SPECIALISTS
Sometimes we are guessing...
... or taming
Maybe even sprouting Mandrakes.
Specialists:

- Screen
- Observe
- Conduct formative and summative assessments
- Review results
- Refer and follow-up on screenings and other assessments
- Provide direct support to providers
- Work closely with Child Care Resource and Referral
- Provide training and model appropriate strategies needed for children
- Collaborate with many agencies
- Coach providers
- Offer technical assistance and training to providers
## Staff Qualifications and Knowledge Base

<table>
<thead>
<tr>
<th>Staff</th>
<th>Role</th>
<th>Knowledge, Skills and Abilities</th>
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<tbody>
<tr>
<td>Infant/Toddler Specialists</td>
<td>Analyze, Assess, Do Targeted Interventions, Train, Coach, Coordinate</td>
<td>B.S./M.S. Related Field or Substantial Qualifying Experience and Coaching Certificate</td>
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<tr>
<td>Preschool Specialists</td>
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<td>Afterschool Specialists</td>
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<td>Inclusion Specialists</td>
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</table>
Identify needs

Develop and Prioritize Goals

Determine Action Steps

Access Resources

Implement Plan

Evaluate Progress and Revise the QIP as needed

Reflect and Revise
Identify needs

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## Suggested Trainings for Specialists

<table>
<thead>
<tr>
<th>Initiative</th>
<th>OEL/RFs</th>
<th>Coaches</th>
<th>PD Leads</th>
<th>Inclusion Specialists</th>
<th>I/T Specialist</th>
<th>Preschool Specialists</th>
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</tbody>
</table>
Screening

Below Cutoff
- Professional Assessment
  - Eligible
  - Not Eligible

Near Cutoff

Above cutoff
- Continue to Monitor (Re-Screen) & use Curriculum-Based Assessment to develop learning plans
Phase 1: Create a Vision of Quality

10 Components of Quality Infant & Toddler Care

**Foundations**

1. **SAFE & HEALTHY PROGRAM PRACTICES**
   - Quality infant and toddler programs ensure the health and safety of children.

2. **STAFF WELL-TRAINED**
   - Programs train and support staff to meet the specialized needs of infants and toddlers.

3. **ENVIRONMENTS FOR LEARNING**
   - Nurturing environments promote feelings of security and competence for children during interactive caregiving routines and play.

**Relationships**

4. **SMALL GROUPS WITH OPTIMAL RATIOS**
   - Low ratios and small groups enable teachers to devote more individual attention to children, thereby promoting secure attachments and intimate relationships.

5. **PRIMARY CAREGIVING & CONTINUITY OF CARE**
   - Teachers are assigned responsibility for primary caregiving and establish nurturing relationships with each child and family from infancy to age three.

6. **ACTIVE & RESPONSIVE CAREGIVING**
   - Responsive teachers provide a secure base for infants and toddlers to develop emotional regulation and a healthy sense of self.

**Language & Learning**

7. **CURRICULUM & INDIVIDUALIZATION**
   - Curriculum for infants and toddlers happens within the context of relationships and individualized daily care routines and play.

8. **EMERGING LANGUAGE & LITERACY**
   - Language acquisition and the development of literacy for infants and toddlers develop through frequent interactions, language-rich environments, and play.

**Family Supports**

9. **FAMILY ENGAGEMENT & CULTURAL CONTINUITY**
   - Programs value families and their cultures as integral partners in guiding their child’s development and future school readiness.

10. **COMPREHENSIVE SUPPORT SERVICES**
    - Infants, toddlers, and their families are strengthened when programs help link them to needed community supports.
Phase 2: Use the Signs to Conduct a Needs Assessment

Phase 3: Choose from Steps to Build Your Personalized Quality Improvement Plan

Phase 4: Implement Your Quality Improvement Plan

Signs

5.1 Primary caregiving assignments

Yes No
☐ ☐ 5.1.1 The program has a policy for assigning major child care responsibilities with the family.
☐ ☐ 5.1.2 The program considers the family's needs.
☐ ☐ 5.1.3 Staff can explain the child's assignment.

5.2 The program assigns each child a specific caregiver.

Yes No
☐ ☐ 5.2.1 Every child's name is assigned.
☐ ☐ 5.2.2 All children remain with the same caregiver.
☐ ☐ 5.2.3 Staff can explain the child's assignment.

