Implementing Evidence-based Practices to Support inclusion Resources and Strategies

Pam Winton: Good morning, everyone. This is great to see the committed group here in the room and we're really excited about the folks who are attending virtually to this session today on implementing evidence-based practices to support inclusion resources and strategies. We would love to all be in one small space together, because we love to engage with you and have this be really interactive. But we hope to have some opportunities to hear from you along the way, so we'll do that. I'm Pam Winton. I am with the National Center for Early Development, Teaching, and Learning, and I'm here with a team of colleagues from the Office of Head Start and from Frank Porter Graham Child Development Institute in Chapel Hill, North Carolina. And so I want to introduce our panel. And some of our panelists are out in the -- monitoring the virtual audience and helping with some of the floor activities. So I'm gonna introduce first Chih-Ing Lim. And you notice that we're very proud of something. Do you see what we're holding up? We just won the national basketball championship.

Whoo! So we have our pom-poms and our number-one sign here. And Chih-Ing Lim is also with the National DTL Center -- That's our nickname for our Center -- and has been very involved in the development of the presentation. We sort of nominated one person to do a lot of the talking. That would be me. But these are ideas that we all generated together. Also out in the audience, we have Carla Vincent from the National DTL Center. And Carla has a huge, long history of working in inclusion. Just to highlight one thing, she used to be an intimate part of our national inclusion technical assistance center called Partnerships for Inclusion in North Carolina, a multi-funded state agency cross-sector technical assistance group that provided inclusion support to child care, Head Start, and pre-K across the state.

Then, back with our virtual audience is Dr. Tracey West, also from DTL and FPG. And Tracey is the lead on the group who's providing training on the inclusive classroom profile, a reliable and valid observation tool for looking at the quality of inclusive practices through the lens of the children with disabilities. And she and Carla do that work together. And then, we have a cameo appearance. We're so lucky that we have Dr. Sangeeta Parikshak from the Office of Head Start, who, I said, "Oh, Sangeeta, you're here still today. Will you make a cameo and share with us information on the Head Start Performance Standards, and also just your incredible wisdom and experience in this work?" And Sangeeta is a consult-- Tell us who you are, Sangeeta, 'cause I'll mix it up.

Sangeeta Parikshak: Sure. Hi, everybody. So, I'm from Central Office, and I am the lead on mental health and disability services for the Office of Head Start. My background -- I'm a clinical child psychologist, and I have experience working as a mental health consultant in Head Start programs, so, lovely to be here with you all today.

Pam: Yeah. And Sangeeta's a huge part of our work at the National DTL Center. And just to give you a sense of that work, we are a subcontract to the ZERO TO THREE program, who is the lead. We're not the lead. We're the subcontract, but our areas of focus are inclusion, implementation, science, and evaluation. And so I want to first of all say that if you would like CEUs, please see Patty. She's waving. She has a beautiful orange scarf on, and she will help you get signed up for the CEUs if that's important. So thank you, Patty. So where are we going today? These are our objectives. And really it's about, you know, thinking about why are disability services and inclusion an important topic today?

And so we know that inclusion is not a new idea, right? I am pretty old, and I've been around for a long time. My background is early childhood special ed and early intervention. And there are decades of laws and policies and research to support inclusion. It's not a new idea, but we'll talk a little bit about the challenges in a minute. We also have very strong research on the evidence-based practices that support inclusion. We know a lot about what it is that children need to experience and families to have a really good, high-quality inclusive experience. We also know that your role is critically important in this process, so we want to, in the session, try to move you towards thinking about that role and developing a plan for how you're going to ensure that in the programs you're part of, the inclusive agenda and disability services move forward in a really positive way.

So how are we going to do it? First, we do the little welcome, introductions. We want to hear a little bit more about who you are. We're going to share the national context, laws, policies, and research. We are going to bring you down to the level of a practitioner, because that's where the rubber meets the road, a teacher in an inclusive program. And then we're going to share the perspectives of disability coordinators who play an essential role in making inclusion work in programs. And then we're going to take the lens of implementation science. How many of you have heard the term or know something about implementation science? Is it familiar to you? Some of you? I know that there's been a big emphasis in the DTL Center on this. We're going to share a tiny bit about that and use it to address inclusion, and then, as I mentioned, some action planning. And so we're going to start with who you are. And the first question is, what is your role? And I'm going to show you the wheel. And how many of you are familiar with the wheel? Everybody, I assume, knows the wheel?

Okay. So I'm going to do show of hands for those of you in the room, and for those of you who are virtual, we want you to type in your responses to this question of your role. And I'll start with this outer blue circle. How many of you have a role that involves leadership or governance, policy councils, leadership? Raise your hands high so we can -- Many of you. That's awesome, because you have such an important part of this. Let's see. Tracey and Nicole in the back, tell us what you're learning from our virtual audience. I know the responses must be crowding in. And if you come to our 2:30 session, you say, "I just love that. I want to get it again," we're going to do some live polling there, so we can show you the results of what we're learning from you guys. Of course, we won't have the virtual group to learn from. Darn. We're so sorry you virtual folks won't be there at 2:30 when we're going to do live polling. Okay. Well, I'm going to go on to the next circle, which is those of you who are in a program management, program oversight kind of systems role. How many of you would fall into that category?

Okay. I see -- I would say some of you have maybe raised your hand twice. That's good. But about a third to a half of you are in that role, and then I'm also hoping you all in the virtual audience are chiming in on this. And then in the inner blue circle, I think of those as the folks who are directly touching the lives of children and families, those practitioners who are involved in direct service. How many of you are in that direct service role? Good. I see a couple of hands quietly raising. Welcome, because you guys, you're in the heart. You're in the thick of things, so thank you for raising your hands and being here. Tracey, Nicole, any word from our virtual group about who is out there?

Nicole: Can you hear me?

Pam: Yeah.

