the field for the first time in January of 2011. Implementation of the ECE Competencies is in the formative stage; therefore, it is premature to develop scenarios of individuals who may use the ECE Competencies.

Scenarios for Use of the IFECMH Training Guidelines

The IFECMH Training Guidelines is the only set of competencies among these three documents that includes an endorsement process. The categories of endorsement include Mental Health Core Provider, Mental Health Specialist and Reflective Practice Facilitator. The Mental Health Specialist endorsement requires an M.A. or higher and a license or credential in a mental health related discipline. These are professionals whose preparation and state licensure allows them to provide mental health treatment under their scope of practice. The minimum educational requirement for the Mental Health Core Provider endorsement is a B.A. in a relevant field although exceptions may be considered during the next 5 years for those with extensive experience and training. Individuals seeking endorsement may attend specialized programs that provide some or all of the requirements for knowledge and reflective practice facilitation, or individuals may put together their own mixture of relevant university coursework, community workshops, in-service trainings, or continuing education units through conference trainings and other types of organized trainings. Below are some examples of individuals with varying backgrounds and education levels who sought out additional training toward IFECMH Endorsement and some potential training options they chose. It should be noted that decisions regarding need for additional coursework and/or training to work with this specialized population, prenatal to five and their family, requires consideration of current preparation and licensure, certification or credentialing as these are issues of qualifications and scope of practice.

Scenarios of Individuals Who Might Benefit from Additional Training Based on the IFECMH Training Guidelines and Competencies	Potential Training Options Toward Endorsement
Ellen is a home visitor in an Early Head Start Program. She has a degree in social sciences and a few years of experience working with young children in a child care setting. She has some training at her Early Head Start Program, but realized that she needed a more solid background to do her job well	Ellen found a training program based on the IFECMH Training Guidelines and enrolled to gain knowledge and skills toward becoming an endorsed “Mental Health Core Provider.” She used the reflective facilitation sessions to build the skills she needs in this job.
Wanda, a social worker in the child welfare system, had clinical skills working with older children, but felt uncertain about how to address the varied needs of the infants and young children on her caseload.	Wanda enrolled in an infant family early childhood mental health certificate program to gain the added knowledge and skills needed to serve infants and young children. Already holding a Master’s and having a license in clinical social work, she’s moving toward endorsement as a “Mental Health Specialist.”

Scenarios of Individuals Who Might Benefit from Additional Training Based on the IFECMH Training Guidelines and Competencies <i>continued</i>	Potential Training Options Toward Endorsement <i>continued</i>
<p>Brad, a graduate in child development got a job in a pediatric office providing screening to young children and families and operating as a kind of cross system navigator. Brad felt very well grounded in his developmental knowledge, but needed to understand how to interact with families in an effective way that helped them think about needed services, but also about the importance of the parent child relationship.</p>	<p>Brad talked about his needs with a local children's collaborative. With the help of an infant family and early childhood mental health consultant and funding from the local First Five, Regional Center and County Mental Health, the collaborative created an infant and early childhood mental health training program based on the IFECMH Training Guidelines that could serve the local community. Brad is enrolled in the program and is earning hours toward endorsement as a "Mental Health Core Provider".</p>
<p>Karla, a Psychiatric Nurse with a Bachelor's Degree in Nursing and a Master's Degree in psychiatric nursing, had a strong background in early intervention, but realized the limitations in her knowledge and skills as she settled into her job as a supervisor for a perinatal home visitor program in a public health department.</p>	<p>Karla found a training program in infant and early mental health and is gaining hours in reflective facilitation and moving toward endorsement as a "Mental Health Specialist."</p>
<p>Leila was a child development director with a PhD in child development and a child development center permit. Her center had many children with developmental and behavioral difficulties and Leila found that she wanted more training to help her understand and support their needs. Reviewing the knowledge areas helped her identify information and approaches missing from her skill set that would help her work effectively with children, families, and colleagues such as mental health consultants and early interventionists</p>	<p>Leila found training and reflective facilitation through her local IDA affiliate and moved towards full endorsement as a "Mental Health Core Provider".</p>

