

# Involving Families in State Personnel Development

*Preparing for Success*

A STEP-BY-STEP GUIDE





# Introduction

The purpose of this guide is to describe processes, procedures, and resources to meaningfully engage diverse family leaders in state personnel efforts. This engagement could be, but is not limited to: a Comprehensive System of Personnel Development (CSPD) team member, trainer for state professional development system, and family faculty at an Institute of Higher Education (IHE). This guide highlights the essential elements needed to support meaningful family engagement in state personnel efforts.

## **This step-by-step guide will provide strategies to engage family leaders in state personnel preparation efforts and includes:**

- **Tips to build** family leader confidence and competence to meaningfully engage in state Personnel Development (PD) system.
- **Tips to involve** family leaders in the Early Intervention/Early Childhood Special Education (EI/ECSE) workforce development, beyond just telling their story.
- **Identification of resources** family leaders can use to develop skills to serve as part of the state, regional or local training team.
- **Strategies** to prepare family leaders to be successful in the following areas:
  - Developing a training model that includes family leaders as part of the training team on an ongoing basis (not a one and done)
  - Creating pathways for family leaders to have input in state PD systems
  - Providing an avenue for peer-to-peer mentorship among family leaders



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# **STEP 1**

## **Assessing Family Readiness and Identifying Additional Needs**

In order to effectively partner as a trainer in personnel development, family leaders need knowledge about the personnel development and higher education systems in their state.

### **A. Knowledge/Understanding Needed:**

- Determine readiness to become a family trainer.
- Be able to describe how the personnel development system works in the state.

### **B. Activities:**

As a starting point, families should complete these checklists.

1. [Family Involvement Self-Assessment](#)
2. [Who's Who in your state worksheet](#) (identify the key players in the state)
3. [Locate Institutes of Higher Education personnel preparation programs in your state by exploring the Institute of Higher Education Program Map.](#)

### **C. Resources:**

- [Family Involvement Self-Assessment](#)
- [Who's Who in your state worksheet](#)
- [Overview of the EI/ECSE powerpoint](#)

### **D. Assessment/Follow-up:**

1. The checklists completed above are a framework. Each family will identify areas that need additional research in order to be up to date with policies, procedures, and timelines.
2. [Identify the EI/ECSE standards and components information and resources.](#)

#### **Why should state teams involve families in state professional development?**

*Because parents are the ones navigating all the systems that impact their child and family.*



## **STEP 2**

### **Review Federal Laws and Resources**

Not all family leaders have the same experiences, the same level of literacy, nor do they practice family leadership in early childhood special education systems in the same geographic region, or the same way. And, that is okay! We are all unique. To provide equitable, culturally responsive adult learning strategies, and provide the necessary foundational knowledge to support families in their roles. It is important that families know where to go to get more information in a format that best fits their learning style. The resources listed below are a good starting point for families who are seeking this information.

#### **A. Knowledge/Understanding Needed:**

- Be familiar with the essential elements of IDEA both Part C and Part B-619.
- Know how to find resources to reference when leading and developing training.
- Understand the connection between Part C and Part B-619 services.

#### **B. Activities:**

1. As a starting point, families should complete [The Family Involvement Self-Assessment checklist](#) and the [Who's Who in your state worksheet](#)

#### **C. Resources:**

##### **Understanding the Federal Law**

- Part C of IDEA. [Part 303 \(Part C\)— Early Intervention Program For Infants And Toddlers With Disabilities - Individuals with Disabilities Education Act](#)
- **OSEP Ideas That Work Website**
  - Infographic: [5 reasons why EI is valuable: \(ideainfanttoddler.org\)](#)
  - [Operation of an Early Intervention Program \(ideainfanttoddler.org\)](#)

#### **D. Assessment/Follow-up:**

- What questions do you have?
- Where can you go to find help?
  - [Contact your Parent Center and ask about training on the law \(understanding your rights under IDEA\)](#)



# **STEP 3**

## **Understanding The State System**

Each state program has the flexibility to customize services. Here are some resources that support family leadership development in understanding state requirements:

### **A. Knowledge/Understanding Needed:**

- Understand the early childhood intervention system within the state.
- Understand the key elements of General Supervision in early intervention.
- Identify the Lead Agency for Early Intervention (Part C) and Early Childhood Special Education (Part B/619).
- Understand family rights such as confidentiality, procedural safeguards, and right to parental involvement.
- Identify the service provision model the state uses.

### **B. Activities:**

1. Refer to the [Who's Who in your state](#) worksheet completed in Step 1.
2. Research the essential elements of General Supervision in early intervention including:
  - [Minimum components of the Part C System defined](#)
    - Child Find
    - Referral and Intake Process
    - Eligibility Determination
    - Developing the IFSP
    - Timeline to begin services
    - Ongoing Assessment
    - Transition out of Early Intervention
3. Knowing and understanding Procedural Safeguards and Family Rights.
  - Confidentiality: refer to [HIPAA and FERPA graphic](#)
  - Procedural Safeguards: know where to find a copy in the state.
    - Do you know if they are available in alternative languages, and where to find them?
  - IDEA and Family Engagement [Policy Statement on Family Engagement from the Early Years to the Early Grades—Executive Summary \(PDF\) \(ed.gov\)](#)
4. *Be able to describe the Statewide Service Provision Models ([Early Intervention Service Delivery Models](#)) and identify which model the state uses.*
  - a. *Interdisciplinary model*
  - b. *Multidisciplinary model*
  - c. *Transdisciplinary model*

**C. Resources:**

- [HIPAA and FERPA](#)
- [Sec. 300.504 Procedural safeguards notice - Individuals with Disabilities Education Act](#)
- [Policy Statement on Family Engagement from the Early Years to the Early Grades—Executive Summary \(PDF\)](#) (ed.gov)
- State's Procedural Safeguards - on the state lead agency website
- State's Parent Center: [Find Your Parent Center](#) | [Center for Parent Information and Resources](#) ([parentcenterhub.org](http://parentcenterhub.org))

**D. Assessment/Follow-up:**

1. Check for understanding of the minimum requirements under IDEA for Part C.
  - a. Are there still questions?
  - b. Where can additional help be found?



## AN OPPORTUNITY TO GROW INTO A BROADER PARTNERSHIP ROLE

**Why should state teams  
involve families in state  
professional development?**

We are who these  
professionals  
serve and  
work with.



# **STEP 4**

## **Developing Skills**

This type of work requires knowledge about the system beyond a family's own experiences. Families are not expected to know everything all at once, but need to have a strong foundation of knowledge as they begin and grow in the role. Families will need to prepare, expand their knowledge base, recruit, and support other families as needed.

Family leaders need relevant background information and training on the basics. This is not about advocacy; it is about becoming an equal partner on the team.

- [Involving Families in CSPD “The Basics”](#)

### **A. Knowledge/Understanding Needed:**

- Understand what a Comprehensive System of Personnel Development (CSPD) is.
- Understand why states need a CSPD.
- Be able to describe how a CSPD is developed.
- Identify the six (6) subcomponents of a CSPD.
- Identify what workforce development means and which personnel are required under Part C and Part B-619 of IDEA.
- Illustrate the impact of workforce development on families through storytelling.

### **B. Background information/Activities:**

#### **1. What is a Comprehensive System of Personnel Development (CSPD)**

- Comprehensive System of Personnel Development (CSPD) is a system designed to address the challenges experienced in the Early Childhood (EC) workforce, including:
  - Shortages of personnel.
  - Need for additional training at both the pre-service and in-service levels.
  - Need for alignment with state adherence to national competencies and standards.
  - Challenges faced by EC personnel due to the diverse needs of children and families.
  - Inequities of preparation and compensation among those providing services.
- An effective system must:
  - Coordinate and address state needs for quantity and quality of EC personnel and the support required.
  - Acknowledge the coordination between pre- and in-service personnel development (PD) to ensure consistency of practice.



- Stay informed through ongoing evaluation via multiple sources (stakeholder, consumers, etc.) and monitor the results and capacity to implement child and program quality standards.
- Provide opportunities for input from all stakeholders.

## 2. Why does a state need a CSPD?

- A CSPD is the primary mechanism by which a state ensures that infants, toddlers, and young children with disabilities and their families are provided services by knowledgeable, skilled, competent, and highly qualified personnel, and that sufficient numbers of these personnel are available in the state to meet service needs.
- An effective CSPD is key to promoting both effective practices and the implementation of legal requirements as determined by the Individuals with Disabilities Education Act (IDEA), which includes guidance on parental involvement and participation.

*(The CSPD is a statutory requirement for Part C. Although no longer a mandate for Part B, we continue to use the terminology because a CSPD has a lengthy and prominent history in the Individuals with Disabilities Education Act (IDEA).)*

## 3. How are CSPDs developed?

- The ECPC collaborated on the development of the [Personnel/Workforce Component](#) of the Early Childhood Technical Assistance Center (ECTA) Early Childhood Systems Framework (<https://ectacenter.org/sysframe/>) to create this system.
- The ECTA EC Systems Framework design assigns subcomponents to every component, and quality indicators to each subcomponent. This framework ensures the main component is being addressed successfully at every level.

## 4. A CSPD has six subcomponents:

- Leadership, Coordination, and Sustainability
- Recruitment and Retention of Personnel
- Personnel Standards
- Pre-Service Personnel Development
- In-Service Personnel Development
- Evaluation of the System

## 5. What does workforce development mean and who are we talking about?

- Qualified personnel means personnel who have met state approved or recognized certification, licensing, registration, or other comparable requirements that apply to the areas in which the individuals are conducting evaluations or assessments or providing early intervention services.

**Why should state teams  
involve families in state  
professional development?**

Sharing lived  
experience!!!



