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ABSTRACT

This paper lists practices recommended by the Council for Exceptional Children's Division for Early Childhood concerning personnel competence in early intervention and early childhood special education programs for infants and young children with special needs and their families. An introductory section discusses components of preservice personnel preparation, including associate, undergraduate, and graduate degree programs. Personnel preparation efforts in early intervention are seen as responding to the immediate need for large numbers of qualified personnel and the evolving philosophy of integration. Inservice personnel preparation is then discussed, focusing on the characteristics of adult learners and the planning, delivery, and evaluation of inservice sessions. The paper then lists 35 practices recommended for preservice personnel development and 18 practices recommended for inservice personnel development, focusing on process rather than content. (JDD)

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Personnel Competence

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Essential to the provision of quality services for young children with special needs and their families is the availability of qualified personnel. Prior to the passage of P.L. 99-457, shortages in early childhood special education personnel were reported. With the full implementation of P.L. 99-457, the need for personnel will continue to increase dramatically. This need for well-prepared personnel includes both entry-level personnel as well as professionals who are already in the field but who lack the appropriate knowledge and skills to implement services for infants, toddlers, and preschoolers with disabilities and their families as required by P.L. 99-457 and recommended practices in the field.

The Division for Early Childhood of the Council for Exceptional Children (DEC) has taken a leadership role in identifying standards for the preparation of early childhood special educators. In 1989, McCollum and other members of the DEC Personnel Committee prepared a DEC White Paper outlining recommendations for certification of early childhood special educators (McCollum, McLean, McCartan, & Kaiser, 1989). These recommendations, which were developed as guidelines for states as they develop personnel standards and for universities/colleges as they develop training programs, suggested a two-level certification process with a generalist Beginning Professional Certificate (Birth-5) and a specialist Continuing Professional Certificate (Birth-5). A state system that assures continued

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professional development was also advocated. A primary focus of these recommendations was the suggested content of personnel preparation programs.

Although the recommended practices included in this document address both content and process issues, the primary focus is on process. The content identified by McCollum and her colleagues (1989) is strongly supported; content is only addressed in these indicators in a general manner. The remainder of this section highlights the preservice and inservice recommended practice indicators.

Preservice Personnel Preparation

Preservice education programs which are designed to prepare personnel to serve infants, toddlers, and preschoolers with disabilities and their families have most often been provided at the graduate level. As more undergraduate and associate degree programs are developed, the need for identifying appropriate entry-level curriculum content and performance competencies, and the strategies for planning and delivering that content will intensify. Many graduate programs are tailored to prepare specialists to assume lead teaching, supervising, or administrative positions. Undergraduate and associate degree programs are needed, therefore, to train large numbers of early intervention professionals and paraprofessionals to work directly with children and families.

Many states are moving toward preservice personnel development in early intervention as a two-tiered effort. These two-year and four-year degrees will be more economically and philosophically attractive to policymakers and deans of colleges if they integrate existing curricula in early childhood education and early childhood special education. The merging of curricula will necessitate a merging of personnel competencies,

standards and training efforts.

The merging of professional standards across early childhood education and early childhood special education is consistent with the philosophy of inclusion of children with disabilities in all facets of education and society. The research on integrated preschool programs supports the belief that benefits accrue for both typically and atypically developing children in those programs. The entry-level professional should be educated and qualified to meet the needs of infants, toddlers, and preschoolers who have a variety of abilities and needs.

At the graduate level, higher education programs can offer curriculum content and experiences which provide an opportunity for specialization. Graduate level programs may offer a focus in infancy, family study, consultation and integration, and other leadership roles. Prerequisites to these programs should include some level of experience and formal training in working with children under the age of five who have varying abilities and their families.

Personnel preparation efforts in early intervention are currently responding to two professional issues: the immediate need for large numbers of qualified personnel, and the evolving philosophy of integration. The Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC) have created both formal and informal plans for the integration of professional standards. A new age for personnel preparation which will contribute to the end of segregated, categorical programs for young children, their families, and their professional support teams has arrived.

Inservice Personnel Preparation

Inservice is defined as "any planned program of learning opportunities afforded staff members of schools, colleges, or other . . . agencies for purposes of improving the performance of the individual in already assigned positions" (Harris, 1980, p. 21). Both the inservice literature and the literature specific to characteristics of adult learners served as basis for identifying recommended practice in this area. The following discussion provides an overview of the indicators of recommended practice for inservice personnel preparation.