Nicole: Yes, we have health specialists. Executive directors, disability specialists. LPNs, a CFO. Early childhood manager, someone with compliance.

Pam: Okay.

Nicole: And I'll give you one more, a C.P. specialist.

Pam: Okay. Well, it seems like a variety of folks are out there, and that's great. We welcome you all, and I'm glad to have you with us. We're going to do one more sort of poll, and this one relates to what is your sort of area. And I'm going to go back to that -- Hmm, how do I go back? Hmm. Backwards. No. Yeah. Oh, thank you. Okay. In the spokes, this is the question for you now to think about. In what context do you play a leadership role or have the chance to make change? And in those spokes, you see there is fiscal. So for instance, if fiscal is your bailiwick, it would be -- An area of change for children with disabilities could be, who's going to pay for special equipment that we need in this program? If you're in facilities, you might be thinking about how are we going to ensure our facilities provide access to children through ramps or universal design for learning?

If you're in transportation, it might be how are the children with disabilities going to get to our program and then get to a place where maybe they have to have special services? We would like those services to be in your program, but that's not always the case. Some other -- Human Resources. How do we select and hire and recruit staff that have expertise in inclusion? So you get a drift for area of change and influence. So how many of you have fiscal responsibilities, and that's the main area of change? Raise your hand, the money. Mm. Few of you have money responsibilities. How about facilities? One or two. Good. Transportation? No, okay. Program management? Yep. Some of the same hands. More of you. Don't be shy with these hands. It's kind of hard to see out there. Data valuation. Yeah, wow. You right here, you are, like, in charge of everything. Technology, information sharing? Oh, golly. Professional development and training? Lots of you. Excellent. Human resources. Okay. So why we're asking this, and for the virtual folks, I want you to think about that and sort of think through that lens of where do you have the chance to make a difference? Where is it you can exert change? I want to ask your name in the front here. Yeah. Liz? Liz has enormous capacity for influence, because she raised her hand on every one of those spokes. So some of you may be in that same boat. So think about that, when you think about this session today.

So we're going to move on then to that first part about why inclusion. And as I already said, we have decades of legislative policy guidance for inclusion, and I'm just going to touch on three components here quickly. The first, Americans with Disabilities Act, ADA, Section 504 of the Rehab Act, and I.D.E.A., Individuals with Disabilities Education Act. I'm not going to spend much time but I'm just going to highlight some pieces about that that are notable. Since 1990, we've had ADA, and it's really about equal rights, right? It's about the civil rights of individuals with disabilities, and it's a protection and safeguard from discrimination in any kind of public place. And it addresses the fact that those public places must make reasonable accommodations for welcoming and including persons with disabilities. This is so important. And, of course, Head Start has always welcomed children with disabilities, right? But especially thinking about some of the child care, Early Head Start partnership projects that are coming onboard, online now, how many of you are involved in any of those?

Are your programs involved with getting the grants to do these partnership projects? Hmm, no one here. Well, if you do move into that, I think it's important to realize that in child care, there are child

care programs who are actively discriminating against children with disabilities now and don't really realize that they're doing that. So, I know there are programs who say, "We just can't handle children with disabilities. We really don't think it's appropriate. We don't feel like it's right." That's actually -- You know, they're violating ADA, so if you run into that, just please know that in your important leadership roles. Section 504 I know is mentioned in the Head Start Performance Standards, and this comes up a lot in some of the recent conversations we've had, and that's another safeguard. It protects folks from discrimination, and it also gives folks the chance to get reasonable accommodations if they do have a disability, and that includes children. So the important part about this in terms of Head Start, I think, could be, you know, any number of things, but I think one of the things to think about is there are children in Head Start programs who maybe do not have eligibility for receiving services from the Individuals with Disability Education Act. In other words, they don't have IEPs, or they don't have IFSPs.

And it may be because they've been referred for services but they haven't -- That eligibility hasn't been determined yet, or they may have a disability of some sort like a learning disability was an example Sangeeta used in the workshop we did yesterday. And because that disability is not covered under I.D.E.A., they don't have an IEP, yet they need some accommodations to fully participate in the Head Start program. So that's when this 504 can come into play and help guide the program in conjunction with the parents in how to make those accommodations. So that's an important piece. And then this is the I.D.E.A. law, and it's been around a long time. It hasn't really changed appreciably lately, so you're probably all familiar with it. What I'll just say about it is it does have these two components, and this is a significant part of it. The first part is often called part C, and it was passed -- 99457 is the public law. And that's when we first extended the rights of young children zero to 3 to get the services and supports they need in the home or natural environment. And that was all sort of known -- This was Federal legislation, but it really gave money to states to implement sort of a coordination process to all the different disciplines that come into play when a child has disabilities. Some people called it glue money that sort of gave states the money to build collaborative partnerships across hospitals, clinics, pediatricians, social workers, mental health consultants, Head Start, child care, occupational therapy, other allied health services. So if you're a parent of a child with disabilities -- Are there any in the audience who are or virtually? Yes. So you probably know what it's like when you are trying to manage all of these people. So this provided that service coordination to support families.

Very important. And then the 619 or part B section that provides the free appropriate education to 3- to 5-year-olds, has been in place for a longer period of time. And again, that is the guarantee of the appropriate education to meet each and every child and all the needs they might bring into a public preschool or any preschool that is serving them. And I'll say something about these laws. They help -- Okay, there are three things that I think are important takeaways. They're all about collaboration. It's not just about special ed doing inclusion, or it's not about special ed doing disability services. This is our job. This is all of us in it together. Number two, families are the centerpiece. We cannot do this work without working very closely in partnership with families. And it's not about telling families what to do. It's about starting with families, and having them tell us what their child needs, what their child likes, what their strengths are, what their family needs. And that guides us. That's a flip, right?