## Comprehensive System of Personnel Development



Each system must include policies and procedures relating to the establishment and maintenance of qualification standards to ensure that personnel necessary to carry out the purposes of this part are appropriately and adequately prepared and trained. (<https://sites.ed.gov/idea/regs/c/a/303.13>)

Qualified Personnel Identified in IDEA			
Part C (Ages 0-3)		Part B-619 (Ages 3-5)	
1) Audiologist	11) Special educators, including teachers of children with hearing impairments (including deafness) and teachers of children with visual impairments (including blindness).	1) Special Education	i) Pediatricians and other Physicians, except that such medical services shall be for diagnostic and evaluation purposes only
2) Family therapists	12) Speech and language pathologists.	2) Related Service Personnel:	
3) Nurses	13) Vision specialists, including ophthalmologists and optometrists.	a) Speech-Language Pathologists and Audiologists;	
4) Occupational therapists	14) Other	b) Occupational Therapists;	
5) Orientation and mobility specialists		c) Psychologists;	
6) Pediatrician and other physicians for diagnostic and evaluation purposes		d) Physical Therapists;	
7) Physical therapists		e) Recreational Therapists;	
8) Psychologists		f) Social Workers;	
9) Registered dietitians		g) Counseling services;	
10) Social workers		h) Orientation and Mobility Specialists, and	



### C. Resources:

- [Sec. 303.118 Comprehensive system of personnel development \(CSPD\) - Individuals with Disabilities Education Act](#)
- Overview for each of the components of a CSPD – building a system.
  - [Involving Families in CSPD “The Basics”](#)
- Comprehensive System of Personnel Development (CSPD): [Develop a State CSPD | The Early Childhood Personnel Center \(ecpcta.org\)](#)

### Presentations to provide additional background information:

- [Developing a Comprehensive System of Personnel Development overview](#)
  - CSPD is a **necessary and integral** quality indicator of an early childhood service system **AND** the early childhood workforce who serve infants, toddlers and preschool children with disabilities and their families.
- [EI/ECSE Standards overview \(powerpoint\)](#)
- [Cross-Disciplinary Competency Areas and Indicators](#)
- [RPs - DEC Recommended Practices Home | DEC \(dec-sped.org\)](#)
- [Adult learning practices](#)

### D. Assessment/Follow-up:

1. Check for understanding and identify additional training needs.
2. Begin working on the ECPC storytelling activity.

## STEP 5

### Using Family Stories to Teach

Learning to use stories to teach is different than telling a story for advocacy. This section will highlight strategies to develop family stories for trainings.

#### A. Knowledge/Understanding Needed:

- Craft a story based on experience(s) as a family member of a child with disability that demonstrates successes or challenges highlighting one or more of the EI/ECSE standards and/ or the DEC Recommended Practices.

#### **Why should state teams involve families in state professional development?**

Because parents are the number one educator, provider, supporter of their child. They will ultimately be the ones who have the greatest impact on the child's future and success.

**B. Activities:****Crafting the story (use the Using Your Story to Teach Toolkit)**

- Focus on one aspect of the story targeting the priority topic.
- Are there pictures or a video that illustrate the message?
- What format should be used? (ppt, google slides, etc.)
- Use the Story Rubric Self-Assessment to reflect on the story elements.
- The most important tip is to be prepared and know the message.
- Share the presentation to be sure that the message is clear and accurate.
- Make sure the presentation is related to the topic of the training.
- Be prepared.
  - How long is the presentation?
  - Will the presentation be face to face or virtual?
  - Will the presentation be live or pre-recorded?
  - If pre-recorded, who will facilitate follow up questions?

**C. Resources:**

- Checklists to refer to in this chapter:
  1. [Who's Who in your state worksheet.](#)
  2. [Family Involvement Self-Assessment.](#)
  3. [Acronym list.](#)
  4. [Using Your Story to Teach Toolkit.](#)

**D. Assessment/Follow-up:**

- Will there be an evaluation for the presentation?
  - Share results with the family so they prepare for ongoing presentations.
- Revise the presentation based on feedback.

**NOTE:** *Not all family stories are positive, but all family stories can be delivered in a positive framework.*

- If the experience was not positive, communicate lessons learned and share strategies to be done differently in the future.
- Do not shy away from conveying that the words and actions of providers have life-long impact on families. *(please share an example of what was said and how it could have been shared differently).*
- Help practitioners understand the importance of empathetic communication.



Early Childhood Personnel Center

[www.ecpcta.org](http://www.ecpcta.org)

# State Administrators and Training Teams

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## STEP 1

### **Assessing Beliefs and Practices to Engage Families as Trainers**

Before states can effectively involve families in personnel development, state teams will need to reflect on current attitudes and levels of commitment from necessary stakeholders within their systems.

#### **A. Knowledge/Understanding Needed:**

- Is the state invested and committed to involving families in the state PD system?
- Does the state system believe that families can be a critical component to the state PD system, through their lived experience to offer more than just their own families family stories?
- Does a funding mechanism exist for family trainers. Is the process clearly spelled out?
- Has the team reflected on any implicit/explicit bias about families in general or specific families?
- Recruitment:
  - Do you have a structure in place that supports recruitment of a diverse cadre of family trainers reflecting the experiences of families in the state?
  - Do you have a structure in place to define how families will be intentionally and effectively embedded as a part of the state PD system?

#### **B. Resources:**

- Refer to the [Effective Family Partnerships chart](#).
- Use the [Ethical Decision-Making Tool](#) to help answer the questions above and determine what steps are needed to move forward.

## STEP 2

### **Assessing Mechanisms to Support Families as Trainers**

Structures for supporting family participation need to be considered before recruiting diverse family members who can contribute their unique expertise.

#### **A. Knowledge/Understanding Needed:**

- Do you have a structure in place for communication and support?
  - Is there a contact person for questions?
  - Is there anyone available for mentoring?



- What is the payment mechanism for involvement?
  - What paperwork is required?
    - Who administers payment?
    - Is this administered as a contract or stipend?
    - W-9 required?
    - Other paperwork?
  - Is it clearly spelled out what expenses are covered and timelines for invoice submission and payment?
    - Details of reimbursement: What is covered? (e.g. preparation time, training, travel time, childcare, follow-up meetings, etc.)
    - Be sure to provide an invoice template. (Sample template in appendix)

**B. Resources:**

- [Invoice Template](#)
- [Form W-9](#)

## STEP 3

### **Reviewing the Essential Components of the State Training Model**

Family partners will require relevant background knowledge related to EI/ECSE in order to meaningfully impact personnel development systems in their state. In addition to any experience and insight family members bring with them, they will require additional training for a successful partnership.

**A. Knowledge/Understanding Needed:**

- Does the state have a detailed training model?
  - What training is currently provided for trainers?
- Is there a facilitation training offered for trainers?
- Is the Vision and Mission for the state EI/ECSE clearly defined and shared?
  - Current state landscape of the Early Childhood Intervention (ECI) system and Early Intervention/Early Childhood Special Education (EI/ECSE)
  - Review any strategic plan or logic models developed by the state ECI or Interagency Coordinating Council (ICC)
- Understanding the state PD system – what does the system look like?



- Is there a training calendar or menu of trainings?
- What is the purpose of the state PD?
- Who is the intended audience of the training?
  - New staff (onboarding).
  - Current staff (refresher).
  - How often is it required? Or is it one and done?

#### **B. Resources:**

- Identify what training materials currently exist and if there are any outside training opportunities that the state can leverage for family presenters.
- Vision and Mission for the state EI/ECSE.
- Strategic plan or logic models developed by the state or Interagency Coordinating Council (ICC).

## **STEP 4**

### **Providing Information to Family Trainers**

Families need enough details about the opportunity they are being offered so that families can make an informed decision about their participation.

#### **A. Knowledge/Understanding Needed:**

- Provide background information to the family.
  - Clearly explain the role of the family trainer.
  - What is the time commitment?
  - What is the expectation?
  - Where are the trainings held? (face to face or online)
  - What is expected, how many trainings is the family required to attend or participate in?
    - Beyond telling the family's story.
      - Refer to [Effective Family Partnerships](https://ectacenter.org) chart (ectacenter.org).
      - [Family-Centered Practices Checklist](#).
  - Utilize the [Administrator Self-Assessment to measure state's family/stakeholder engagement](#).
- How often are the trainings?
- Is there a mentor to support the family trainer?
  - The state lead may need to reach out with the parent center or another family organization to recruit a parent mentor.

**B. Resources:**

- [Effective Family Partnerships chart](#).
- [Family-Centered Practices Checklist \(ectacenter.org\)](#).
- [Administrator Self-Assessment to measure state's family/stakeholder engagement](#).
- [Find Your Parent Center | Center for Parent Information and Resources \(parentcenterhub.org\)](#).

## STEP 5

### Identifying Needs of Family Trainers

At this stage, there should be a conversation with the family trainer to see if they need assistance with additional tools such as putting together a PowerPoint, slide deck or storyboard.

**A. Knowledge/Understanding Needed:**

- Identify key points the family should include in their story (there should be a pre-determined list of key points).
- Are they prepared to facilitate follow-up questions?
- Will this be recorded? This could be a good training tool for the family trainer to learn what they may want to revise for the next training (what worked and what could be done differently during the presentation).

**B. Resources:**

- [Facilitating the Discussion After a Presentation \(Tip Sheet\)](#).

**Why should state teams involve families in state professional development?**

Families best understand the gaps in the services they've received

**Why should state teams involve families in state professional development?**

Constructed to serve a purpose. Families are organic. Their needs change over time and are based on society, socioeconomic, policies, and so much more... life in general. Do we want to create systems that don't support those who it's supposed to help?



# APPENDIX A

## Training Basics:

- **Conflict:** How to handle conflict with a participant at a training – be prepared.
  - What to do if you disagree with a participant’s comment or statement?
    - Tip Sheet: [Top 10 De-Escalation Tips](#).
- **Critical Thinking** – awareness of personal attitudes/biases, and philosophical, emotional, or ethical beliefs that can impact a relationship. [Critical Thinking | SkillsYouNeed](#).
- **Family Centered Practice in ECI** – Delivery of equitable, culturally competent and family responsive early childhood intervention that respects and facilitates a family’s active partnership and participation in the assessment, planning, implementation, and monitoring of the interventions delivered to their child and themselves. [Family-Centered Practice | The Early Childhood Personnel Center \(ecpcta.org\)](#).
- **Effective Communication Skills** – [9 Effective Communication Skills \(habitsforwellbeing.com\)](#).
  - Taylor, J. (2015). 9 Effective Communication Skills. Available from: <https://www.habitsforwellbeing.com/9-effective-communication-skills/>.
- **Teaming to develop an IFSP/IEP** – tips to involve families in the process.
  - [Writing the IFSP for Your Child | Center for Parent Information and Resources \(parentcenterhub.org\)](#).

## Effective Communication Skills:

Facilitating the discussion after the presentation: Develop a list of questions to ask (or question prompts). It is not enough to ask the question; you have to know why you are asking it and how you hope the question will enhance the participants’ learning experience.

- **Fact Finding Questions** “Who, What, When, Where, Why, and How questions” At the end of a training, facilitators often ask these kinds of questions to get a sense for what the participants took away.
- **Illuminative Questions** help participants connect their own relationship to what is being shared. These are often the questions that expose a participant’s emotion regarding the story. An illuminative question will often have the word “**feel**” in it as in “How does this make you feel?” or “What do you find most challenging about the...?”
- **Introspective Questions** help participants examine their own beliefs, values, and assumptions: They are the *so what* questions that help people make sense of situations. They are the questions that require personal reflection as in “How does this change how you want to show up as a practitioner?”
- **Decision-Making Questions** When you need a group to take action, using decision-making questions can help move the process along. Decision-making questions are like: “What do we need to start, stop and continue to make this a success?” or “What are the next steps?”