Scenarios for Use of the ICC Recommended Early Start Personnel Manual

Pathways to Becoming an EIS or an EIA: Under the federal IDEA, Part C Early Intervention Program, each state is required to ensure appropriately prepared and trained personnel are available to provide appropriate early intervention services as defined in the federal and state statute and regulations. The ICC ESPM identifies multiple options for personnel to attain the competencies and designation of Early Intervention Specialist or Early Intervention Assistant. At the pre-service level, the qualified EIS has a BA/BS and holds the ECSE credential or added authorization in ECSE or California University Certificate in Early Intervention. There is an EIS intern option for individuals who do not meet the requirements for immediate designation as an EIS. The qualified EIA has an AA degree and a California Community College EIA Certificate or comparable degree and coursework to meet the EIA competencies. For both the EIS and EIA there is a one time granted authorization to support uninterrupted service delivery by personnel who have successfully served for three years prior to statewide implementation of the ESPM who might not meet the other requirements. Details are spelled out in the ESPM. In addition to pre-service preparation, the ESPM provides options for ongoing training and education to enhance practice through in-service and technical assistance aligned with the CA Early Start CSPD. See below for examples of personnel development scenarios for individuals seeking to become an EIA or EIS through the CA Early Start system.

Early Intervention Specialist Scenarios

Situation	According to the ICC ESPM
<p>Jeannette has been working as a Master Teacher in a community preschool program and would like to work as an EIS in her local public school (LEA). What preparation or credentials will she need to obtain in order to work as an EIS in CA?</p>	<p>Jeannette would be required to obtain an Early Childhood Special Education (ECSE) credential granted by the California Commission on Teacher Credentialing (CCTC) in order to work as an EIS in an LEA.</p>
<p>Jose has a BA in Child Development and has worked in Head Start as a lead teacher for 4 years and he is interested in working as an EIS. What would he have to do in order to gain the competencies to become a qualified EIS in an LEA? in a private, vendored program?</p>	<p>If Jose wants to work for a public school (LEA), he would need to obtain an Early Childhood Special Education credential. If he plans to work in a private, vendored early intervention program, he can attend one of the CA universities that offer the CA University Certificate in Early Intervention. This program will enable him to meet the early intervention competencies through coursework and supervised fieldwork in early intervention.</p>
<p>Cameron has a BS degree in accounting and has been working for a small business for the last 7 years. He finds the field of early intervention fascinating and would like to change careers. He is not sure whether he would like to work in a vendored program or an LEA. What does he need to do in order to become an EIS?</p>	<p>Although Cameron has a BS in accounting, this does not qualify him to be an EIS. He will need to attend a CA university and obtain his Early Childhood Special Education Credential. This would enable him to work in both public and private programs as an EIS.</p>
<p>Pat has been a special education teacher working in a self contained classroom at a local elementary school of the past 5 years. He currently possesses a CA Education Specialist Credential, mild/moderate disabilities. Can he switch jobs and work for an LEA early intervention program as an EIS?</p>	<p>If Pat wants to work in a public school as an EIS, he will need to obtain the ECSE added authorization through a CTC approved program. He can begin work as an EIS intern while obtaining the ECSE added authorization.</p>
<p>Shohreh is an occupational therapist who has been working in a hospital setting for over 5 years but has not had infants or toddlers on her caseload during that time. She would like to work as an EIS. Since she is a licensed occupational therapist, according to the ESPM, can she obtain a job to serve as an EIS? If not, what would she need?</p>	<p>Shohreh can serve on an early intervention team as a specialized consultant in OT, but is not yet a fully qualified EIS. The multiple pathways design of the ESPM which would allow her to work as an EIS intern is under development. This means she may be employed in an early intervention program for up to two years in this status. After the two years Shohreh would be expected to demonstrate the competencies of the EIS.</p>
<p>Roxanne does not possess any college degrees but has worked extensively with infants and toddlers eligible for early intervention services under Early Start and their families. She has served as the EIS on the interdisciplinary team in a vendored program for over 10 years. Can she continue in this capacity?</p>	<p>Roxanne can continue working in the vendored program. Through the ESPM multiple pathways design, Roxanne is eligible for the one-time EIS granted authorization (currently under development) if she has been working for at least three years in that position. The granted authorization option is not applicable in the public schools (LEAs) which requires the ECSE Credential..</p>
<p>Dalia possesses a multiple subjects teaching credential and has taught 2nd grade for over 15 years. Her daughter Dusty, who has Down Syndrome, is now 10 years old. Dalia values the impact early intervention had on her family and child's life when Dusty was an infant. She would love to switch careers and seek employment in a vendored early intervention program. What would she need to do in order to become a qualified EIS ?</p>	<p>In order to obtain the competencies as an EIS Dalia should enroll in university that offers a CA university certificate in early intervention. If she decides to take a job with an early intervention agency while she is completing coursework, she can work as an EIS intern.</p>