That really was a flip brought about by these laws. The third feature is the natural environment, the least restrictive environment that's inclusion, and that's where the Head Start, L.E.A., public school partnerships are so critical. So I'm going to sort of say that there's a lot more about all of what I just said. and if you want to find that lot more, look at your resources in your handout. and we've referred -- Oh,

not there? Go to -- My peers will tell you where to find it. Chih-Ing is going to tell you where to find it. But we've had a series of joint Federal webinars sponsored by the U.S. Department of Ed and U.S. Department of Health and Human Services. And Sangeeta has been on those webinars and also our colleagues at U.S. Department of Ed talking about this legislative underpinning to this work. So it's a great way to get the details from those at the very top who really can share that information well. And now we have our guest star, Sangeeta, who is going to share with us information on the Head Start policy standards which definitely are part of this. Thank you, Sangeeta, so much.

Sangeeta: Thanks, Pam. So, just as Pam was talking, I wanted to make a note for you guys in the back of the Head Start Program Performance Standards, if you want some more information on I.D.E.A., we do have an appendix on page 151, where we've pulled out the Individuals with Disabilities Education Act. You'll see a definition of IEPs and IFSPs and what the legislation actually says in kind of black and white, so I think that could be really a helpful resource for you all, as well. So, I know that you got a lot of really good information on the Head Start Program Performance Standards this morning. And what I wanted to do is just quickly drill down to some of the pieces that have to do with serving children with disabilities. Again, this is not to in lieu of reading the entire Head Start Program Performance Standards, because there are so many pieces that you really need to understand in order to provide the best services for these children, but here are just some highlights for you all. So, first of all, I just wanted to say that these performance standards really just continue and further Head Start's longstanding commitment to children with disabilities, and what it does is makes the commitment more explicit. And so what you see here is that the performance standards implement the changes from the 2007 Head Start Act.

So for those of you who may have been around for a while, you might have remembered the time when in Head Start you were the ones responsible for evaluating children and providing IEPs in the program. But now the performance standards reflect the Act that, you know, makes it very clear that such services are entitlements under I.D.E.A., so I think programs have in general followed the statute for a while, but we wanted to make it explicit in the performance standards that it is about partnering with the L.E.A. to get those services in place for the children in your program, which I know we had a great discussion in the Disability Coordinators Institute yesterday where we talked about some of the challenges but also ways that some programs have been really successful at partnering with the L.E.A.s in this area. The big emphasis I would say in the performance standards is around ensuring that programs include all children in all activities in the program to the best of their ability. So this includes children with IEPs and IFSPs, but also includes other children that, you know, may kind of be on that cusp of okay, they don't quite qualify for services under I.D.E.A. But we are seeing significant delays, and so we do have language in there where the standards state that if a child has a significant delay, the program must partner with parents to help the family access services and supports to help address the child's identified need, and that it may be appropriate for the program to provide these services and supports under Section 504 of the Rehabilitation Act.

So I know for some of you, Section 504 may be a new concept or you haven't really had to implement it in your, you know, kind of day-to-day activities. And that's why it was great that Pam was able to provide an overview. And we at the office of Head Start are going to be working with our technical assistance centers to continue to provide you with more guidance and information around that. You'll see when you read the performance standards that we have infused children with disabilities throughout various sections within 1302. So, in 1302 subpart C, that's where you will find the

information around providing supports for children with significant delays who are not eligible for I.D.E.A. In subpart G, we talk about transition services to support children with disabilities. So here we really highlight that we want to make sure that whatever is working for a child in Early Head Start, we want to make sure that those supports and services are in place for that child when they enter Head Start and then when they transition again to kindergarten. We just want to make sure that it follows them throughout so that we don't have to restart the process every time.

So much of what is valuable about those developmental screenings that we put in place within 45 days and all of the work that we do is that we teach parents to advocate for their child. We get them the services. We figure out what works for that child in this setting, right, and hopefully those are the things that will follow them and they will learn from, and the L.E.A. will learn from us about what we've learned about that child. So that's really the purpose of the transition section there. And then under subpart J, we talk about coordinated approaches to serving children with disabilities. So this is just about highlighting the things that you probably already know and are doing but just making sure that we remember to coordinate with the local agencies responsible for implementing I.D.E.A. along with part B and part C to ensure that we have appropriate referral, evaluation, service delivery, and transition.

Pam: Thank you, Sangeeta. Yeah. Yeah. Oh, sorry.

Sangeeta: I think there's one more slide.

Pam: Oh, yeah.

Sangeeta: Right? Okay. So this next part is just really focused on subpart F, so this is around additional services for children with disabilities. So this is again about really meeting and catching those children who may not be eligible for I.D.E.A. yet. So we have the kids that I talked about earlier, in that bucket of they don't quite qualify for services. We already know that, but we know they have some significant delays. This section is really about those kids that are awaiting determination of I.D.E.A. eligibility.

So we know that oftentimes it can take a while for the referral and evaluation process to unfold and for us to really figure out what exactly the diagnosis is for the child. So these are the kids who they wouldn't quite qualify for 504 yet, because they don't have a diagnosis, but we still want to make sure that we can provide them with whatever services to make sure that they're not excluded from their classroom or from their environment. And then, finally, parent engagement is a big piece of the performance standards. And we really do infuse parent engagement kind of throughout, and so I just wanted to highlight that piece for you, as well.

And what I really like about the emphasis around children with disabilities and parent engagement is that we actually do have a section in subpart F, 1302.62 which says additional services for parents, and what that does is it outlines how programs must help parents navigate this kind of complex system of getting -- figuring out if their child qualifies for services, and kind of actively participating and becoming an advocate for their child. So that's where we lay out what we say that programs must do around helping parents in this capacity. Thank you.

Pam: Awesome, Sangeeta. I'm thinking as you're talking, I'm thinking these are the exact same values we have in the special ed world and early intervention, early childhood special ed. So to feel this enormous support from you and the office of Head Start for this work in this National Center is just incredible, and we're really lucky.