The key to being good at asking questions is being skilled at listening- at having a natural curiosity about what others think. Strong question-askers have a desire to dig deeper into others' perceptions and beliefs. When participants know that you are not just asking questions for the sake of asking questions but because you actually want to hear the answers – you will create a learning environment that is engaged and energized.

**Things to remember:** One size does not fit all – what does this mean? (*families have different experiences, even within the same program or within the same region of a state*)

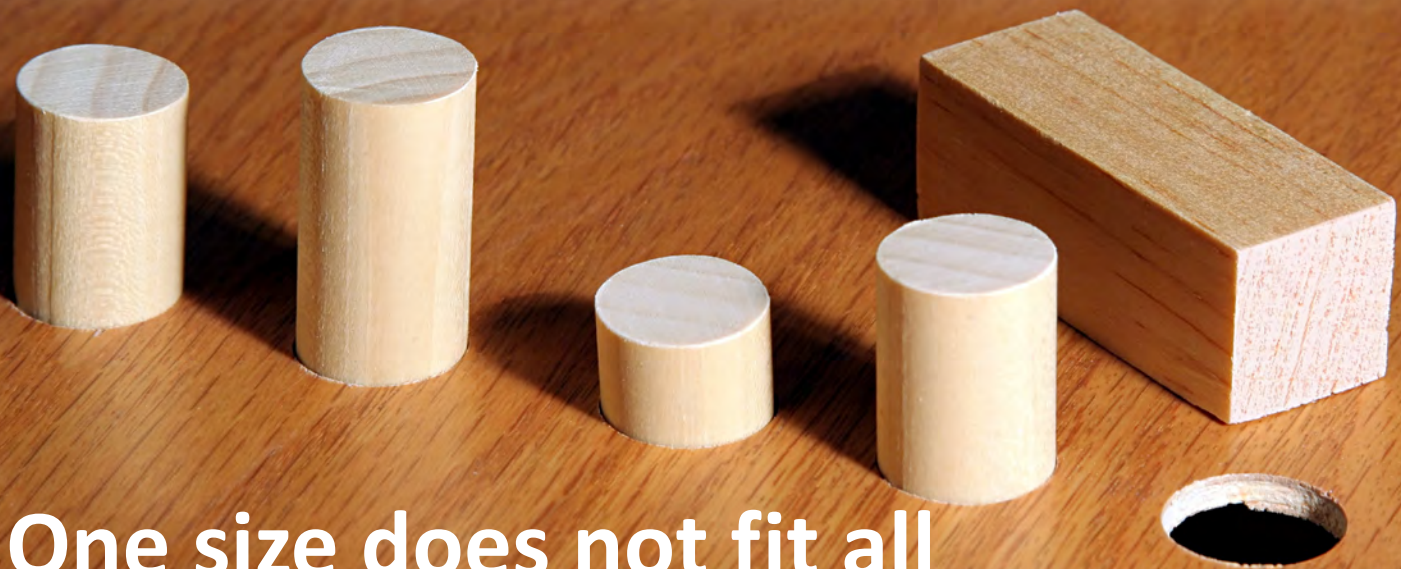
- As stated in the introduction, you need to be familiar with the current processes (eligibility, service delivery, and transition, etc.).
- Is there a state sponsored training or class that you could attend? (Would seeing a training before doing one help you? If so, attend.)
- *In order to be successful, you will have to do your homework.*

**Why should state teams involve families in state professional development?**

We are the families that the professionals are serving.

**Why should state teams involve families in state professional development?**

So that they will know how best to serve families. Services should be about families if not then goals will not be achieved. It would not be best practice.



**One size does not fit all**



# APPENDIX B

## Commonly Used Terms:

*(need to be familiar with these so you can explain them to someone else).*

- **Communicating With and About People With Disabilities:** terminology is not a one size fits all. <https://www.cdc.gov/ncbddd/disabilityandhealth/pdf/communicating-with-people.pdf>.
- **Culture:** from *Merriam Webster*: the customary beliefs, social forms, and material traits of a racial, religious, or social group.
  - **Cultural awareness:** The National Center for Cultural Competence defines “cultural awareness” as being cognizant, observant, and conscious of similarities and differences among and between cultural groups (Goode, 2001, revised 2006). According to Winkelman (2005), awareness of cultural differences and their impact on behavior is the beginning of intercultural effectiveness. He states that “cultural self-awareness includes recognition of one’s own cultural influences upon values, beliefs, and judgments, as well as the influences derived from the professional’s work culture”. (Gilbert, Goode, and Dunne, nd.) [NCCC | Foundations of Cultural & Linguistic Competence](#) (georgetown.edu).
  - **Cultural brokering:** Cultural brokering has been defined as “ the act of bridging, linking or mediating between groups or persons of different cultural backgrounds for the purpose of reducing conflict or producing change.” (Jezewski, 1990). [National Center for Cultural Competence](#) (georgetown.edu).
  - **Cultural competence:** requires that organizations have a defined set of values and principles, and demonstrate behaviors, attitudes, policies, and structures that enable them to work effectively cross-culturally,
    - have the capacity to (1) value diversity, (2) conduct self-assessment, (3) manage the dynamics of difference, (4) acquire and institutionalize cultural knowledge, and (5) adapt to the diversity and cultural contexts of communities they serve; and
    - incorporate the above into all aspects of policymaking, administration, practice, and service delivery and systematically involve consumers, key stakeholders, and communities.
    - Cultural competence is a developmental process that evolves over an extended period of time. Individuals, organizations, and systems are at various levels of awareness, knowledge, and skills along the cultural competence continuum. (Bronheim and Goode, 2013). [What is Cultural Competence & How is it Measured?](#) (diversityofficermagazine.com).
  - **Cultural humility:** Tervalon and Murray-Garcia coined this term in a 1998 article, in which they conclude “Cultural humility incorporates a lifelong commitment to self-evaluation and critique, to redressing the power imbalances in the physician-patient dynamic and to developing mutually beneficial and non-paternalistic partnerships with communities on behalf of individuals and defined populations.”

**Why should state teams involve families in state professional development?**

Particularly in pre-service education, families can shine a light on what practice looks like.



- **Disability culture:** as a unique cultural expression of advocacy and acceptance. Create pathways where unpacking ableism, intersectionality and the history of advocacy and self-advocacy activated in the passage of several federal and local laws, including the IDEA.
- **Diversity:** The celebration of difference.
  - The recognition and celebration of differences.
  - Acknowledging the uniqueness of identity and thinking and valuing both.
  - The alignment and interweaving of a variety of dimensions of these differences.
- **Equity:** Equal access to opportunities to reach full talent potential.
  - Ensuring everyone has access to the resources they need to be successful, which may not be the same for each individual.
  - Equipping the individual for success.
  - Aligning disparities in access.
- **Family Engagement:** How is this defined in your state?
  - Does the state have a family engagement statement?
    - U.S. Department of Health and Human Services, U.S. Department of Education Policy Statement on [Family Engagement from the Early Years to the Early Grades](#).
- **HIPAA and FERPA:** [How are they different?](#)
- **IDEA** – Individuals with Disability Education Act: how this can be used positively and not so positively – cannot be used as an excuse to not provide services [Individuals with Disabilities Education Act \(IDEA\)](#).
  - Part C of IDEA – Birth through two, [Appendix A to Part 303—Index for IDEA Part C Regulations - Individuals with Disabilities Education Act](#).
  - Part B/Section 619 – Pre-School (three- to five-year-old), [Section 1419 - Individuals with Disabilities Education Act](#).
- **Inclusion:** Inclusion is the meaningful representation and consideration of diverse groups. It is not enough to have simply different types of people at the table. We must take into account people's specific cultural needs and undo systems of oppression. Meaningful inclusion interrogates the systemic issues that impact diverse groups through including representatives who can speak to barrier and inform progress from their position of lived expertise.
- **Teams:** a variety of teaming models are used in state systems, you need to know.
  - **Inter-disciplinary team** - integrating knowledge and methods from different disciplines, using a real synthesis of approaches.
  - **Multi-disciplinary team** - a group of individuals from multiple disciplines who meet to pursue a common goal.
  - **Trans-disciplinary** - team composed of members of a number of different professions cooperating across disciplines to improve practice and outcomes with families.
  - **Primary service provider** – transdisciplinary team that selects a lead provider to serve as primary point of contact with the family.

### Why should state teams involve families in state professional development?

*Families are the ones in the experience. We have a voice. We must be allowed to give our expertise.*



# APPENDIX C

## Resources Developed By ECPC:

- [Acronym list.](#)
- [Administrator Self-Assessment to measure state's family/stakeholder engagement.](#)
- [CSPD One Pager CSPD Overview \(ecpcta.org\).](#)
- Comprehensive System of Personnel Development (CSPD): Overview [Develop a State CSPD | The Early Childhood Personnel Center \(ecpcta.org\).](#)
- Using Your Story to Teach – [Toolkit.](#)
- [Cross Disciplinary Competencies and Indicators.](#)
- [Early Intervention Service Delivery Models.](#)
- [Ethical Decision-Making Tool](#) (Rud Turnbull) as an example tool.
- [Facilitating the Discussion After a Presentation](#) (Tip Sheet).
- [Effective Family Partnerships chart.](#)
- [Family Involvement Self-Assessment.](#)
- [Invoice Template](#) – sample for family reimbursement.
- [Effective Family Partnerships.](#)
- [Resources to Connect to Family Organizations](#) in the State.
- [Who's Who in your state?](#) – to be completed by the family.