Early Intervention Assistant Scenarios

Situation	According to the ICC ESPM
<p>Sarah would like to work as an EIA. She has taken a few general education classes in the past 5 years but has not had any particular focus. What does she have to do in order to gain the competencies as an EIA?</p>	<p>Sarah needs to check out http://www.wested.org/cpei/ccppp-state-cert-status.pdf which contains the list of CA community college that currently offer early intervention assistant certificates. There she can complete the coursework required to earn an AA in early intervention and obtain her early intervention assistant certificate.</p>
<p>Jim has been working as an associate teacher with a CA Child Development permit and wants gain the competencies to work as an EIA. According to the ESPM, what would he have to do to obtain these competencies?</p>	<p>Jim should attend a community college that offers coursework that would enable him to meet the EIA competencies.</p>
<p>Shanira has an AA in English and wants to work as an EIA. According to the ESPM, what would she have to do in order to qualify to work as an EIA?</p>	<p>The ESPM provides guidance on competencies needed for an EIA. Shanira can attend a community college that offers an early intervention assistant certificate and take the courses described in this certificate (minus the AA general education requirements). This is generally 27 units above the AA assuming she has never taken any child development courses.</p>
<p>Isabella has been working as an EIA for the last four years at the Early Beginnings Agency, an early intervention program vendored through the local regional center as an Early Start provider. She does not have an AA degree but her EIS supervisor says she is an invaluable member of the team and has been doing a great job. She is a single mother of 2 young children and going to school at this time is out of the question. Can she keep her job working as an EIA for the Early Beginnings Agency?</p>	<p>The vendored program can keep Isabella in her position. When fully implemented, the ESPM will include the process for Isabella to apply for the one-time EIA granted authorization if she has been working for at least three years in that position.</p>
<p>Melanie has a BA in social work from a local university. Since graduation she has discovered her true passion: to work with young children with developmental delays or disabilities and their families. She lacks experience with infants/toddlers but would love to one day get a job as an early intervention specialist. She thinks it would be great if she could work as an EIA to gain experience. Can she work as an early intervention assistant without any further education?</p>	<p>The employer sets criteria for hiring. However, in order for Melanie to develop the competencies needed to work with infants and toddlers as an EIA, she could attend a local community college that offers the EIA certificate.</p>

Use of the Early Childhood Educator Competencies

As mentioned above, the ECE Competencies have only recently been published. It's too early to develop scenarios of individual needs and options for training. In general, as explained in the article, the ECE Competencies apply directly to everyone responsible for the care and education of young children and to those whose work pertains to improving the quality of care and education for all young children and advancing the profession of early care and education. Examples include teachers, family child care providers, assistant teachers, program

directors, education coordinators, curriculum specialists, higher education faculty, child care resource and referral agencies, state policy makers and others. In particular, individuals who are interested in working in early care and education, or who already work as early childhood educators, will look to the ECE Competencies for ideas about the type of education and professional development to pursue.

The Child Development Division (CDD) of the California Department of Education (CDE) is in the process of developing a plan for infusing the ECE Competencies into Community College and the California State University coursework. The ECE Competencies will be integrated into all of CDD's quality improvement activities. ❖



UPCOMING EVENTS – SAVE THE DATES!