Content Indicators

Adult learners are characterized as: (a) self-directed, (b) entering any educational activity with a wealth of previous personal and professional experiences, and (c) motivated to learn when they experience a need to know or do something to perform more effectively. Therefore, the content of inservice should be derived from assessed needs of the participants with the needs assessment addressing competencies that the learner must demonstrate in his/her employment setting. Needs-based inservice lends itself to activities that acknowledge the experiences of participants and build upon those experiences that are relevant to the learner's situation and that emphasize the learner's own goals as the primary incentive for participation.

Process Indicators

Planning for Inservice

Section 303.360 of P.L. 99-457 requires that inservice be provided on an interdisciplinary basis when appropriate and to a variety of personnel. This provision has been interpreted as meaning that inservice planning should be a team effort involving family

members as consumers, professionals from a variety of disciplines, and paraprofessionals. This contention is supported by the adult learning literature which reports that decision-making specific to inservice should be a collaborative effort between the recipients and the provider.

Delivery of Inservice

Section 303.360 of P.L. 99-457 has also been interpreted as meaning that inservice should be delivered by an interdisciplinary team to an interdisciplinary audience to ensure that individuals within programs develop a shared knowledge, attitude, and skill base to implement changes in service delivery. Family members are integral participants on this inservice team.

Successful implementation of inservice is, in part, dependent on the consideration of certain logistical and support factors. First, inservice should be financially and geographically accessible to participants with local sites most desirable. Second, inservice should be scheduled as to avoid interfering with the participants' job requirements. Third, inservice should have explicit administrative support. This support may be evidenced by facilitating staff participation in inservice (e.g., release time), providing incentives for completing activities (e.g., salary increases), and allowing for change in direct service practices. And finally, inservice is most successful if co-workers support the inservice by participating as team members in the actual inservice activities, or by participating in worksite activities such as team meetings to discuss the application of skills, or working in teams/pairs to provide each other with immediate feedback.

Another aspect of inservice delivery that affects its quality is the facilitator. Inservice

facilitators must be competent in the inservice process by being able to: (1) plan and organize inservice, (2) work with adults, (3) match content with appropriate training strategies, and (4) evaluate training effectiveness. Inservice facilitators must also establish credibility with the participants by being knowledgeable in the inservice content and being able to incorporate the participants' experiences and needs into the activities. Although the role of inservice facilitators may vary depending on the purpose of the inservice (e.g., informer, demonstrator), above all, the facilitator must be enthusiastic.

The traditional "one-shot" model for inservice delivery is not recommended. Inservice has more long-lasting benefits if it is conducted as a sequential, ongoing process. Effective inservice includes the following components: (a) presentation of the content (e.g., theory, knowledge-base, description of a skill or strategy), (b) modeling or demonstration of skills or models of teaching/practice, (c) practice in simulated and actual instructional settings, (d) structured and open-ended feedback, and (e) ongoing follow-up in the actual instructional setting. This type of model lends itself to a variety of activities which are selected based on the component being implemented. It also facilitates the active involvement of participants in a problem-centered rather than subject-centered approach which is consistent with the adult learning literature.

Evaluation of Inservice

To ensure that inservice is effective, evaluation must be conducted. Evaluation should address both long-term and short-term effects. A variety of evaluation strategies (e.g., satisfaction questionnaires, observation) should be utilized and be selected based on the goals and objectives of the inservice.

References

- Harris, B.M. (1980). Improving staff performance through inservice education. Boston: Allyn and Bacon, Inc.
- McCollum, J., McLean, M., McCartan, K., & Kaiser, C. (1989). Recommendations for certification of early childhood special educators. Journal of Early Intervention, 13, 195-211.

DEC Recommended Practices Personnel Competence

Personnel development includes inservice and preservice efforts to recruit, prepare, and retain degree and non-degree personnel from all early intervention (B-5) and related disciplines.