## References Linked in Guide:

- Adult learning practices—use the [adult learning practices with examples.](#)
- CSPD in IDEA [Sec. 303.118 Comprehensive system of personnel development \(CSPD\) - Individuals with Disabilities Education Act](#) (<https://sites.ed.gov>).
- DEC Recommended Practices overview – as a resource [RPs - DEC Recommended Practices Home | DEC \(dec-sped.org\)](#) (<https://www.dec-sped.org/dec-recommended-practices>).
- [Family Centered Checklist](#)
- Family Rights.
  - [Confidentiality – HIPAA vs. FERPA](#) (cdc.gov).
  - Procedural Safeguards: [Sec. 300.504 Procedural safeguards notice - Individuals with Disabilities Education Act](#) (<https://sites.ed.gov>).
  - [10 Procedural Safeguards in IDEA | Understood - For learning and thinking differences](#) (understood.org).
  - IDEA and Parental Involvement [Policy Statement on Family Engagement from the Early Years to the Early Grades—Executive Summary \(PDF\)](#) (ed.gov).
- [Find Your Parent Center | Center for Parent Information and Resources](#) (parentcenterhub.org).
- [Initial Practice-Based Professional Preparation Standards for Early Interventionists/Early Childhood Special Educators \(EI/ECSE\) \(Initial birth through age 8\)](#)
- Communicating with and about people with disabilities. <https://www.cdc.gov/ncbddd/disabilityandhealth/pdf/communicating-with-people.pdf> (www.cdc.gov).
- Review [Working Together: Building Parent & Professional Partnerships \(ecpcta.org\).](#)



- The ECPC collaborated on the development of the Personnel/Workforce Component of the ECTA Early Childhood System Framework ([www.ectacenter.org/sysframe/component-personnel.asp](http://www.ectacenter.org/sysframe/component-personnel.asp)) to create this system.
- **Understanding the Federal Law:**
  - Part C of IDEA. [Part 303 \(Part C\)— Early Intervention Program For Infants And Toddlers With Disabilities - Individuals with Disabilities Education Act](https://sites.ed.gov) (<https://sites.ed.gov>).
  - Infographic: 5 reasons why EI is valuable: [PowerPoint Presentation](http://ideainfanttoddler.org) ([ideainfanttoddler.org](http://ideainfanttoddler.org)).
  - [Operation of an Early Intervention Program PowerPoint Presentation](http://ideainfanttoddler.org) ([ideainfanttoddler.org](http://ideainfanttoddler.org)).
  - [HIPAA/FERPA infographic](http://cdc.gov) ([cdc.gov](http://cdc.gov)).





## COMMONLY USED ACRONYMS

<b>AABR</b>	Automated auditory brainstem response (Hearing test)	<b>CI</b>	Cochlear Implant
<b>AAP</b>	American Academy of Pediatrics	<b>CMS</b>	Center for Medicaid & Medicare Services
<b>ACCESS</b>	Associate Degree Early Childhood Teacher Educators	<b>COTA</b>	Certified Occupational Therapist
<b>ACF</b>	Administration for Children & Families	<b>CP</b>	Cerebral Palsy
<b>ADA</b>	Americans with Disabilities Act	<b>CPC</b>	Community Partnerships for Children
<b>ADD</b>	Attention Deficit Disorder	<b>CPI</b>	Consumer Price Index
<b>ADHD</b>	Attention Deficit Hyperactivity Disorder	<b>CSEFEL</b>	Center on the Social and Emotional Foundations for Early Learning
<b>AMCHP</b>	Association of Maternal Child Health Programs	<b>CSHCN</b>	Children with Special Health Care Needs
<b>AOTA</b>	American Occupational Therapy Association	<b>CTF</b>	Children's Trust Fund
<b>APR</b>	Annual Performance Report	<b>CQI</b>	Continuous Quality Improvement
<b>APTA</b>	American Physical Therapy Association	<b>CSPD</b>	Comprehensive System of Personnel Development
<b>ASD</b>	Autism Spectrum Disorder	<b>DaSy</b>	Center for IDEA Early Childhood Data Systems
<b>ASHA</b>	American Speech-Language Hearing Association	<b>DCF</b>	Department for Children & Families
<b>ASTHVI</b>	Association of State and Tribal Home Visiting Initiatives	<b>DCYF</b>	Department of Youth and Families
<b>AT</b>	Assistive technology	<b>DEC</b>	Division for Early Childhood of CEC
<b>AUCD</b>	Association of University Centers on Disabilities	<b>DD</b>	Developmental Disability
<b>AV</b>	Audio Visual	<b>DDS</b>	Department of Developmental Services
<b>AVT</b>	Auditory Verbal Therapy	<b>DESE</b>	Department of Elementary & Secondary Education
<b>BD</b>	Behavioral Disability	<b>DLC</b>	Disability Law Center
<b>BIP</b>	Behavioral Intervention Plan	<b>DMA</b>	Division of Medical Assistance (Medicaid)
<b>BSEA</b>	Bureau of Special Education Appeals	<b>DMH</b>	Department of Mental Health
<b>CAEP</b>	Council for the Accreditation of Educator Preparation	<b>DNR</b>	Do Not Resuscitate
<b>CAPTA</b>	Child Abuse Prevention & Treatment Act	<b>DOI</b>	Division of Insurance
<b>CBHI</b>	Children's Behavioral Health Initiative	<b>DPH</b>	Department of Public Health
<b>CCR&amp;R</b>	Child Care Resource & Referral Agency	<b>DS</b>	Developmental Specialist
<b>CCSSO</b>	Council of Chief State School Officers	<b>DTA</b>	Department of Transitional Assistance
<b>CDC</b>	Centers for Disease Control and Prevention	<b>DV</b>	Domestic Violence
<b>CEC</b>	Council for Exceptional Children	<b>EC</b>	Early Childhood
<b>CEEDAR</b>	Collaboration for Effective Educator Development, Accountability and Reform	<b>ECE</b>	Early Childhood Education
<b>CEELO</b>	Center on Enhancing Early Learning Outcomes	<b>ECO</b>	Early Childhood Outcomes
<b>CHEA</b>	Council for Higher Education Accreditation	<b>ECPC</b>	Early Childhood Personnel Center
<b>CHNA</b>	Community Health Network Area	<b>ECO</b>	Early Childhood Outcome
<b>CFR</b>	Code of Federal Regulations	<b>ECSE</b>	Early Childhood Special Education



<b>ECTA</b>	Early Childhood Technical Assistance Center
<b>EDC</b>	Education Development Center
<b>edTPA</b>	Education Teacher Performance Assessment
<b>EEC</b>	Early Education and Care
<b>EI</b>	Early Intervention
<b>ED</b>	Emotional Disability
<b>EHS</b>	Early Head Start
<b>EPSDT</b>	Early Periodic Screening Diagnosis and Treatment
<b>ESEA</b>	Elementary and Secondary Education Act of 1965
<b>ESSA</b>	Every Student Succeeds Act
<b>FAFSA</b>	Free Application for Federal Student Aid
<b>FAPE</b>	Free Appropriate Public Education
<b>FBA</b>	Functional Behavioral Assessment
<b>FE</b>	Family Engagement
<b>FERPA</b>	Family Education Rights and Privacy Act
<b>FFP</b>	Federal Financial Participation
<b>FR</b>	Federal Register
<b>FV</b>	Family Voices Organization
<b>GPRA</b>	Government Performance and Results Act
<b>HBCU</b>	Historically Black Colleges and Universities
<b>HECSE</b>	Higher Education Consortium for Special Education
<b>HHS</b>	Health and Human Services
<b>HIPAA</b>	Health Insurance Portability and Accountability Act
<b>HLPs</b>	CEC High Leverage Practices
<b>HMO</b>	Health Maintenance Organization
<b>ICC</b>	Interagency Coordinating Council
<b>IDD</b>	Intellectual Developmental Disability
<b>IDEA</b>	Individuals with Disabilities Education Act
<b>IEE</b>	Independent Education Evaluation
<b>IEP</b>	Individualized Education Program
<b>IEU</b>	Intermediate Educational Unit
<b>IFS</b>	Impact Family Scale
<b>IFSP</b>	Individualized Family Service Plan
<b>IHE</b>	Institute of Higher Education
<b>IHP</b>	Individualized Health Plan
<b>ISEI</b>	International Society on Early Intervention
<b>ISP</b>	Individual Service Plan
<b>ITCA</b>	IDEA Infant Toddler Coordinators Association
<b>ITP</b>	Individual Transition Plan

<b>IYC</b>	Infants and Young Children
<b>JEI</b>	Journal of Early Intervention
<b>LD</b>	Learning Disability
<b>LDA</b>	Learning Disability Association
<b>LEA</b>	Local Education Agency (or school system)
<b>LEND</b>	Leadership Education in Neurodevelopmental and related Disabilities
<b>LRE</b>	Least Restrictive (educational) Environment
<b>MCH</b>	Maternal Child Health
<b>MCHB</b>	Maternal Child Health Bureau
<b>MSIP</b>	USDOE OSEP's Monitoring and State Improvement Planning Division
<b>NAECTE</b>	National Association of Early Childhood Teacher Educators
<b>NAEYC</b>	National Association for the Education of Young Children
<b>NASP</b>	National Association of School Psychologists
<b>NBPTS</b>	National Board for Professional Teaching Standards
<b>NCLB</b>	No Child Left Behind
<b>NCPMI</b>	National Center for Pyramid Model Innovation
<b>NCSEAM</b>	National Center for Special Education Accountability and Monitoring
<b>NDRN</b>	National Disability Rights Network
<b>NHSA</b>	National Head Start Association
<b>NICHD</b>	National Institute of Child Health and Human Development
<b>NICHY</b>	National Information Center for Children and Youth with Disabilities
<b>NICU</b>	Neonatal Intensive Care Unit
<b>NIH</b>	National Institutes of Health
<b>NIMH</b>	National Institute of Mental Health
<b>NP</b>	Nurse Practitioner
<b>NPRM</b>	Notice of Proposed Rule-Making
<b>NVLD</b>	Non-Verbal Learning Disability
<b>OAE</b>	Otoacoustics emissions (hearing test)
<b>O &amp; M</b>	Orientation & Mobility (for visually impaired)
<b>OCD</b>	Obsessive Compulsive Disorder
<b>OCR</b>	Office of Civil Rights (U.S. DOJ)
<b>ODD</b>	Oppositional Defiance Disorder
<b>OEC</b>	Office of Early Childhood
<b>OEL</b>	Office of Early Learning
<b>OMB</b>	Office of Management and Budget



<b>OSC</b>	Office of the State Comptroller
<b>OSEP</b>	Office of Special Education Programs (U.S. DOE)
<b>OSERS</b>	Office of Special Education & Rehabilitative Services (U.S. DOE)
<b>OT</b>	Occupational Therapy
<b>NASDSE</b>	National Association of State Directors of Special Education
<b>NASDTEC</b>	National Association of State Directors of Teacher Education and Certification
<b>NGA</b>	National Governors Association
<b>NHSA</b>	National Head Start Association
<b>p2p</b>	Parent to Parent
<b>P2P</b>	Power to the Profession
<b>PA</b>	Physician's Assistant
<b>PAC</b>	Parent Advisory Council
<b>PART B</b>	Special Education (ages 3 to 22) of IDEA
<b>Part B 619</b>	Section 619 of IDEA (3-5 years)
<b>PART C</b>	Early Intervention (birth to three) of IDEA
<b>PBIS</b>	Positive Behavior Interventions and Supports
<b>PCA</b>	Personal Care Attendant
<b>PDG-B5</b>	Preschool Development Grants Birth to 5
<b>PE</b>	Physical Education
<b>PQA</b>	Program Quality Assurance
<b>PT</b>	Physical Therapy
<b>PTA</b>	Parent Teacher Association
<b>PTI</b>	Parent Training and Information
<b>PTO</b>	Parent Teacher Organizations
<b>PTSD</b>	Post Traumatic Stress Disorder
<b>RDA</b>	Results Driven Accountability
<b>RFA</b>	Request for Application
<b>RFI</b>	Request for Interest
<b>RFP</b>	Request for Proposal
<b>RFR</b>	Request for Response
<b>RN</b>	Registered Nurse
<b>RP</b>	DEC Recommended Practices
<b>RSA</b>	Rehabilitation Services Administration
<b>RTP</b>	Research to Practice
<b>SAMSA</b>	Substance Abuse and Mental Health Services Administration
<b>SAC</b>	State Advisory Council
<b>SAP</b>	State Advisory Panel