Sangeeta: Well, we're really excited, but we have a lot of work to do. We realized that yesterday at the Disability Coordinators, didn't we?

Pam: There is so much work to do.

Sangeeta: A long list of things that we need to provide for you all so that we can really implement these performance standards with fidelity.

Pam: Yeah, but we got a really great team at it, so we're excited. We're excited. So I want to, with that sort of piece in place, the solid, solid foundation of laws and policies and regulations, that is so strong. So let's look at the research for a minute. We have decades of research on inclusion, and there's some things to draw from that, and that I think can shape your work and, you know, when you tell people why inclusion, this is important to know. There is substantial evidence that inclusion benefits all children, not just children with disabilities. Children learn empathy. They learn to accept differences. We know that young children are much less likely to be concerned about a child with a difference than adults sometimes, that there's sort of this natural acceptance. And we're going to show you some video about what are the practices that support that peer engagement and the development of friendships?

And that's I think an important thing of what we know. We also have decades of research that show that children can be effectively included in programs using modifications and specialized instruction, but there are some words in here that are important -- modifications and specialized instruction. It's not just about getting children in the programs and meeting the 10% mandate. It's what happens in the programs to support those children, to engage those children, to ensure that they can fully participate in that general curriculum and in the everyday activities that all the other children are participating in. We also know that families of young children, all young children generally have positive views on inclusion. Now, children -- I mean parents sometimes are concerned, "Will my child get enough attention?" And that's parents of children with disabilities and parents of children without disabilities.

Or, "Will the teacher be sensitive to my child's needs?" But I think anybody here who's a parent of a young child, when your child goes to preschool, don't we all worry about that? "Will they understand my child? Will he be able to tell them when he needs to go to the potty?" We all share those concerns, and so I think generally families, when the experience is a high-quality, inclusive environment, are generally happy with that. Inclusion is not more expensive. We know that from research. But also, we know that that's when we have creative blending and braiding of funds, that for it to work, there needs to be -- How many raised their hand on the fiscal side? I know you did, right down there, and you. That's important. That's part of your role in making and being a leader for change. The last one is the one that I think we hear the most of. Children do not need to be ready for inclusion in Head Start.

Programs need to be ready for children. Yet we often hear programs, and I'm not saying this is just Head Start at all, "Well," they tell parents, "I don't think your child is quite ready yet to be in this program. I think they need another year at home with you, or they need to stay in the other program they're in, because they're not quite ready." That's a form of exclusion. It sounds sweet. It sounds nice, but it's denying a child the right to be in a fully inclusive program. So that's some of the research foundation that we know is in place. Really important to know that. And so with all of that strong research, the policies, the standards, the guidance, the commitment you hear from Head Start, the commitment from those of us in early childhood special ed, early intervention, where are we? And what I want to say is

where we are is not where a lot of us would like to be, because every year, the states submit data about LRE, or least restrictive environment for preschool children 3 to 5.

And that data goes to the U.S. Congress, and it gets aggregated, and then we learn how our nation is going on this journey to inclusion. And what we are seeing, one of the indicators is what percentage of children are spending at least 10 hours a day in an inclusive -- 10 hours a week, I'm sorry. None of them are spending 10 hours a day, I don't think. 10 hours a week in an inclusive environment, like Head Start would be one of those environments, and getting their specialized services in that environment. And so that's sort of one, the bar we're using here when we say that varies from state to state a lot, but also, that has not changed much over the last 10 years. We're sort of, like, stuck, and that's just where children are being served, and that's not about the quality of what's happening there.

So we know their challenges, and so where we're going next is how you, as leaders and change agents, can enter this picture and help with this movement forward. So I'm going to take you next down to the ground, the middle of the circle, children and families. And I think a couple of you raised your hands, that you're there in that direct service realm. But the rest of you have a lot of influence on what happens to those in that direct service realm. So we're going to meet Jackie, and she's a teacher in a five-star program in North Carolina. Five stars means top of the QRIS quality indicators, very high-quality program that serves children birth through 5. And a 3-year-old boy named Lucas joined her classroom. And we're gonna hear from Jackie about some of her perspectives on Luke joining the classroom. So, ladies and gentlemen in the back who are in charge of the "V," roll it.

 Jackie: My program has just become more inclusive, and they placed a child with significant disability into my class. I'm just not sure I'm ready for this. I had one course in college that focused on working with children with disabilities, but that consisted of an overview of children with different types of disabilities. It didn't really tell me what I should be doing in my classroom. I had a practicum in an inclusive program, but inclusion in this program just meant that children with disabilities only got to play with other children on the playground and sit with them during lunch. My co-teacher and I have a classroom of eight children, mostly 2-year-olds turning 3. Now Luke has joined our group, and he's an engaging 3-year-old with curly hair and a sweet smile. But he also has pretty significant language delays and limited experience being around other children. Although Luke uses a special communication device and knows some sign language, he still needs a lot of help expressing himself.

His parents are hoping that with his social development, it would help improve him being around his peers. My biggest concern is how will I be able to address Luke's learning goals while trying to address the needs of all my other children in my class? Am I expected to work one-on-one with Luke every day? And if so, who will supervise the other children? Will Luke have therapists coming into the classroom to work with him? And how will that work? What are the best ways to help Luke learn how to play with other children and participate in learning activities such as story time or center time? And I want to involve Luke's family in making these decisions.

 Pam: Okay. I want to note the Spanish subtitles, and I want to thank Louisa and her team, who have done a wonderful job of translating into Spanish. And if you are in the virtual audience or in the live audience, and Spanish is your language, your home language, then we are very happy to welcome you and have this translation, so thank you. So as you listened to Jackie, what did you hear her say were her concerns around having Luke join her classroom? Can you, whether you're in the virtual audience or you're here in the room, could you think about that question, and then do a pair and share, get with one

other person and share what you think are her concerns, and know, as you share that concern you hear from Jackie, thinking in the back of your mind, "In my role, at the policy or leadership level or at the management level, what is it I can do to help make this work better for Jackie and for Luke?" So we're going to give you a few minutes to do that pair and share.

