

A Publication of the Army Educational & Developmental Intervention Services CSPD

## **Resource Article**



This month's resource article, Parents' and Professionals' Perceptions of the Implementation of Family-Centered Practices in Child Assessments, was written by

Elizabeth Crais, Vicky Poston Roy, and Karen Free. The authors set out to compare the perceptions of families (with children being assessed) and professionals on the assessment team regarding family-centered assessment practices. In particular, they wanted to determine the degree of family-centered practices applied during assessments and to identify practices viewed as important and ideal.

The participants of this study included 134 professionals and 58 family members. Each participant received a Family Participation in Child Assessment (FPCA) questionnaire. The FPCA is a self-rating instrument containing 42 questions about actual practices and practices that would be considered ideal (i.e., Would this be useful to include in future assessments?').

Actual Use of Family Centered Practices: Results suggest that families and corresponding professionals agree 69 percent of the time that family-centered practices are used in assessments. Yet, with regard to the practices included below, families and professionals agreed less than half the time that these practices were applied.

 Was the family asked to write down observations of the child before the assessment?

- Was the family given a choice to take part in identifying areas to assess in the current assessment?
- Was the family given the choice to complete an assessment tool or checklist?
- If a current diagnosis was made, was the family asked if they agreed with the diagnosis?
- If a previous assessment had taken place, was the family asked how they felt about the results?

Agreement between professionals regarding actual use of these family-centered practice was higher (78%). There were no practices that fell below 50 percent agreement between professionals.

**Ideal Family-Centered Practices:** Families and professionals were 82 percent in agreement with which family-centered practices are considered ideal. Interestingly though, the following six items yielded the highest disagreement between the families and professionals. Professionals indicated that they would prefer families not be involved in the following.

- Meet the whole team before the assessment.
- Help choose the location.
- Help identify strategies to use in the assessment.
- Review reports and suggest changes.
- Write down observations before the assessment and describe them.
- Be present for all meetings before and after the assessment.

Agreement between professionals regarding ideal family-centered practices was slightly higher at 84 percent. Only one practice (i.e., Was the family given the choice to review the report and suggest

changes?) fell below the 50 percent agreement level among professionals.

**Frequency of Family-based Practices:** Of the 42 items on the FPCA, the top three frequently occurring family-centered practices reported by families and professionals included:

- Time was spent finding out the family's most important concerns.
- All assessment results described or explained to the family.
- Time was spent identifying next steps for both family and professionals.

The least frequently occurring family-centered practices reported by families and professionals included:

- If family wrote down observations before the assessment, they were asked to describe what they saw.
- Family met with whole team before the assessment.
- Family given choice to write down observations of child during the assessment.

**Implementation Gaps Between Actual and Ideal Practices:** For almost half of the items on the FPCA, there was a gap (of at least 25 percent) between what was happening with child assessments and what families and professionals would like to see happen. The following items had some of the largest gaps between actual and ideal practices when rated by families and professionals:

- If the family completed an assessment tool or checklist, they were asked to talk about what they noticed.
- If family wrote down observations before the assessment, they were asked to describe what they saw.
- Family was asked to observe or write down observations of child before the assessment.
- If a diagnosis was made, family was asked whether they agreed with the diagnosis.

Families and professionals agreement with what constitutes ideal family-centered practice is promising. Yet there remains work in bridging the gap between actual and ideal practices. As an early step in the early intervention process, quality assessment practices can be instrumental in building the family-professional relationship and foundational to future family-centered work.

Crais, E., Roy, V. P., and Free, K. (2006). Parents' and Professionals' Perceptions of the Implementation of Family-Centered Practices in Child Assessments. *American Journal of Speech-Language Pathology*, *15*, 365-377.

### On the WWW

The Talaris – Parenting Counts website is a great online resource for parents who want to learn more about different topics in child development. The link below



provides access to handouts related to a number of developmental terms/concepts organized via developmental domain. For example, under 'Physical and Brain Development' handouts on 'Temperament' and 'Self-Regulation' are available. Each two page handout (both in Spanish and English) provides a brief definition and additional bits of information such as 'Why it matters', 'What to expect and when,' 'What parents can do' and related interactive activities. Check out the handout on 'Emotional Coaching'.

http://www.parentingcounts.org/professionals/pa renting-handouts/

## What do the Data Say?

#### What percentage of children in early intervention



receive services in natural environments?

To answer this question from a National perspective we turn to the NECTAC 2011 SPP/APR Indicator Analyses, specifically Indicator 2: Percent of infants and toddlers with IFSP's who primarily receive early intervention services in the home or community-based settings. The data included in this publication are based upon the 1 July 2009 – 30 June 2010 reporting period. The results of these analyses show that on average, 94.5% of children are served in home or community settings. The full

#### publication is online at

http://www.nectac.org/~pdfs/partc/partc\_sppapr\_11.pdf

Looking at EDIS performance during the same timeframe (1 July 2009 – 30 Jun 2010) 99% of early intervention services were provided in natural settings.

## **Consultation Corner**



From February through July 2012, we are excited and honored to have the Early Intervention Family Alliance's

(EIFA) Kim Travers serve as the consultation expert addressing the topic *Early Intervention A Family Perspective. For a*dditional information about EIFA see: <u>www.eifamilyalliance.org/membership.htm</u>

# What was your most memorable visit with an early interventionist – why was it memorable?

I have been blessed to have many wonderful people who have worked with and cared deeply for my children and family. There are many wonderful memories from our interactions together and it is so hard to pick just one, but here is what came to the surface of my memories....

One summer day, Kierstyn and I were preparing for our session with our Early Intervention Physical Therapist. My older daughter, Alayna would often find another activity to do while Kierstyn and I were "working." I tried to always have special time with each child to work on skills that the team had suggested could impact development, but my daughters taught me a big lesson that day.

Alayna came over to sit with me when the Physical Therapist was working with Kierstyn and me. The activity was tossing beanie babies into a bucket while on all fours. Alayna was very interested in the animals and liked the look and weight of them, so she joined in and tried the activity too. The girls were laughing and enjoying the play time together and I was able to just let the play grow and change based on what the children wanted to do with the activity. It doesn't sound like a big thing, but it was enormous in the scope of my life. My children had not yet learned to play together and this was the beginning of their sibling friendship. The lesson that I learned that day is that my children's relationship with one another was far more important than working on a specific skill. The big lesson for me was that through their lead, I could help my children build important functional skills while having fun rather than "working" on a specific skill. Most importantly, these siblings learned that they could have fun together.

The lessons learned I would like to encourage you all to examine are:

- Allow child interests to lead an intervention;
- Include all individuals that are part of the child's everyday life (please don't let those siblings sit on the sideline);
- Intervention is not about building skills in a vacuum; rather it is about helping each individual child to be able to enhance their participation in the daily life of their own family with whatever functional skills that entails.

## Continuing Education for KIT Readers



The Comprehensive System of Personnel Development (CSPD) is offering a continuing education opportunity for KIT readers.

In line with the focus on *Early Intervention A Family Perspective*, readers are invited to receive continuing education contact hours for reading the monthly KIT publications (February through June 2012) and completing a multiple-choice exam about the content covered in these KITs.

If you are interested simply complete the exam online at <u>www.edis.army.mil</u>. Upon successful completion of the exam, you will receive a certificate of non-discipline specific continuing education contact hours.

Please share your KIT questions/ideas via email <u>ediscspd@amedd.army.mil</u>