Preservice Best Practice Indicators

- PC1. Family members are involved in planning, implementing, and evaluating preservice curriculum.
- PC2. Content provides a strong foundation in typical and atypical child development.
- PC3. Content includes study of cultural diversity.
- PC4. Experiences ensure participation with families that develops an awareness of families' daily lives.
- PC5. Content and process reflect a "theory to practice" orientation.
- PC6. Content emphasizes families as systems.
- PC7. Students develop and implement intervention plans based on knowledge of developmental/learning theories.
- PC8. Students receive feedback from professors, supervisors, and parents on a regular basis through both formal and informal means.
- PC9. Educational content and activities promote a commitment to continuing professional development.
- PC10. Content reflects a life span perspective that promotes smooth transitions for children and families.
- PC11. The program prepares students to assume a variety of roles with families and young children (e.g., service coordinator, direct service provider, consultant, program manager).
- PC12. Instructors model the values and behavior expected of professionals in the field.
- PC13. Instructors have both experience and professional training related to children birth through five with special needs and their families.
- PC14. Content and process in graduate training develops skills in advocacy, policy development and analysis.
- PC15. Content and process in graduate training includes work in program development and administration.
- PC16. Content and process at the graduate level focuses on a specialization area in early intervention (B-5).

- PC17. Instructors match field experiences to students' prior experiences, interests, and needs.
- PC18. Field experiences provide opportunities with infants, toddlers, preschoolers, with and without disabilities, and their families.
- PC19. Field experiences include experience as an interagency and intragency team member.
- PC20. Field experiences provide opportunities to demonstrate performance competencies identified by the discipline's professional association.
- PC21. Qualified university personnel supervise all field experiences.
- PC22. Field experiences include a variety of settings that represent potential employment models.
- PC23. Field experiences provide opportunities to work with children both with and without disabilities who represent diverse cultural and ethnic backgrounds.
- PC24. Field experience sites and personnel reflect recommended practice competence.
- PC25. Field experiences include substantial work with families, which is closely supervised.
- PC26. Students learn and practice assessment that is culturally unbiased and includes diagnosis for placement, assessment for developing IEP/IFSP goals and for planning individualized curriculum, performance monitoring and evaluation of program effectiveness.
- PC27. Students learn and practice a variety of interventions with children ages birth through five with disabilities and their families, including a) direct instructional techniques, b) activity-based techniques, c) developmentally appropriate practices, d) incidental learning strategies, and e) strategies for promoting effective adult-child and child-child interactions.
- PC28. Students learn and practice strategies that foster children's engagement with appropriate tasks and activities, and strategies to maintain children's engagement.
- PC29. Students learn to access, read and understand current literature and research related to young children with disabilities and their families.
- PC30. The preparation program includes a comprehensive examination, written thesis and/or field study as culminating experiences, carried out under the supervision of program faculty.
- PC31. The preparation program's full-time faculty, part-time instructors and field supervisors represent the diverse ethnic and cultural groups served in programs for young children with disabilities and their families.
- PC32. The preparation program's faculty and staff make efforts to recruit and retain members of ethnic and cultural minorities as students.
- PC33. Students become aware of, discuss, and apply their profession's code of ethics.

PC34. Students learn and practice strategies to incorporate technology to support children's learning.

PC35. Preparation programs base coursework on performance competencies as identified by the discipline's professional associations.

Inservice Indicators

PC36. Personnel development addresses competencies that individuals must demonstrate in their job.

PC37. Families participate in delivery of inservice training.

PC38. Program staff base inservice training on assessed needs of participants.

PC39. Inservice is developed with input from persons representing multiple disciplines.

PC40. Team members representing multiple disciplines deliver inservice training.

PC41. Inservice training adheres to the following 4-step model: (a) presentation (b) opportunities to observe, (c) opportunities to practice, and (d) feedback about practice.

PC42. Persons delivering inservice are qualified, enthusiastic, knowledgeable, well prepared and empathetic.

PC43. Administrators facilitate staff participation in inservice training (e.g., reimbursement of expenses, release time), support/accommodate change in practice based on training, and provide incentives for participation (e.g., salary, career ladder).

PC44. Colleagues at the work site support inservice training (i.e., team participation, onsite support for implementation).

PC45. Inservice training includes follow-up.

PC46. Inservice is accessible and planned according to participants' schedules, geographic locations, and financial resources.

PC47. Evaluation of inservice training includes a variety of methods (e.g., satisfaction, demonstration of competency, change in roles).

PC48. Evaluation addresses long-term effects as well as short-term effects.

PC49. Goals and objectives of the inservice training serve as the basis for selecting the type and intensity of inservice activities.

PC50. Inservice training is multiphased, sequential, and ongoing.

PC51. Inservice training includes training and practice in using a problem solving approach to decision

making for all team members.

PC52. Training includes practice in promoting a sense of shared responsibility for planning and intervention among family members, paraprofessionals and professionals.

PC53. Team members receive training in conflict resolution, mediation, and expressing differences of opinion in positive ways.