Okay. I want to ask you to wrap up your comments with each other and just get a chance to have you all in the room shout back some of the concerns you think that Jackie has and maybe if you have a sense of what you might do to help her. And those of you who are attending virtually, if you will put your responses in the live chat, that would be great. So, we also are getting some of your questions, and we're going to try to address a few of those as we go along, so that's great. Thank you for sending in questions. So, reactions from out there in the audience. What does Jackie need to make her, help her more fully include -- Yes?

Woman: [Speaking indistinctly]

Pam: Okay. Yeah. So, that's -- Yeah. Yeah. And there is a mike back there, but I'm going to repeat what you said very briefly, and that is transition. What is the transition plan? Is there one? How did the teacher participate in that plan? What about the parents? And you saw when Sangeeta talked about the Head Start Performance Standards, there's something in transition. I.D.E.A. definitely has transition, so that's a really important point. I'm going to just take one more, because I know it's kind of hard and we have to -- Any other thoughts? What does Jackie need? And if you could go to the mike, it would be great. Somebody back near a mike want to share one of your thoughts, ideas? Yes, good. Thank you so much. Woman #2: It sounds like she needs reassurance. And through education and training, that would be one of the ways that we would probably be able to impact her. She's concerned about her own lack of training, but also concerned about the other children and how she's going to meet the needs of her current students with the new student coming in.

Pam: So she has some very reasonable concerns about her own expertise, how she's gonna meet the needs of other children. Yeah. Wonderful. So, Luke clearly has an IEP, right? He's coming in. He's identified. He's eligible. And that's very clear that there are some safeguards and some legislation in place that would support Jackie, but somehow, that's not coming into play here. So again, when you think about your role, you've already heard a lot that could help you make sure that this kind of situation isn't happening in your programs. So we're going to move forward then. That's Jackie's perspective. We want to just share really quickly some perspectives from disability coordinators. Sangeeta mentioned we had a whole day with them yesterday which was really informative and helpful. We also, last May, had a National Early Childhood Inclusion Institute in Chapel Hill. We had the opportunity for listening sessions, reflection sessions with them there. The Office of Head Start had folks there, Amanda Bryans and Jamie Sheehan, and they were listening carefully and intently as we asked the disability coordinators to share some of their perspectives on inclusion. We learned so much. There were seven key issues that were analyzed out of what they shared, and I'm going to share them with you now. Big challenge for them are the Head Start L.E.A. collaboration partnerships.

What they said is they were having to collaborate with multiple L.E.A.s, sometimes up to 18. That's a lot of collaboration to do, right? And each of those L.E.A.s is different, so that means relating to a lot of different people. And the memorandum of understandings that they developed with the L.E.A.s had different levels of meaning, quality. Sometimes it was just a piece of paper with sort of a rubber stamp, and sometimes it had real meaning. So that's an area that we know is really important to look at. They

felt like that the teachers in their programs really needed professional development if they were going to do inclusion well. They -- Jackie is an example of a teacher in a program who's not, as you mentioned, particularly prepared, but they wanted help for themselves. They wanted professional development for themselves, because if they were supposed to be supporting teachers, they needed support to do that. They felt like if the leadership was on board, and again, this comes back to you all, it made their job easier. But if the leadership didn't really know much about disability services, not much about inclusion, then they were pretty much on their own, and it was hard. Family partnerships were something that if they -- That was a gratifying part of their job.

They said working with families made them feel good, as long as the relationship was positive, but it sometimes could be stressful. And the last two I think are probably the most important in my mind. There was a lot of emphasis on the 10%. But the question of what happens after the children are admitted to the program was big on their minds. And they said, "Do we really have the capacity to do the kind of high-quality inclusion that I'm learning about at this Institute, this National Early Childhood Institute?" And especially given that they have multiple roles and responsibilities related to their jobs. So many of them have the slash, disability coordinator/ed manager, disability coordinator/mental health consultant, disability coordinator/education specialist/health specialist. Slash, slash, slash. That's a lot. And in fact, this little cartoon reminds me of them. It's like they are juggling a lot of balls here, when you see this dog on a trike, balancing a cat with two little mice. That's their life. They're doing a lot, and they're so important to this work. So how do we move forward with supporting staff to improve the quality of disability services with inclusion? Okay, we're going to try to move forward then again about this with you in mind. So let's just show a little cartoon here. Solving the research to practice policy gap. We all want inclusion. We all want this to work well.

So, we have two scientists at a chalkboard, and one of them is pointing to this, you know, really complicated equation, and he says, "A miracle occurs." And in some ways I think with inclusion, this is somehow how we've operated for a couple of decades maybe, because we think we need to be more explicit in step two. Just because we have all the laws, policies, and research on one side of the equation, and we have this high-quality inclusive environments with every teacher being ready to do inclusion and do all these practices on the other side, we've sort of said there's a miracle in the middle. And I think in my mind, I thought the disability coordinators were that miracle. And I have found myself now reassessing that view, that they may not have the support they need or the time in their schedule or the job definition or whatever it takes to do that miracle. So we need to take a look at what happens in the middle of that, and move on. So this again is the chance we turn it back to you in whatever role you're in, thinking about let's look at this in terms of maybe a challenge to making and leading the change you want to make to support a teacher like Jackie or a disability coordinator. And you do have this action sheet to use for this work, and we're not going to have a whole lot of time in this particular session today to think that you're going to leave with a fully blown action plan, but we want to you start thinking about that application in your role and in your area of change. And I love that Lisa's nodding so beautifully, because she's in every sector as far as I can tell, and in every role. So she's a, like, one-man show here. She's the miracle. Are you a disability coordinator, too?