<b>SEA</b>	State Education Agency
<b>SEAC</b>	Special Education Advisory Council
<b>Section 504</b>	Section of the Rehabilitation Act of 1973
<b>SEPAC</b>	Special Education Parent Advisory Council
<b>SI</b>	Sensory Integration
<b>SIG</b>	State Improvement Grant
<b>SIMR</b>	State Identified Measurable Result
<b>SLP</b>	Speech/ Language Pathologist
<b>SPDG</b>	State Personnel Development Grant
<b>SPE</b>	or SPED Special Education
<b>SPEDPAC</b>	Special Education Parent Advisory Council
<b>SPP</b>	State Performance Plan
<b>SSA</b>	Social Security Administration
<b>SSDI</b>	Social Security Disability Income
<b>SSI</b>	Supplemental Security Income
<b>SSIP</b>	State Systemic Improvement Plan
<b>SSP</b>	Specialty Service Provider (Autism, Teacher of the Deaf, Teacher of the Blind)
<b>STEM</b>	Science, Technology, Engineering and Math
<b>STEMI2E2</b>	STEM Innovation for Inclusion in Early Education Center
<b>SW</b>	Social Worker
<b>TA</b>	Technical Assistance
<b>TANF</b>	Temporary Assistance for Needy Families
<b>TASH</b>	The Association for Persons with Severe Handicaps
<b>TED</b>	Teacher Education Division of CEC
<b>TECSE</b>	Topics in Early Childhood Special Education Journal
<b>TESE</b>	Teacher Education and Special Education Journal
<b>Title V</b>	of the Social Security Act administered by DHHS
<b>TOD</b>	Teacher of the Deaf or Hard of Hearing
<b>TTY</b>	Telephone Typewriter
<b>TVI</b>	Teacher of the Visually Impaired
<b>UCEDD</b>	University Center for Excellence in Developmental Disabilities
<b>USDOE</b>	U.S. Department of Education
<b>VR</b>	Vocational Rehabilitation
<b>WIOA</b>	Workforce Innovation and Opportunities Act
<b>YC</b>	Young Children
<b>YEC</b>	Young Exceptional Children
<b>ZTT</b>	Zero to Three



# Comprehensive System of Personnel Development (CSPD): Overview

## Framework of a CSPD

2020

### What is a Comprehensive System of Personnel Development (CSPD)?

A system designed to address the challenges faced in the Early Childhood (EC) workforce, including:

- Shortages of personnel
- Need for additional training at both the pre-service and in-service levels
- Inconsistent alignment of state and national competencies and standards
- Challenges faced by EC personnel due to the diversity of needs of young children and their families
- Inequities of preparation and compensation among those providing services

An effective system must:

- Coordinate and address state needs for quantity and quality of EC personnel and their degree of support required
- Acknowledge the need for coordination between pre-service and in-service to ensure the consistent use of evidence-based practices
- Monitor progress through ongoing evaluation to assess the capacity to implement program quality standards that result in improved outcomes for children and families



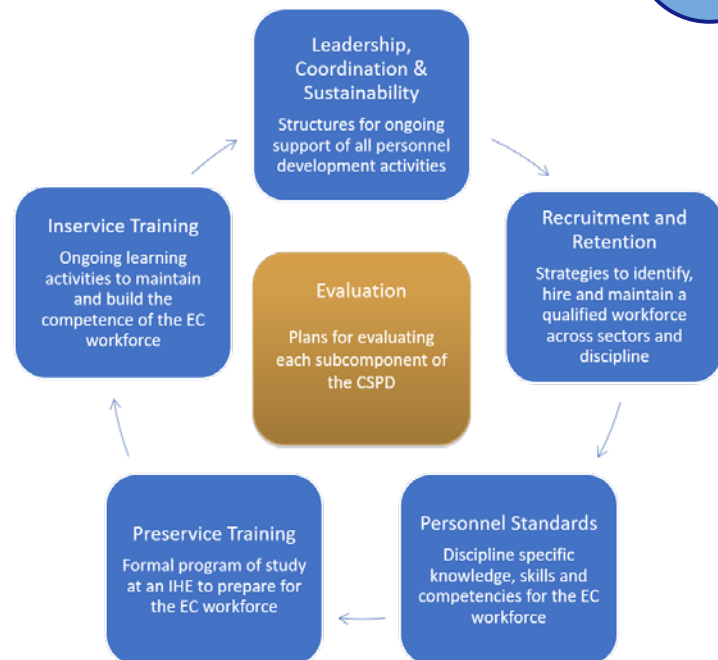
### About a CSPD



- A CSPD is the primary mechanism by which a state ensures that infants, toddlers, and young children with disabilities and their families are provided services by knowledgeable, skilled, competent, and highly qualified personnel, and that sufficient numbers of these personnel are available in the state to meet service needs.
- An effective CSPD is key to promoting both effective practices and the implementation of legal requirements as determined by the IDEA.
- An implementation framework is followed to develop a CSPD. During the installation phase the state conducts a strategic planning meeting where an action plan for each of the 6 subcomponents of the CSPD is developed. The action plans outline specific steps for each workgroup that need to be completed within one year.

### A CSPD has Six (6) Subcomponents

6

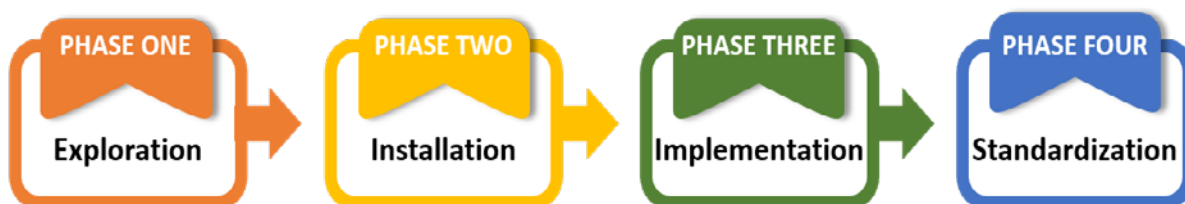




## How Does A State Create A CSPD?



- ECPC uses the Guide to Intensive TA<sup>1</sup> to assist states who are committed to building a state early childhood CSPD.
- The state team completes the Personnel/Workforce Component of the ECTA Early Childhood System Framework<sup>2</sup> ([ECPC-CSPD Self-Assessment](#)); this guides in the planning, development, implementation and evaluation of a CSPD.
- The strategic planning team develops the state CSPD vision, mission, and work plans for each of the six subcomponent workgroups.
- Each workgroup meets monthly and reports progress across all groups.
- The 18-month implementation framework uses 4 distinct and sequential phases. Each phase addresses 3-5 objectives that must be obtained by the state's leadership team in order to establish and/or maintain the framework of the CSPD.



## References



<sup>1</sup>Early Childhood Personnel Center (n.d.). *Guide to Intensive Technical Assistance*. Retrieved from <https://ecpcta.org/cspd>

<sup>2</sup>Early Childhood TA Center. (2015). *A System Framework for Building High-Quality Early Intervention and Preschool Special Education Programs*. Retrieved from <https://ectacenter.org/sysframe/>

**Visit [ecpcta.org](https://ecpcta.org) for more information**

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## ADMINISTRATORS:

Self-Assessment to measure state's family/stakeholder engagement. *How are we doing?*

QUESTIONS TO ASK YOURSELF:	DID WE ASK THE QUESTION?	DO WE KNOW THE ANSWER?	NO, WE DO NOT KNOW THE ANSWER	NOT SURE, BUT WE SHOULD LOOK INTO THIS
Have you shared the family self-assessment tool?				
Do families have what they need to make an informed decision about participating on this training or event?				
Did we provide: Expectations, time commitment, support available to attend the meetings, etc.				
Do families understand their role and who they represent?				
Is there more than one parent involved?				
Is there a mentor assigned to each parent?				
Is there a reimbursement structure?				
If so, is the reimbursement structure clearly explained to the parent? (with timelines?)				
Have we clearly defined our vision for the family's role/the work of the family?				
Does the family have an equal voice?				
Has your team reflected on any implicit/explicit bias about families in general or specific families?				



## USING YOUR STORY TO TEACH

**Learning to use stories to teach is different than using stories for advocacy. This guide will highlight strategies to develop a family story for trainings.**



Learn the essential elements of teaching through storytelling by viewing the PowerPoint presentations **Using Your Story to Teach - Part I & Part II**.



Families can use the **Visualize Your Story** activity to choose an experience that illustrates one or more of the EI/ECSE Standards or DEC Recommended Practices.



Families can use the **Storyboard Template** to guide them in developing their story based on personal experience(s) as the family of a child with a disability.



Use the **Story Rubric Self-Assessment** checklist to reflect on the story. Families can ask a friend or someone else to listen and provide feedback.



Prepare for the presentation. Make sure that the story is related to the topic of the training.



After the story presentation, families should follow-up for feedback, assess their storytelling, and revise stories as needed.

**TIP:** To use this toolkit effectively, families should read and be familiar with the [EI/ECSE Standards](#) and the [DEC Recommended Practices](#).



Learning to teach skills through storytelling is different than telling a story for advocacy. Families will need strategies to assist them in using their experiences to teach what family-centered practices should look like in the field.

### 1. View the Using Your Story to Teach – Part I - PowerPoint Presentation

Use the Facilitator's Guide – Part I to present the Using Your Story to Teach – Part I PowerPoint presentation.

- Families can use the Viewing Guide to reflect on the sample story highlighted in Part I.
  - Reflect on the questions as you watch the video:  
["Moth Story: The Accident by Ophira Eisenberg"](#)
    - What imagery makes this a great story? What did you see as she told her story?
    - How was humor part of this story?
    - What emotions did you feel?
    - What did you learn?
- Families complete the **Visualize Your Story** activity to brainstorm some experiences they might be able to use to illustrate a point.

### 2. View the Using Your Story to Teach – Part II PowerPoint Presentation

Use the **Facilitator's Guide – Part II** to present the **Using Your Story to Teach – Part II** PowerPoint presentation.