Steps

a. Assign each child to a specific teacher who develops a close relationship with the child and communicates with the child's family.

b. Develop a primary care group roster and determine a common location within the classroom where it is maintained.

c. Monitor to ensure that primary care assignments are maintained throughout the day.

d. Develop a plan for teacher absences that ensures children are assigned to a substitute teacher who has information about the family.

e. Ensure that teachers know the names of familiar children in their care group to facilitate communication.

Our Plan

Primary Caregiving

<table>
<thead>
<tr>
<th>ACTION</th>
<th>PERSON RESPONSIBLE</th>
<th>DUE DATE</th>
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<tr>
<td>Assign each child to a specific teacher who develops a close relationship with the child and communicates with the child's family.</td>
<td>Ms. Julie</td>
<td>Oct 28</td>
</tr>
<tr>
<td>Develop a primary care group roster and determine a common location within the classroom where it is maintained.</td>
<td>Ms. Karen</td>
<td>Nov 17</td>
</tr>
<tr>
<td>Monitor to ensure that primary care assignments are being maintained throughout the day.</td>
<td>Ms. Karen</td>
<td>Dec 3</td>
</tr>
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</table>
VPK Assessment

• Provides VPK instructors with a user friendly tool that will help identify the skill levels of the children in their program and guide instructional decisions.
VPK Assessment Facts

• Required for VPK providers as a pre- and post assessment
• Progress monitoring with three assessment periods
• Aligned with the Standards: 4 Years Old to Kindergarten
• Four Measures
  • Print Knowledge
  • Phonological Awareness
  • Mathematics
  • Oral Language and Vocabulary
• Results are not used for program accountability, but instead to guide instructional activities that promote children’s development of important readiness skills
Identify needs

Develop and Prioritize Goals

Determine Action Steps

Access Resources

Implement Plan

Evaluate Progress and Revise the QIP as needed

Reflect and Revise

AP 1

Florida VPK
Classroom Report
How do YOU review VPK Assessment Data?

• What do you see?
• Is there a process for reviewing the data with your director/teacher?
• Are you surprised with how your children performed? Why or why not?
• What do you usually do with this information?
Identify needs

Develop and Prioritize Goals

Determine Action Steps

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AP 2

Reflect and Revise

Evaluate Progress and Revise the QIP as needed

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AP 2

Reflect and Revise
## VPK Assessment Local Level Report

**Program Year and Type:** 2016-17 School-Year

**Report Dataset As of Date/Time:** 2/21/2019 10:49:39 AM

**Coalition:** Sample

### Print Knowledge

| Provider Name    | No of Students | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 |
|------------------|----------------|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| sample school    | 18             | 72 | 6 | 22 | 22 | 28 | 50 | 61 | 22 | 17 | 22 | 33 | 44 | 39 | 39 | 22 | 22 | 22 | 28 | 28 | 28 | 28 | 44 |
| sample school    | 13             | 85 | 8 | 8  | 23 | 8  | 69 | 62 | 23 | 15 | 8  | 15 | 77 | 46 | 23 | 31 | 0  | 23 | 77 | 85 | 8  | 8  | 15 | 31 | 54 |
| sample school    | 17             | 55 | 0 | 65 | 0  | 59 | 41 | 8  | 6  | 88 | 6  | 6  | 88 | 4  | 24 | 17 | 17 | 17 | 24 | 34 | 34 | 62 | 10 | 41 | 48 | 0  | 17 | 83 | 83 | 7  | 10 | 7  | 28 | 66 |
| sample school    | 29             | 83 | 7 | 10 | 28 | 31 | 41 | 72 | 24 | 3  | 3  | 34 | 62 | 10 | 41 | 48 | 0  | 17 | 83 | 83 | 7  | 10 | 7  | 28 | 66 |
| sample school    | 30             | 77 | 10| 13 | 27 | 23 | 50 | 50 | 37 | 13 | 3  | 40 | 57 | 37 | 23 | 40 | 7  | 23 | 70 | 83 | 10 | 7  | 13 | 37 | 50 |
| sample school    | 38             | 66 | 8 | 26 | 11 | 21 | 68 | 74 | 13 | 13 | 5  | 47 | 47 | 24 | 39 | 37 | 5  | 26 | 68 | 50 | 29 | 21 | 5  | 37 | 58 |
| sample school    | 30             | 60 | 20| 20 | 33 | 3  | 63 | 40 | 40 | 20 | 7  | 37 | 57 | 27 | 27 | 47 | 3  | 13 | 83 | 53 | 27 | 20 | 13 | 33 | 53 |
| sample school    | 47             | 38 | 21| 40 | 10 | 20 | 70 | 43 | 23 | 33 | 3  | 20 | 77 | 23 | 33 | 43 | 7  | 17 | 77 | 47 | 17 | 37 | 7  | 30 | 63 |
| sample school    | 49             | 49 | 14| 37 | 8  | 16 | 76 | 78 | 14 | 8  | 6  | 29 | 65 | 33 | 41 | 27 | 6  | 18 | 76 | 76 | 20 | 4  | 27 | 22 | 51 |
| sample school    | 35             | 80 | 6 | 14 | 17 | 14 | 69 | 54 | 29 | 17 | 17 | 29 | 54 | 31 | 29 | 40 | 11 | 23 | 66 | 83 | 9  | 9  | 14 | 20 | 66 |
Preschool Quality Building Blocks