No? Okay. So if you're in the virtual audience, if you could just note a particular challenge you see and maybe a facilitator you see to leading change in this area. And we're going to introduce a mechanism for continued conversation when we get to the end, so if you're going to feel frustrated, which you probably do, like, "How do we have time to make a plan of change here in this short amount of time?" Don't

worry. We're going to give you another opportunity at that. But we're going to be quiet and let everybody silently write and think.

And then if you have a chance to pair and share a little bit, please do. And if you're on the virtual group here, please put your comments in the chat box. Okay, if you'll wrap up your pair and share in just about 30 seconds, we'll move on in lightning speed... [Laughter] ...here. I hope everybody kind of thought creatively about the context for your change you're going to make. And we'd love to hear from you. And those of you who virtually are doing this and putting it in the chat box, we'll be so appreciative of that, because we're not really able to hear back from our live audience. Okay. So, we're now going to move into the implementation science part of this presentation. Drawing from our colleagues in the National DTL Center at FPG who are part of the NIRN team, the National Implementation Research Network. And they've been generous in sharing some of their slides with us. We know that inclusion is important. We know we have policies, we have research. We know you all play an important role. We know that people like Jackie need a lot more than they're getting right now, and the disability coordinators do, too. So how do we then take this journey together with a very intentional and systematic view of how to move forward over, let's say, the next four or five years together?

Because we need to take that long view. It won't happen overnight if it hasn't happened in the last decade. Okay, so, implementation science, and only a couple of you raised your hand that you've heard about it, so I want to just give the teeny-tinsiest of descriptions. Again, drawing your attention that there is an active implementation hub that is available for you to all learn more about it. And if our colleagues from NIRN were here, they would be probably presenting on this. So apologies if I'm really glossing over things. But, basically, implementation is about the miracle. Because on one side, we have research. On one side, we have practice. And we now have a science about what it takes to get from research to practice. We've learned a ton through the work of our colleagues. So we know from research that the reason practices aren't implemented have to do with things like, well, we have these practices, but we roll them out and people don't really learn them very well. So they don't implement them with what we call "fidelity." They do their own home-spun version, which isn't the one that got the validation through research. Or maybe one teacher takes this on, and they're doing a great job. And it's going well, and then they leave. And, so, the practices disappear.

So, often you hear, "Oh, we tried the CSEFEL approach, the pyramid teaching model, or we tried inclusion, it just didn't work." So these are some of the reasons that it might not have worked. We also know that we might have what I might call a pocket of excellence. Like one really solid program in the community, but it doesn't translate out to all the programs. We have a pocket of excellence that we take people to, like Sangeeta visited and wanted to see a high-quality inclusion program. There's this one program, and we all take everybody to it to see it. But it's sad in the triangle area that we don't have all programs, that we couldn't say, "Sangeeta, you just take your pick." So we have pockets of excellence. And that's another reason. So, then, what we have happen is people say, "We tried it, it didn't work." And, so, now we know that we can't just put in place a few strategies. Like we can't just have webinars, we can't just have workshops, we can't just have laws, we just can't have funding, we can't even just have systems change. We have to have it all together.

Any one piece does not equal the use of these practices we're trying to support. So if we don't have everything in place, the return on the investment like all the money being invested in this National DTL Center, if we don't take a holistic approach and work with you all as our partners, in five years, y'all will

look around and say, "What did they ever do?" "Well, we got a couple of ideas or something." We don't want that to happen. Okay? So here's the formula for success that our NIRN colleagues have put together. And it's a simple multiplication table. You see at the end of that table is our north star. We're all going for child outcomes. And we have a definition of those child outcomes in the early outcomes framework we'll touch on. It's a fabulous document. It's our north star. That's what we want for all children. But to get there, and our slides are not animated anymore, correct? So -- will they do the little circle?

Oh, goody. To get there, we need -- oh, but they're not. Aah! Can you go back? Thank you. I don't know how to go back. We need in place -- can y'all go back to the multiplication table for us? Ah! Thank you. We need in place the effective practices implemented with fidelity. We need these strategies I'm going to share in a minute very briefly, implementation strategies, and we need enabling contexts. We need Jackie and the disability coordinators to be in a context that is really supportive of them implementing the practices. And what do y'all know about multiplication? You know, from grade school. If any of these little things that are being multiplied are zero, what's the outcome of the problem? It's zero. So 2 times 0 times 2 is not 4, it's 0. We need to have every single component in place for this to work. So, I mentioned the ELOF. If Sangeeta were able to get her two cents in now, she would be talking about this. It's fabulous, and we'll say we're not gonna teach on it or talk about it very much. Oh, Sangeeta wants to say a couple of words. Yes, thank you.

Sangeeta: Yeah, sure. So, who here is familiar with the Head Start Early Learning Outcomes Framework?

Pam: Everybody is raising their hands.

Sangeeta: Who here knows that it's interactive on the ECLKC? A couple of you. So, I actually have it downloaded on my smartphone. I pull it up a lot, and I really like how interactive it is. I often will use it with my 1-year-old at home, which gives you a little bit of indication of where he's headed down the road from me gathering research on him, but I really like using it. So basically, it's interactive and clickable. So you'll see that these are the main central domains here. So if you pick social and emotional development, for example, you could click on that, and then it would fall into different subdomains and different categories.

There's this section called indicators which I really like. And I want to emphasize it's not a checklist, but it is a way for you to see what are we really talking about when we say social and emotional development. What behaviors are we really trying to be attuned to? So, for those of you who are in the classroom looking at the child and saying, "Okay, well, I still don't really know if they're falling under this appropriate developmental progression around social and emotional development." You can point to those particular behaviors and get a sense for what we're actually talking about. So I think that it's highly useful in a variety of areas, including, you know, aligning with your curriculum, also when you're assessing a child. So definitely can be used in a variety of ways with, I think, most of the staff in your program.