- Families can use the **Storyboard Template** to help them develop a story that illustrates one or more of the [EI/ECSE Standards](#) or the [DEC Recommended Practices](#).
  - The story should touch on a personal experience with early childhood intervention services for their child.
  - The story can be about one moment in time along their journey as the family member of a child with a disability. They do not have to tell their entire story from beginning to end.
  - Decide on the purpose or goal of the story. What does the story illustrate?
  - Who is the intended audience?
  - Be sure that the message is clear and accurate.
  - Focus on one aspect of the message being conveyed.
  - Are there pictures or a video that illustrate that message?
  - What format will be used? (PPT, Google slides, etc.)

### 3. Using the Rubric Checklist as Self-Assessment

- Families should practice telling their story – out loud, in the mirror, on a recording, etc.
- Then use the Story Rubric Self-Assessment to make sure they have all the elements.
- Share the story with a friend or mentor to be sure that the message is clear and accurate. Ask the listener to fill out the rubric and provide feedback.

### 4. Preparing for Success

Make sure the presentation is related to the topic of the course or training. Be sure the families ask very specific questions about what is expected.

- How much time do they have to present?
- Will the presentation be face to face or virtual?
- How will they facilitate follow-up questions?
  - Refer to **Facilitating the Discussion after a Presentation** for tips.
- Will the presentation be live or recorded? If pre-recorded, when and how will they be able to facilitate follow-up questions?

### 5. Assessment/Follow-up

After the course or training, families should assess their presentations and revise for future presentations.

- Will there be an evaluation of the presentation?
  - If so, request the results to prepare for ongoing presentations.
- Revise the presentation based on feedback.



# USING YOUR STORY TO TEACH

## Viewing Guide

### Viewing Guide

- Reflect on the questions as you watch the video:  
[“Moth Story: The Accident by Ophira Eisenberg”](#)
  - What imagery make this a great story? What did you see as she told her story?
  - How was humor part of this story
  - What emotions did you feel?
  - What did you learn?
- Brainstorm some experiences you have had as the family member of a child with a disability that you might be able to use to illustrate a point.

REFLECT		BRAINSTORM
Imagery		
Humor		
Emotion		
What did you learn?		



# USING YOUR STORY TO TEACH

## Visualize Your Story

**ACTIVITY 1:** Close your eyes and think about your experiences in early childhood intervention. Give yourself 2 minutes to look through your experiences. Use a timer or just open your eyes when you are ready.

Is there one experience that stands out to you? Maybe when things were going well? When things were going wrong? Focus on one moment in time along your journey.

Picture in your mind what was happening. What did you see? What did you hear? What were you feeling? Who was there with you? What was going well? What could have been done differently? What did you learn from this experience?

Use the template to jot down all of your visualizations:

WHAT DID YOU SEE?	WHAT DID YOU HEAR?	WHAT WERE YOU FEELING?
WHO WAS THERE WITH YOU?	WHERE WERE YOU?	WHEN WAS IT HAPPENING?
WHAT WENT WELL?	WHAT COULD HAVE BEEN DIFFERENT?	WHAT DID YOU LEARN?



# USING YOUR STORY TO TEACH

## Storyboard Template

Your story should touch on a personal experience with early childhood services for your child. It could address the positive impact of well-trained personnel or the difficulties in working with personnel who are not comfortable engaging with family members.

Your story should demonstrate success or challenge highlighting one or more of the [EI/ECSE Standards](#) or the [DEC Recommended Practices](#). They are listed below for your convenience. You can copy and paste the standard(s) right into the storyboard template provided.

Use the storyboard template to guide you in crafting your story. Alternatively, put this format on a large piece of paper or whiteboard and use sticky notes so that you can organize and revise your ideas.

TOPIC:	STANDARD:
EXAMPLES:	VISUALS:
TURNING POINT:	SOLUTION:



## USING YOUR STORY TO TEACH

### Story Rubric Self-Assessment

CRITERIA	NEEDS WORK	GOOD	NOTES
Purpose or goal of the story is clear.			
Intended audience(s) is clear for this story.			
Story illustrates EI/ECSE standard or DEC Recommended Practice.			
Visual aids, creative wording, or audience hooks are used to illustrate your message.			
Are there any photos or videos that show others? <i>If so, you will need their permission to share.</i>			
Visuals identified to illustrate your message.			
Powerful examples are used: a challenge, hurdle, setback, growth, triumph or success. <i>(i.e. "transformative consequences")</i>			
The story has a strong ending that teaches specific outcomes. The audience has solutions or suggestions to take away.			
Language is clear and understandable. No jargon or acronyms that are not defined.			
Comments:			



## ECPC CROSS-DISCIPLINARY Competency Areas and Indicators Table

Bruder, M. B., Catalino, T., Chiarello, L., Mitchell, M., Deppe, J., Gundler, D., Kemp, P., LeMoine, S., Long, T., Muhlenhaupt, M., Prelock, P., Scheffkind, S., Stayton, V., Ziegler, D. (2019). Finding a common lens: Competencies across professional disciplines providing early childhood intervention. *Infants & Young Children*, 32(4), 280-293. doi: 10.1097/IYC.0000000000000153

CROSS-DISCIPLINARY COMPETENCY AREAS AND INDICATORS			
Coordination and Collaboration	Family Centered Practice	Evidence-Based Intervention	Professionalism
Coordinates and collaborates with the family and service providers across disciplines and agencies throughout the service delivery process.	Builds a relationship and a partnership with each child's caregiving family to support their participation in their child's intervention and learning.	Demonstrates knowledge of typical and atypical child development (including risk factors) throughout the intervention process.	Follows all IDEA and professional discipline policies, advocacy guidelines, ethics codes and practice standards for early childhood intervention.
Uses effective communication skills (listening, speaking, writing) with others.	Supports families in their caregiving role of their child.	Use valid, reliable, nondiscriminatory child-focused assessment procedures and instruments to document (a) eligibility for IDEA services, (b) child and family strengths and needs, and (c) child and family progress as a result of interventions.	Demonstrates ethical decision making and professional behavior.
Shares information and resources with service providers and agencies.	Uses effective communication (listening, speaking, writing) skills with all families across cultural, linguistic, and socioeconomic backgrounds.	Identifies and includes evidence-based practices on the intervention plan (IEP/IFSP).	Demonstrates knowledge of one's own discipline-specific practice standards and guidelines.
Coordinates the delivery of early childhood intervention services, resources, and supports with service providers and agencies.	Includes the family in all components of the early childhood intervention service delivery process.	Uses evidence-based practices during interventions with a child, family and/or other caregivers and teachers.	Demonstrates awareness of other discipline's practice standards and guidelines for early childhood intervention.
Collaborates with service providers and agencies to facilitate a team approach to early childhood intervention.	Provides information, guidance, and education to families about child development and their child's health and safety needs.	Incorporates evidence-based practices across learning opportunities (activities and routines) within the child's home, community, and classroom.	Learns from, with, and about all team members within an interprofessional collaborative practice framework.

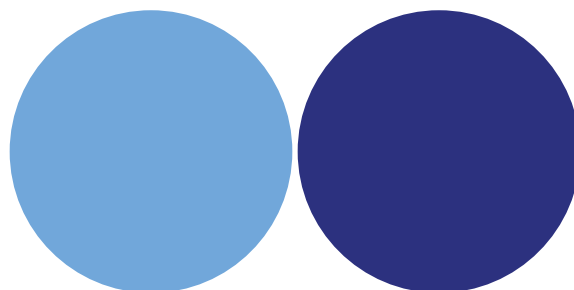


### CROSS-DISCIPLINARY COMPETENCY AREAS AND INDICATORS

Coordination and Collaboration	Family Centered Practice	Evidence-Based Intervention	Professionalism
Collaborates with the family, service providers, and agencies to develop, implement, and monitor an Individualized Family Service Plan (IFSP), Individualized Education Plan (IEP), or an intervention or learning plan.	Provides information, guidance, and education to families about regulations, policies, and procedures for eligibility, intervention, and transition under IDEA and other early childhood programs.	Uses evidence-based accommodations, modifications, and adaptations to enable a child to participate and learn in inclusive school and community environments.	Uses self-reflection and professional development to stay current in evidence-based disciplinary and interdisciplinary practices.
Collaborates with service providers and agencies to identify roles and responsibilities when delivering intervention.	Provides information, guidance, and education to families about early childhood intervention and inclusive service delivery models.	Systematically collects and uses data to monitor child and family progress to revise intervention plans as necessary and document intervention effectiveness.	Uses collaborative consultation practices when working with service providers and families.
Demonstrates negotiation and leadership skills with service providers and agencies to problem solve and take necessary actions to benefit the child and family.	Collaborates with the family to identify the family's strengths, needs, concerns, and priorities.		Mentors, teaches, and provides performance feedback and reflective supervision to other service providers.
Facilitates transitions from the Part C or Part B/619 programs to another program with the family and service providers from different disciplines and agencies.	Prepares the family to participate and contribute to the development, implementation, and evaluation of their child's IFSP or IEP, including transition options.		Demonstrates disciplinary and interdisciplinary leadership skills at the service delivery, program administration, and systems level of early childhood intervention.
	Refers families to resources and services to help them meet the needs of their child, their family, and themselves.		Advocates at the local, state, and national level for high-quality, timely, and effective early childhood intervention services to improve outcomes for children and families.
	Provides information to the family about parental rights and safeguards and how to advocate for themselves, their family, and their child.		

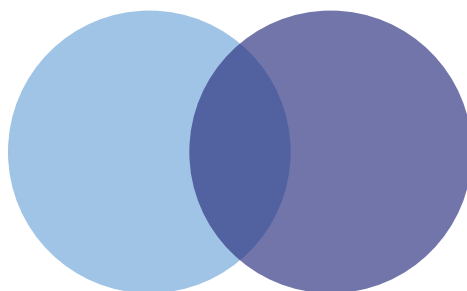
## EARLY INTERVENTION SERVICE DELIVERY MODELS

Early Intervention service delivery models have evolved from multi-disciplinary to inter-disciplinary to trans-disciplinary. All three models partner professionals and families as a team. A trans-disciplinary model fosters shared roles among team members and addresses the child's need in the context of the family as a whole.



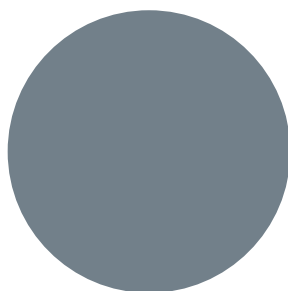
### Multidisciplinary

Working with multiple disciplines, maintaining boundaries.  
Each discipline uses own expertise to develop individual care goals.



### Interdisciplinary

Working between more than one discipline, blurring boundaries.  
Interaction among disciplines to achieve an integrated understanding.