Safe & Healthy Program Practices
High-quality programs ensure the health and safety of children.

Education, Training and Support
Well-prepared educators provide engaging interactions and classroom environments that support learning.

Comprehensive Early Learning Standards and Curricula
High-quality programs have curricula that are based on comprehensive early learning standards, address the whole child, are developmentally appropriate and are effectively implemented.

Group Sizes and Ratios
Fewer students in a classroom and more staff facilitates high-quality interactions between teachers and children.

Classroom Environment and Interactions
Programs use developmentally, culturally and linguistically appropriate and effective teaching approaches that enhance each child’s learning and development in the context of the curriculum goals. Programs promote positive relationships among all children and adults.

Support for Diverse Learners
High-quality early learning programs meet the needs of all students, including English language learners and students with special needs.

Assessment of Child Progress
Programs are informed by ongoing systematic, formal and informal assessment approaches to provide information on children’s learning and development.

Comprehensive Program Assessments
High-quality early childhood systems evaluate program quality in terms of both structure and classroom interactions.

Family Engagement
High-quality programs engage families in meaningful ways.

Community Relationships
Preschoolers and their families are strengthened when programs help link them to needed community supports.
Pyramid Model for Promoting Social Emotional Competence in Infants and Young Children

- Effective Workforce
- Nurturing and Responsive Relationships
- High Quality Supportive Environments
- Targeted Social Emotional Supports
- Intensive Intervention

Assessment based intervention that results in individualized behavior support plans.
Identify needs

Develop and Prioritize Goals

Determine Action Steps

Access Resources

Evaluate Progress and Revise the QIP as needed

Reflect and Revise

Implement Plan
Putting it all together

<table>
<thead>
<tr>
<th>Issue Identified during self assessment</th>
<th>What outcome or goal do we seek?</th>
<th>Priority (L/M/H)</th>
<th>How will we get this outcome? (Steps)</th>
<th>Success measure</th>
<th>By when?</th>
</tr>
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</table>
# Putting it all together

<table>
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<th>What outcome or goal do we seek?</th>
<th>Priority (L/M/H)</th>
<th>How will we get this outcome? (Steps)</th>
<th>Success measure</th>
<th>By when?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Lower scores in Environment, Family, and Interaction</td>
<td>Higher scores in Environment, Family, and Interaction</td>
<td>H</td>
<td>Pairing the child with one other student rather than in small groups, spread the centers around the room to provide for more space between centers, and stop playing music during center time New intake form for parents, began meeting parents at the front during drop-off</td>
<td>BPIECE</td>
<td>1 month</td>
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<tr>
<td>• Child had some sensory processing issues</td>
<td>Higher scores in the CLASS</td>
<td>H</td>
<td>MMCI training coach agreed to begin visiting the classroom and start providing guidance on stronger interactions in the classroom.</td>
<td>CLASS/Coaching</td>
<td>6 months</td>
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<tr>
<td>Teacher’s scores indicate a need to develop stronger interactions and building classroom community</td>
<td>Higher scores in the CLASS</td>
<td>H</td>
<td>MMCI training coach agreed to begin visiting the classroom and start providing guidance on stronger interactions in the classroom.</td>
<td>CLASS/Coaching</td>
<td>6 months</td>
</tr>
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</table>
Questions?