Pam: Yeah, wonderful. Sangeeta has mentioned the indicators. I think this is, to me also, one of the most important parts. Because when you have the ELOF and you're doing LEA collaboration and you're talking to specialists, the indicators are the place where you're coming together and you're saying, "Where is this child, and what are the goals on the IEP, and how do they map on to these indicators, and how do we help think about our progression over time, and how do we communicate with families in

looking at children's outcomes?" So I really think, although it was developed by Head Start and it's known as the Head Start ELOF, I look at it as our national outcomes framework. I think we should all embrace it across all of our sectors and move forward with it.

Sangeeta: I agree, and I think what is also pretty unique about this is that in our previous framework, it was just ages 3 to 5, but now it's actually expanded birth to 5, so, yay! There's some folks clapping in the audience, so, remember, our infants are also on that developmental progression, can be hitting certain milestones.

Pam: Excellent point, Sangeeta. So here's our formula for success. And now we're moving from the outcomes to the practices. And sometimes I've heard people say, "We need to implement the ELOF." And I say, "You actually don't implement outcomes, but you implement practices associated with those outcomes." So what do we know about the practices? I said we have had decades of research about the practices. And I want to share with you how they fit within this Head Start world. How many of you are familiar with this, known as the house? I see a lot of hands raised. Great. So this is a framework for thinking about research-based practices and resources. And I think if I had a pointer, I would be pointing at the bottom of the house. The nurturing, sensitive, effective interactions in engaging environments. That's the foundation. Each and every child, that needs to be in place. That's the foundation of quality. And you often in some of the ECERS and some of the basic observational scales in early childhood, it's really focused in on that basis, that basis of quality. And then, in the middle, and this is in addition to the house, and Sangeeta mentioned the expansion to really thinking about zero to 3. You see families are really the center of the house.

You see on one left-hand side pillar, the research-based curriculum, a very intentional curriculum that needs to be in place. And on the right-hand side, you see the screening and ongoing assessment, child assessment, and this is so important. Because this is about the idea that teachers are good decision makers. They're constantly collecting information on children and on their own performance. And that's telling them which children need that additional support to succeed. And that's what leads up to the roof of the house. And those are the highly individualized, intentional, intensive, sometimes teaching and learning strategies. So it's a very important schematic. If you're familiar with the notion, the multi-tiered systems of support, our response to intervention models, where you're constantly collecting data and you're constantly adjusting your curriculum and modifying it, so you're really reaching each and every child, especially those that might need more help, this is a model.

So we're going to focus in for a minute on that roof. Oh, we missed our animation there. And we're going to say there is research-based evidence for the practices that we need to focus on. And they come from the Division for Early Childhood Council of Exceptional Children For two years, three years now, a commission of us have been working on defining those practices in these eight topical areas. This is my arbitrary division. Some of them are more focused on children, and that's the instruction, assessment, interaction, environmental practices, and some of them are family and systems focused -- teaming, transitions, families, and leadership. So it's not just about classroom based or home based. It's broader. It brings in you guys. As leaders, what practices should you know about and be doing? I'm going to gloss over this. I want to say one thing about this slide. These practices are not disability specific. We heard a little bit yesterday that people were wondering about, well, what are the practices for children with autism? What are the practices for children with hearing impairments? Back when I was a graduate -- I don't know. Never mind. But sometimes there were these labels where you said, "Okay, children with

this disability need this." We have totally moved away from that. We now think about functionality and functional assessments.

And these are practices that are about meeting children's needs regardless of their labels. And labels really don't tell much of a story anyway. I also want to say they build on the NAEYC, National Association for the Education of Young Children developmentally appropriate practices. They build on those. There's a real natural mix there. And this is just to show an example of how the outcomes and the practices are related. Because you can't implement the ELOF. You can't implement a social and emotional outcome, but you can implement practices that lead to those social/emotional outcomes. Here we have a couple of examples of DEC recommended practices in the area of interaction that map on to social/emotional development. And it's all about what teachers or practitioners do, that they observe, interpret, respond contingently to the range of children's emotional expressions. And the second one that we've used as an example is teachers or practitioners encourage the child to initiate or sustain positive interactions with other children and adults during routines and activities through modeling, teaching, feedback, and other types of guided support.

There's a lot packed into these practices, and I am just glossing over them. In our workshop yesterday, Carla and Tracy were able to really help us dig into them. So, whoopsie. Okay. We are going to show now an example of one of the many practices. This one is the interaction practice number three, practitioners encourage children to initiate or sustain positive interactions with other children during routines and activities through modeling, teaching, feedback, and other types of support. And you're going to see a child being guided by a teacher in a peer support context, where you're going to see this young man, Luke, who you met and that Jackie was worried about. And you're going to see Ava, who's on the left being supported by Jackie to enter a water play. So let's roll it, Hollywood. [Chuckles] That's so awesome how they can roll it.

Woman: This video clip shows Luke, a 3-year-old boy with language delays, at school. His teacher is prompting a classmate to introduce Luke to a new water play activity. [Laughter]

Jackie: Can you say, "Here, Luke. Here's the ducky. Look, Luke."

Ava: Here's the ducky.

Jackie: Look, Luke. Look, Luke. Ava's giving you the ducky, Luke. Look. Say, "Thank you." He said thank you.

Boy: Here you go.

Jackie: Luke? Luke? Ava, come get Luke to the water. Can you take Luke to the water? Tell Luke, say, "Come on, Luke." Come on, Luke. Go with Ava. Walk him through the water, Ava. It's over here. Walk him through.

Boy: I want to walk in the water.

