

Handout: Natural Environment Readiness Self-Assessment Checklist

NOTE: This handout accompanies the online module: Natural Environment Readiness Self-Assessment. Provider program administrators applying to become a Part C Provider during Limited Open Enrollment Complete this module and the online post-assessment as part of the application process.

The module may also be completed by existing providers for ongoing professional development hours (3 hours).



SELF-ASSESSMENT CHECKLIST

SECTION 1: Traditional Approach vs. Routines-based Approach <https://binged.it/2IBZzLP>

(this section accompanies the video *Early Intervention: A Routines-based Approach - Part 1: Traditional vs Routines*)

Question #1

Direct service providers on my team (therapists) work with families of eligible infants and toddlers (birth to three) using:

- Traditional approach (clinical/medical model of direct child therapy)
- Routines-based Approach (coaching child's caregivers to implement strategies in typical activities)

Question #2

Based on SLP Robin Hoofnagle's description of the how the field of early intervention has evolved, where do you feel your team's service delivery is currently "at" on this spectrum?



- Rehabilitative and/or medical model / families bring child to clinic for direct child therapy.
- Therapists see child in home or community location but therapist directs activities and brings developmentally appropriate toys/materials and parent is more of an observer or asks questions.
- Therapists see child in childcare settings but pull the child out of the classroom to go to a therapy room for planned therapeutic activities.
- Therapists follow the lead of the parent/caregiver at home or community setting and use the ideas, routines, and materials present.
- Therapists coach / instruct / mentor parents/caregivers to give them the tools they need to facilitate their child's development by implementing intervention strategies between therapy visits.

Question #3

Have you embraced the “paradigm shift” SLP Robin Hoofnagle described (the shift away from outpatient clinic services in the 80’s, and away from home visits with the therapist bringing in toys and activities and directing the session in the 90’s, to the therapist as coach supporting the child’s caregivers in learning what they need to know to help their child learn in the 2000’s)?

- Yes
- No

Do you believe that using a routines-based approach is “well worth the effort?”

- Yes
- No

Question #4:

What issues and/or challenges do you think a direct service provider (therapist) on your team may have in changing their practice to shift from a traditional (clinic/medical) model to an early education model using a routines-based approach?

Question #5

What support do you think the professionals on your team would need to be able to use a routines-based approach with parents and other caregivers?

SECTION 2: What Intervention Can - and Should - Look Like https://youtu.be/sL_WOCu3Ptg

(this section accompanies the video Early Intervention: A Routines-based Approach - Part 2: What Intervention Can - and Should - Look Like)

Question #1:

Are the direct service providers (therapists) on your team comfortable using the activities and materials at that location and allowing the parent/caregiver to lead/direct the session?

- Yes
- No

Why or why not?

Question #2:

Do you agree with OT Jane Rutt (in the video) when she says the child ends up getting more intervention throughout the week if she trains parents/caregivers to work with the child between therapy sessions than if another therapist works with the child and family for an extra hour a week?

- Yes
- No

Do the direct service providers (therapists) on your team agree with this?

- Yes
- No

Question #3:

Based how speech-language pathologists Molly and Robin describe their work with families, do you feel that the direct service providers (therapists) on your team are ready and able to provide parents with the tools, education, and knowledge that the family needs to work with their child between home visits to help their child develop and learn?

- Yes
- No

Question #4

When a parent of a newly referred child says that they just want to bring their child to the clinic for therapy sessions, how does your team explain the Part C program to families so that families can make informed choices about programs/service options available and about whether or not to participate in the Part C early intervention program?

SECTION 3: Changing the Mindset

<https://youtu.be/jA6IOF9A298>

(this section accompanies the video Early Intervention: A Routines-based Approach - Part 3: Changing the Mindset)

Question #1

How do the direct service providers (therapists) in your program practice “teaming” practices -- consult and collaborate within their discipline or across disciplines to support one another in coming up with strategies for intervention embedded within typical child and family activities to promote early learning and skill development?

[for example: A generalist such as a Developmental Therapist can consult with an OT to get ideas for how to help a parent work with her child to overcome some sensory processing issues].

Question #2

Therapists Jane and Molly described how their work as an early intervention provider to coach and support parents in being able to help their child learn new skills is very different from what they learned to do in college or university or as a new therapy provider. Do you feel that the direct service providers (therapists) on your team feel confident and competent in serving families using a Routines-based Approach that coaches parents and other caregivers?

- Yes
- No

Question #3:

If you answered “no” to question #2, what support or professional development would your direct service providers (therapists) need to feel confident and competent serving families in the ways described in the video?