CHECK THE WEBSITE FREQUENTLY (WWW.IDAOFCA.ORG), AS THIS LIST IS JUST A FEW EVENTS PLANNED AT THE TIME OF PUBLISHING. MUCH MORE IS IN THE WORKS!

February 25-26, 2011

Topic: Play to Talk with James MacDonald

Cosponsored by IDA with Step-By-Step Edu Play Programs and many others

Location: Westside Regional Center, Culver City, CA

Registration: Details and links are available on the IDA website www.idaofcal.org

March 8, 2011

Topic: Identifying Motor Delays & Screening for Motor Disorders

Presented by: Sheryl Low, DPT

Location: Braille Institute, Los Angeles, CA - 9:00 AM to 12:00 PM

Registration: Look for details on the IDA website www.idaofcal.org in February

May 6, 2011

Event: IDA's Statewide Breakfast Meeting Event and Webinar

Topic: Get Involved! Continue to Learn About California's New Professional Competencies!

Locations: See details on page 11 of this newsletter

Registration: See details on page 11 of this newsletter

June 3, 2011

Topic: How Does It Feel? A First Hand Experience of a Sensory Processing Disorder

Presented by: Nancy Kislak, MA, OTR and Joni Schumacher, MS, CCC

Location: Braille Institute, Los Angeles, CA

Two Sessions: 9:00 AM to 12:00 PM and 1:30 PM to 4:30 PM

Registration: Look for details on the IDA website www.idaofcal.org by mid-February

IDA's New Conference Format!

In response to the changes that currently impact our field, IDA has decided to offer regional conferences in 2011 and 2012. In the past, IDA provided a statewide conference once every two years that lasted three days, with the expectation that people would all travel to the one location.

With tighter budgets, lack of release time, and input from IDA members, the conferences will now be 1-1/2 days in length with one in Northern CA, September 23-24, 2011 then the other in Southern CA, April 20-21, 2012.

Space will be limited to the first 200 registered participants! Look for registration details, topics/speakers, and hotel reservation information this April 2011 for Northern, CA conference. Details will be ready late Fall 2011 for the Southern, CA conference.

Save The Dates for IDA Conferences

Sacramento, CA – Hilton Sacramento Arden West Hotel

September 23-24, 2011

Riverside, CA – Mission Inn

April 20-21, 2012



Infant Development Association of California
P.O. Box 189550
Sacramento, CA 95818-9550

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<input type="checkbox"/> INDIVIDUAL	\$60.00	\$100.00
<input type="checkbox"/> PARENT (parent of a child with special needs)	\$25.00	\$35.00
<input type="checkbox"/> STUDENT (one year option only)	\$25.00	n/a
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The membership begins the date the payment of the membership fee is received. Membership includes three newsletters annually, local chapter meetings, annual statewide membership meeting, networking, and advocacy opportunities. As a member, you are entitled to discounted registration fees to attend all IDA state trainings and conferences. DISCOUNTS average \$75 less than non-members for each training/conference. Agency members can send up to 3 staff members to trainings/conference and SAVE BIG with discounts equal to \$225 to \$450 on average. Membership more than pays for itself after registering for just one IDA state training or conference!

By submitting this application, I give my permission to have IDA send correspondence and announcements to me using my fax number:
YES ☐ NO ☐ , email address: YES ☐ NO ☐ IDA may share my mailing address with related organizations: YES ☐ NO ☐

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Preferred Chapter Association ☐ Northern Chapter
For details about chapter regions, go to ☐ River Valley Chapter (Sierra Mountains/Sacramento & Central Valley Regions)
our web site at www.idaofcal.org and ☐ San Diego/Imperial County Chapter
click on Chapters. ☐ Southern Chapter

Signature _____

All checks should be payable to the Infant Development Association of California – PO Box 189550, Sacramento, CA 95818-9550
IDA is a nonprofit organization. Donations are tax deductible to the extent allowed by law.