Jackie: Go ahead. Did you like it, Luke? Do you want to do it again? Ava, do it again. Take him back through. Edward, watch out. Stand back some, Edward. Come on.

Boy: I want to go over here. I want to go!

Pam: So, what did you see happening there, those of you in the room? A little shout-out, what was the teacher doing to make that happen? Yeah, she was doing a lot of peer support. Anything? Hmm? Modeling. Yeah. Verbally cueing, yes. And probably those of you in the virtual learning space out there, if you put in your ideas, that would be great. We'd like to get that information from you. Just a quick story. Luke is now 11 years old. We saw his mother and new baby the day before yesterday. They've moved to Chicago. We hadn't seen Luke since he was about 4 years old. And we said, "What are Luke's interests? How is he doing? What's he doing?" She said it's amazing. He has two introverted parents, but what his interests are are people. He loves people. He loves engaging with people. She said, this gives me chills, "Does it go back the support he got to be friends with Ava and to participate fully in that inclusive environment when he was little?" So think about that as you think about your role. So important. So we have another video to share. It's adorable.

You can find it online. These are all available to you. They're free for downloading. We aren't going to be able to share it, because we need to move on. But honestly take a look at it when you have a chance. Again, it's a demonstration of embedded instruction. So we're going to move back to our formula for support right here. Thank you, guys. And we have looked at the outcomes. We've looked at the practices. We have this right here, the DEC recommended practices. And we've looked at joint policy statements on inclusion. And so we have not yet -- there we go. So there's a box left there that we do not want to leave in a zero mode. So we want to now move to your plan, and what are your next steps in terms of supporting the implementation of these practices. But before you make notes on your plan, we want to share a few lessons from implementation science, that formula of success. So this is a very quick nutshell of what we know from implementation science.

But we know that making changes takes time. And when I say time, I don't mean a month. I mean, several years to move from one place to another place. I want to tell you something really shocking that happened yesterday. We were in a room with maybe 250 folks, disability coordinators, and Carla and Tracy showed a lot of information on these practices and videos and demonstrations, and we said, "How many of you see teachers in Head Start programs implementing the practices we're sharing?" Two hands went up. Two hands. And I said, "Okay, let's imagine in five years, we're all together, an aspirational goal would be that all of you would raise your hands." So how do we take a step back and say, "We can't just keep going with the status quo." It's not going to happen. It's not going to be a miracle unless we're part of it. So we need to take advantage of what do we have left, Sangeeta, in this National DTL Center? We have two, three years left?

Sangeeta: Yeah, that's right.

Pam: Three years, we want all those hands to go up. It also takes a village. That means all of us. We can't let it rest on Jackie's shoulders. We can't let it rest on the disability coordinator's shoulders, and we can't let it rest on our shoulders. We have to do this work together. It takes support. It's great having the support of Sangeeta and the office of Head Start. But Jackie is way down in the trenches. She needs support. You told us what she needs -- professional development and all kinds of things. And then it takes communication. We need more opportunities to hear from you and to learn from you and then to keep this feedback loop going of what and how we can support your work. And so I'm going to now turn to Chih-Ing, and you all in the A and the V are saying, "What the heck are they doing?" We're skipping some stuff. Don't worry. We're going to slide number 51. But if you don't get there, it's fine. Because there's a nice sign outside where Chih-Ing's going to direct us. So, Chih-Ing, how are we going to keep

the village alive? How are we going to keep the support alive? And how are we going to communicate beyond today?

Chih-Ing Lim: Okay. How many of you are already on MyPeers? Okay. Wonderful. MyPeers is an online space for networking and peer support. Within MyPeers, there's a disabilities and inclusion network community that you can join. If you haven't joined that community yet, you can look at the screen right now, and you can register. And what we will do is we'll post the PDF of today's presentation there. And then on the back of the presentation slides, we have a page with resources on it. So that's where you'll be able to find the AI Hub that Pam mentioned, the two Federal webinars that Pam mentioned, and other resources, such as the CONNECT Modules, so that you can get to it to get the handouts, get video clips of the video demonstrations of practices. And another exciting thing that's coming to the ECLKC website is a collection of resources on evidence-based practices, as well as evidence-based practices, just a whole range of resources. So these resources will be organized around the eight topic areas of the DEC recommended practices that you heard briefly today. So we'll send an e-blast out once it's out there on the website. And this is the resource page that you can get to. So once we post it up on MyPeers, you can access all of them. And if you need CEUs today, you can see Patty over there, she'll help you get registered for it.

Sangeeta: And, Chih-Ing, just a quick question for you. So you mentioned the resources page, this one here, which is great. Is the CONNECT resources where we can find downloadable videos? Chih-

Ing: Yes. Mm-hmm.

Sangeeta: Okay. So I think that I've been hearing just anecdotally that oftentimes those videos can be really helpful. You can download them. You can have them on your iPad. This has been great for home visitors, it's been great in the Home-Based Program Option, but also in the center-based, So I would highly encourage you to look there for some of these great videos.

Chih-Ing: Mm-hmm. Yep.

Pam: Oh. We're sort of at the end of our time. We so appreciate you all in the room, but we really also so appreciate you all who are virtually participating. There's one question here we can easily answer, so I'll quickly do that, just to show that we are really reading these questions. The question is, can we count 504 children in our 10%? The answer is no. They don't count. But that's one that can easily be answered. Your questions are nuanced. They're very important. Some of them take more thought than we can give right now up here as we're shuffling them back and forth. And, mainly, we've run out of time. We wish we could spend kind of the rest of the day with this group, but we really want to thank you for coming. And we look forward to hearing from you. And we hope that the action plan you just got started with is something you'll take with you and bring back to your program. And we support your leadership for change. Because we're excited to be talking to you guys, the leaders, the policy makers, the folks with the management, and the money, the authority, and the expertise to make change happen for inclusion. So thank you so much. See you later.

Bye-bye.

[Applause]