### Transdisciplinary

Working across and beyond disciplines, eliminating boundaries.



# A MODEL FOR ETHICAL DECISION-MAKING

## Worksheet

### A Model for Ethical Decision-Making

This is a tool for use by decision makers when reasoned justified/justifiable action is required. Ethical Decision-Making informs and shapes (conforms to, conflicts with, supplements) exclusive reliance on law/policy and on practices of state and local programs that serve children and families. Ethical decision making provides thoughtful and reasoned answers to knotty situations.

- **Ethics**—Concerns about right and wrong actions, especially about professionals' actions in early childhood education
- **Ethical decision-making**—A process of applying ethics in order to ensure right action and avoid wrong action by professionals and the people whom they serve (Ann & Rud Turnbull, 2020)

A Model for Ethical Decision Making (Turnbull & Stowe 2001)	
<b>Assumptions</b>	
<b>Background</b>	
<b>Conduct an Interest Analysis:</b> 1. Identify Interested Parties 2. Weigh the Barriers and Resources	

Apply 3 Ethical Principles and Their Respective Relevant Core Concepts to Decide State Policy			
	LIFE	LIBERTY	EQUALITY
<b>Community</b>	Protection from Harm Prevention	Autonomy Privacy & Confidentiality Empowerment & Part. Decision-making Liberty (physical)	Anti-discrimination Cultural Responsiveness
	Integration / Productivity	Integration / Productivity	Integration / Productivity
<b>Family as Foundation</b>	Protection from Harm Prevention	Autonomy Privacy & Confidentiality Empowerment & Part. Decision-making Liberty (physical)	Anti-discrimination Cultural Responsiveness
	Family Integrity Family Centeredness	Family Integrity Family Centeredness	Family Integrity Family Centeredness
<b>Dignity</b>	Protection from Harm Prevention	Autonomy Privacy & Confidentiality Empowerment & Part. Decision-making Liberty (physical)	Anti-discrimination Cultural Responsiveness



### Apply 3 Ethical Principles and Their Respective Relevant Core Concepts to Decide State Policy

#### Family as Foundation and Relevant Core Concepts

Protection from Harm  
Prevention  
Family Integrity  
Family Centeredness  
Autonomy  
Privacy & Confidentiality  
Empowerment & Participatory Decision-Making  
Liberty  
Anti-Discrimination  
Cultural Responsiveness

#### Community and Relevant Core Concepts

Protection from Harm  
Prevention  
Integration  
Autonomy  
Privacy & Confidentiality  
Empowerment & Participatory Decision-Making  
Liberty  
Anti-Discrimination  
Cultural Responsiveness

#### Dignity and Relevant Core Concepts

Protection from Harm  
Prevention  
Autonomy  
Privacy & Confidentiality  
Empowerment & Participatory Decision-Making  
Liberty  
Anti-Discrimination  
Cultural Responsiveness

### Apply General Ethical Guidelines

What policy choices/considerations avoid extremes and seeks middle ground?

What policy choices/considerations do unto others as you would like for others to do unto you?

What is a policy choice that promotes the greatest good for the greatest number, thereby ensuring the least possible harm to the greatest number?

### Next Steps

Final Choice(s)

Implementation

Evaluation

Feedback

Begin Again

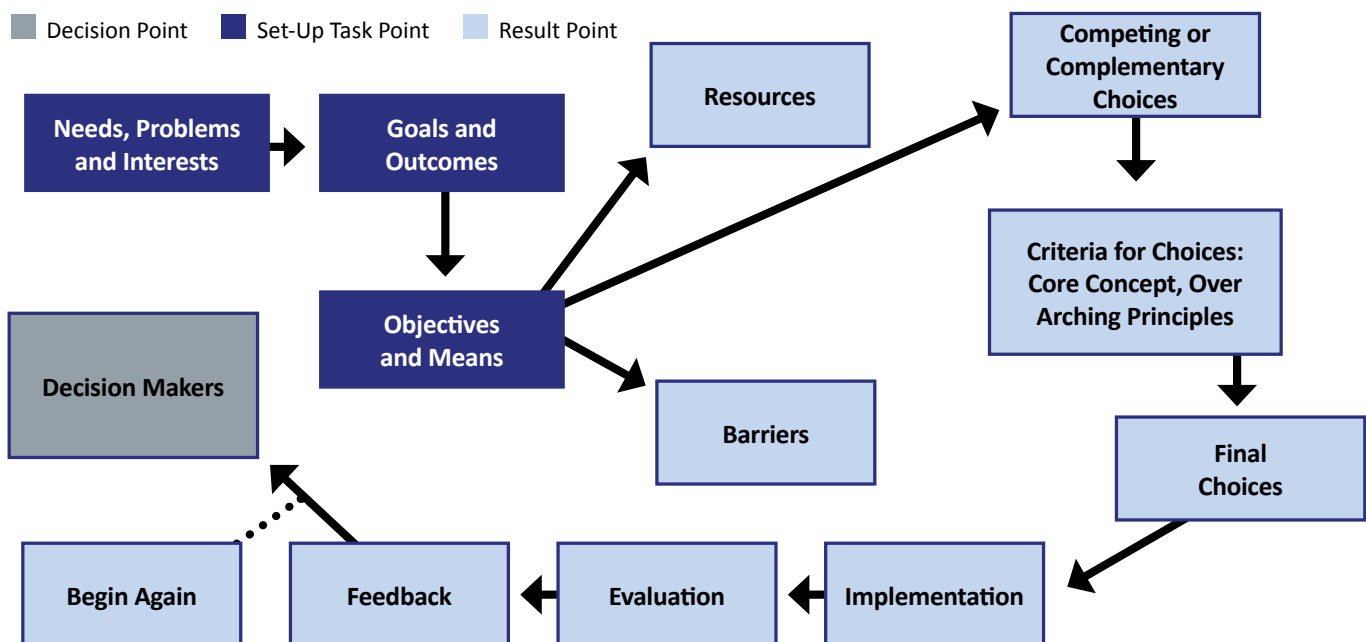


## Readings Required as Related to Use of this Tool:

- Turnbull, R. & Stowe, M.J. The core concepts of disability policy affecting families who have children with disabilities. *Journal of Disability Policy Studies*, 12(3), 133-143.
- Turnbull, R. & Stowe, M.J. (2001). A taxonomy for organizing the core concepts according to their underlying principles. *Journal of Disability Policy Studies*, 12(3), 177-197.
- Turnbull, R. & Stowe, M.J. (2001). Tools for analyzing policy “on the books” and policy “on the streets.” *Journal of Disability Policy Studies*, 12(3), 206-214.

## Additional Readings:

- Americans with Disabilities Act, 42 U.S.C. 12001 et seq. (1990).
- Federal Education Rights and Protection Act, 20 U.S.C. 1232g (1974)
- Individuals with Disabilities Education Act, 20 U.S.C. Sec. 1401 et seq. (2004).
- Turnbull, A., Turnbull, R., Wehmeyer, M. L., & Shogren, K. A. (2020). *Exceptional Lives: Practice, Progress and Dignity in Today's Schools*. Upper Saddle River, NJ.: Pearson.
- Turnbull, A., Turnbull, R. et al. (in press). *Trusting Family and Professional Partnerships in General and Special Education*. Upper Saddle River, NJ: Pearson.
- Turnbull, A. & Turnbull, R. (2001). Right science and right results: Lifestyle change, positive behavior support, and human dignity. *Journal of Positive Behavior Support*, 13(2), 69-77.
- Turnbull, R. (1981). Two legal analysis techniques and public policy analysis. In Haskins, R. & Gallagher, J. (Eds.) *Models for social policy analysis*. Norwood, N.J.: Ablex Press.
- Turnbull, R. (2011). *The Exceptional Life of Jay Turnbull: Disability and Dignity in America* Amherst, Mass: White Poppy Press.
- Turnbull, R. (2017). Education, ethical communities, and personal dignity. *Intellectual and Developmental Disabilities*, 55(2), 110-111.
- Turnbull, R. (2019). Disability law and policy: Core concepts and the ethical principles of family, disability, and community. In Wasik, B. H. and Odom, S.L. (Eds.). *Celebrating 50 Years of Child Development Research: Past, Present, and Future Perspectives* (pp. 277-299). Baltimore, MD: Brookes.



Turnbull and Turnbull (2020)



# FACILITATING THE DISCUSSION AFTER A PRESENTATION

**After you tell your story, it is time to think about the questions to ask as follow-up.**

1. Prepare a list of questions in advance, so you are prepared after your presentation in case the audience does not ask questions. (suggestions listed below)
2. Decide before your presentation if you will allow questions during your presentation, often times this is distracting and may lead you off topic or in a different direction.
3. Make sure you let your audience know in advance when you prefer to answer questions.
4. Suggest that they write down their questions during your presentation, so they do not forget.
5. If you are presenting using a virtual platform, decide if you want them to ask question in chat or wait until the end (sometimes, this can also be distracting to you and others).
6. The key is to communicate with your audience.

**Facilitating the discussion after the presentation:** Develop a list of questions to ask (or question prompts). It is not enough to ask the question; you have to know **why** you are asking it and how you hope the question will enhance the participants' learning experience.

- **Fact Finding Questions** “Who, What, When, Where, Why, and How questions” At the end of a training, facilitators often ask these kinds of questions to get a sense for what the participants took away.
- **Illuminative Questions** are designed to help participants connect their own relationship to what is being discussed. These are often the questions that expose a participant's emotion regarding the subject. An illuminative question will often have the word **“feel”** in it as in “How does this make you feel?” or “What do you find most challenging about the new system?”
- **Introspective Questions** help participants examine their own beliefs, values, and assumptions: They are the **so what** questions that help people make sense of situations. They are the questions that demand personal reflection. “How does this change how you want to show up as a practitioner?”
- **Decision-Making Questions** When you need a group to take action, using decision-making questions can help move the process along. Decision-making questions are like: “What do we need to start, stop and continue to make this a success?” or “What are the next steps?”

The key to being good at asking questions is being **skilled at listening**- at having a natural curiosity about what others think. Strong question-askers have a real desire to dig deeper into others' perceptions and beliefs. When participants know that you are not just asking questions for the sake of asking questions but because you actually want to hear the answers – you will create a learning environment that is engaged and energized.



## EFFECTIVE FAMILY PARTNERSHIPS

States can engage families effectively and facilitate active, successful partnerships.

LOOKS LIKE	DOESN'T LOOKS LIKE
The state has more than one family involved in more than one of the six subcomponents of the CSPD: Leadership, Coordination and Sustainability, Recruitment and Retention, Personnel Standards, Pre-service Personnel Development, In-service Personnel Development, Evaluation.	The state has one or more families involved in training, but not designated to specific components of CSPD leadership development.
The state has a cadre of families/stakeholders to continually participate in feedback.	Families are engaged sporadically in the provision of feedback as the system identifies a need. It is often the same few families who provide feedback.
The state has established a continued relationship with a core of family leaders and organizations and seek new contacts and new leaders.	The state has occasional contact with leaders of family organizations as a need is identified. It may be the same few leaders and organizations.
The state has families as consultants to the program and their input is reflected in policy and program revisions.	The state consults with families on policy or program revisions as they identify a need for input. Input may not be reflected in policy or program revisions but serves to demonstrate that family's input was requested.
The state has a reimbursement mechanism to compensate for the time of family consultants.	The state does not have a mechanism to reimburse families, nor have a policy that specifically addresses this.
There is a process for ongoing training for families as consultants or faculty.	Families are not recipients of training as consultants or faculty.
There is open communication and a mechanism for collaboration between the PTI and state system.	Communication with the PTI is limited.
The state system works across disciplines and agencies as a multi-delivery system.	The state system works in silos and is not collaborative in design.
There is a mechanism for families to provide input to state leaders.	There is no mechanism in place for families to provide input about the system.
There is a process to continually develop new family leaders as consultants.	There is no process to identify, recruit or engage new family leaders as consultants.
The state program can demonstrate outcomes directly related to meaningful family engagement.	Outcomes from your program are not tied to meaningful family engagement.
Family consultants are representative of your state's culture, geographic landscape, diversity, socio-economic status, and range of child disabilities.	Family consultants are not chosen with the intentionality that would lead to diverse representation.



## FAMILY INVOLVEMENT SELF-ASSESSMENT

Use this checklist to assess your readiness to become involved in personnel development efforts. These considerations will help you evaluate whether or not this is the right opportunity for you at this time.

### Questions to consider before committing to be involved:

	Do I know?	Is this right for me?	MORE QUESTIONS TO ASK
<b>OPPORTUNITY</b>			
<b>What is the opportunity?</b> • Local, state or national			
• Stakeholder, advisory group trainer or other			
<b>Is this a new opportunity or existing?</b>			
<b>Is this time limited (topic specific) or ongoing?</b>			
<b>What is the impact?</b> • Local state or national			
<b>ROLE</b>			
<b>What is my role?</b>			
• Family faculty/co-trainer/presenter			
• Will I represent my own experience or share the family perspective?			
<b>Is there background information that I should know to address the topic?</b>			
<b>Is there a training or classes that I can attend?</b>			
<b>What is the expectation of family?</b>			
<b>How many other families are involved?</b>			
<b>COMMITMENT</b>			
<b>Where are the meetings or classes held?</b>			
• Is there an option to participate virtually?			
<b>What is the time commitment?</b> • Per week/monthly/quarterly			
<b>How far in advance are the meetings or classes scheduled?</b>			
<b>How far in advance is the agenda distributed?</b>			



	Do I know?	Is this right for me?	MORE QUESTIONS TO ASK
<b>RESOURCES</b>			
Is there a reimbursement mechanism?			
What is covered?			
• Childcare			
• Travel costs (parking, tolls, mileage)			
• Stipend for my time			
• Preparation time reimbursed			
Do I know how to request reimbursement?			
What is the turnaround time for reimbursement?			
Where do I go if I have specific questions? • Person or website			
Do I have a support network at home to allow me time away?			
Do I have enough information to make an informed decision about this opportunity?			
What if I decide this is not right for me?			
Do I know the process of resigning?			
Are there other things to consider?			
Do I need to find out more before making a decision? If so, what?			



INVOICE			
Enter Agency Name:	Reimbursement Request For:		
Enter Address:			
Enter Phone:			
Enter Fax:	Date Submitted:		
PAY TO:			
Recipient Name:			
Mailing Address:			
City, ST ZIP Code:			
Phone:		Email:	
COMMENTS:			

DATE	DESCRIPTION OF ACTIVITY	RATE	AMOUNT
TOTAL DUE:			

[Form W-9](#)

SIGNATURE:		DATE:	
SEND FORM TO:		DATE RECEIVED	



## Involving Families in CSPD "The Basics"

Tips to use when recruiting families to participate in the state Comprehensive System of Personnel Development (CSPD) team.

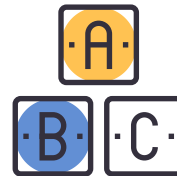


### 1.) PROVIDE BACKGROUND INFORMATION

Provide detailed [background information](#) prior to any meetings so everyone is on the same page.

### 2.) PROVIDE ACRONYM LIST & LIST OF TERMS DEFINED

Provide resources so everyone knows what is being discussed, don't assume everyone understands the terms being used. [Acronym List](#)



### 3.) PROVIDE A WELCOMING ENVIRONMENT

Offer an opportunity for everyone to speak and invite them to participate. Are there other families participating? If so, do the families have an opportunity to connect.

### 4.) WHAT ARE THE EXPECTATIONS TO PARTICIPATE?

Make sure the family knows what is expected of them, reading ahead of time, time and location of the meeting, parking, lunch options, dress attire. Is there a virtual option?



### 5.) BE INFORMATIVE AND APPROACHABLE

Provide a mentor or someone for the family to connect with prior to the meeting and as a follow up in case they have questions.

**ECPCTA.ORG**

<https://ecpcta.org/cspd/>

This is a product of the Early Childhood Personnel Center (ECPCTA) and was made possible by Cooperative Agreement #H325B170008 which is funded by the U.S. Department of Education, Office of Special Education Programs. However, those contents do not necessarily represent the policy of the Department of Education, and you should not assume endorsement by the Federal Government.

*Purpose with Passion*



# RESOURCES TO CONNECT WITH FAMILIES WITHIN YOUR STATE

To locate a **Parent Center** within your state: <https://www.parentcenterhub.org/find-your-center/>.

There are nearly 100 Parent Training and Information Centers (PTIs) and Community Parent Resource Centers (CPRCs) in the US and Territories. These Centers perform a variety of direct services for children and youth with disabilities, families, professionals, and other organizations that support them. Some of the activities include:

- **Working** with families of infants, toddlers, children, and youth with disabilities, birth to 26
- **Helping** parents participate effectively in their children's education and development
- **Partnering** with professionals and policy makers to improve outcomes for all children with disabilities

## ASSOCIATION OF UNIVERSITY CENTERS ON DISABILITIES (AUCD)

<https://www.aucd.org/>

- A network of interdisciplinary centers advancing policy and practice for and with individuals with developmental and other disabilities, their families, and communities.

## FAMILY VOICES

<http://familyvoices.org/>

- Family Voices is a national family-led organization of families and friends of children and youth with special health care needs (CYSHCN) and disabilities. We connect a network of family organizations across the United States that provide support to families of CYSHCN. We promote partnership with families at all levels of health care—individual and policy decision-making levels—to improve health care services and policies for children.

## PARENT TO PARENT PROGRAM

<http://www.p2pusa.org/parents/>

- The Parent to Parent network is a growing national resource for families. Statewide, regional and local community-based programs continue to emerge out of grassroots efforts; new statewide Parent to Parent programs are being developed to support the efforts of local programs; national needs are being addressed as they arise; and international interest in Parent to Parent is growing every year. The strength of Parent to Parent comes directly from the parents who dedicate themselves to its continuing success.

## STATE INTERAGENCY COORDINATING COUNCIL CONTACTS

<https://ectacenter.org/contact/iccchair.asp>

- ICC state chair contacts to contact appointed families currently serving on the Council.

## THE NATIONAL ASSOCIATION OF COUNCILS ON DEVELOPMENTAL DISABILITIES

<https://nacdd.org/>

- NACDD is the national association for the 56 Councils on Developmental Disabilities (DD Councils) across the United States and its territories. The DD Councils receive federal funding to support programs that promote self-determination, integration, and inclusion for all people in the United States with developmental disabilities.

## THE NATIONAL FEDERATION OF FAMILIES FOR CHILDREN'S MENTAL HEALTH

<https://www.ffcmh.org/our-affiliates>

- A national family-run organization linking more than 120 chapters and state organizations focused on the issues of children and youth with emotional, behavioral, or mental health needs and their families.

## STATE FAMILY ORGANIZATIONS:

- Down Syndrome
- United Cerebral Palsy
- Autism
- Deaf and Hard of Hearing Program



# WHO'S WHO IN YOUR STATE *Filling your toolbox*

Identify EI/ECSE and related resources in your state

What is the lead agency for EI in your state?	
Who is the <a href="#">Part C Coordinator</a> ?	
Who is the <a href="#">Part B/619 Coordinator</a> ?	
Who provides professional development for early intervention in your state?	
Who is the <a href="#">Chair of your State Interagency Coordinating Council (ICC)</a> ?	
Who are the parents on the State ICC?	
Who is the Personnel Preparation Representative on the State ICC?	
<a href="#">Who is the chair of the State Advisory Panel (SAP) or Special Education Advisory Council (SEAC)?</a>	
Where can you find information about early intervention in your state? Number of children served, eligibility criteria.	
What higher education programs provide EI/ECSE personnel preparation in your state?	
Does your state offer an <a href="#">EI Certification or Licensure</a> ? Visit your state on the ECPC map.	
Where is the <a href="#">UCEDD located</a> ? (University Center of Excellence in Developmental Disabilities)	
Where is the <a href="#">LEND Program Located</a> ? (Leadership Education in Neurodevelopmental and Related Disabilities)	
What is the name of the <a href="#">Parent Center in your state</a> ? (Parent Training & Information Center – PTI)	
Where is <a href="#">Parent to Parent</a> located in your state?	
Where is <a href="#">Family Voices located in your state</a> ? F2F Health Information Center	
Are there other family leaders or family organizations that may assist you with your action plan? Please list	
Are there professional associations or organizations that may assist? ( <a href="#">State DEC Subdivision</a> )	

Developing family leader confidence and competence, promoting equitable access for family leaders to be affirmed and meaningfully engaged in state PD system training, requires commitment.

Supporting families is critical for success. Does the state have all the needed components in place to involve a diverse representation of families in the state personnel development program? Providing the needed supports for all families is key to success. You never know what doors you may open.

We all need to be responsible for sharing the message and bringing more families to the table.

Each of us has responsibilities to share our power and privilege to create a family movement that is truly diverse in our state. We need to recruit and train families who represent and reflect the population of families receiving support and services in the state. Your family partners should mirror the population of the families you serve.

We can no longer be content with the status quo and need to step outside our comfort zone if we truly want diverse family voices involved in state personnel efforts. Professionals and families as equal partners in the work can be your reality.

We hope that this guide is a first step.



[UCONNUEDD.ORG](https://uconnuccedd.org)