Introduction

The Center to Inform Personnel Preparation Policy and Practice in Early Intervention and Early Childhood Special Education (referred to hereafter as the Center) was established in January, 2003 as a five-year project funded by the Office of Special Education Programs. The purpose of this Center is to collect, synthesize and analyze information related to: (a) certification and licensure requirements for personnel working with infants, toddlers, and preschoolers who have special needs and their families, (b) the quality of training programs that prepare these professionals, and (c) the supply and demand of professionals representing all disciplines who provide both ECSE and EI services. Information gathered will be utilized to identify critical gaps in current knowledge and design and conduct a program of research at the national, state, institutional and direct provider level to address these gaps. This program of research and policy formulation will yield information vital to developing policies and practices at all levels of government, including institutions of higher education.

At A Glance

The At A Glance... series were created to summarize the findings of each study data report. Upon completion of a Study a data report is created to summarize all data collected. The data report document is fairly large and long. An At A Glance...is then created to highlight the main findings of the study and present it in an accessible one page format. The At A Glance... can be easily distributed and used by providers, policy makers, and families to give an introduction to what was collected for that Study and then if the individual is interested the full data report can be found on our web site.
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Study I
The National Landscape of Early Intervention (EI) in Personnel Preparation Standards under Part C of the Individuals with Disabilities Education Act (IDEA)

As a way to improve service delivery for children and their families, it was essential that we examine the personnel preparation systems for EI and Early Childhood Special Education across the country. Part C Coordinators from each state, District of Columbia, and territories of Puerto Rico and Virgin Islands were invited to complete a Part C Coordinator Survey consisting of 45 multiple choice and open-ended questions. Forty-five respondents completed the survey. The survey examined issues related to organizational structures of Part C programs, personnel supply and preparation and state requirements for personnel. Results from this study will contribute to a better understanding of Part C system organizations, personnel preparation opportunities, and effective ways to obtain qualified personnel that will lead to improved policies and practices.

Part C Mandates
• The ways in which Part C is mandated varies across the 45 participating states:

State Part C Organizational Structures
• 21 different agencies were identified as Part C lead agencies. The most common lead agencies were the Department of Education (22%) and the Department of Health (20%). Part C in Department of Human Services is the lead agency in 9% of states.
• 65% of the 45 state representatives perceived their structure as stable.
• 53% reported no current threats to their state’s Part C organizational systems.
• 31% identified funding issues as a threat.
• Other threats included: reorganization within the existing agency, a new lead agency, and a lack of internal support for Part C programs.
• 38% stated their funding was stable.
• 27% stated that their funding was unstable.

Personnel Supply and Preparation
• Considerable shortages across disciplines were mentioned with 76% reporting a shortage of speech/language pathologists, followed by occupational therapists (51%), physical therapists (47%) and special educators (40%).
• Concerns were expressed about appropriate training for personnel in every discipline. Of greatest concern to respondents was the preparation of pediatricians and other physicians (33%), service coordinators (24%) and psychologists (22%).
• Respondents most frequently reported the need for additional EI training for speech/language pathologists (24%), physical therapists (24%), and occupational therapists (22%).
• 58% of respondents reported having higher education programs specific to EI professional preparation while 62% reported having additional agencies that provide EI training.
Types of Employers for EI Personnel

- 6 different types of employers of EI personnel were reported. On average, a state had 3.5 different employers for EI personnel.

Changes in State Personnel Requirements

- 40% of states have or are now modifying existing personnel requirements, such as requiring more in-service hours, having more specific requirements, adding competencies, or including more professional categories for which requirements must be fulfilled.
- 51% indicated their state has added or created new professional categories, particularly at the paraprofessional level (e.g., physical therapy assistants) in order to improve the number and quality of EI personnel.

State Credential for EI Providers

- 51% have or are now developing a credential specific to EI.
- The procedures most frequently identified by the 22 states with credentials for EI providers were competencies (73%), coursework (46%), and pre-service preparation (41%).
- 22% offer alternative methods for obtaining a certification, license or credential such as proficiency programs at universities, internships or peer review.

Obtaining Qualified Personnel in EI

Facilitators

- The most frequently identified factors that facilitate obtaining qualified personnel to deliver Part C services were:

Barriers

- The following factors were the most frequently identified barriers to obtaining qualified Part C personnel:

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Personnel Preparation and Requirements

- 98% of the 48 participants reported having higher education programs specific to ECSE.
- 56% of the 48 respondents reported making modifications to existing personnel requirements for teachers. For example, some states have increased training hours in reading instruction.

State 619 Organizational Structure

- 81% of the 48 respondents perceived their 619 organizational structures as being stable in their state.
- 44% of respondents perceived their funding as stable.
- ECSE personnel were employed by a variety of different entities, as displayed below:

ECSE Credentials

- 63% of the 48 respondents indicated that their state has developed credentials specifically for ECSE teachers.
- The most common procedures for qualifying for a credential were:
Adequacy of Supply

- Considerable shortages were reported across disciplines. The greatest shortages were reported in the following areas:

- **Physical Therapists**: 24 states reported shortages.
- **Occupational Therapists**: 27 states reported shortages.
- **Special Educators**: 29 states reported shortages.
- **Speech-Language Pathologists**: 41 states reported shortages.

Adequacy of Training

- Concerns were expressed about the training of personnel in all disciplines. The greatest number of respondents expressed concerns for:

- **Physicians**: 9 states indicated concerns.
- **Psychologists**: 11 states indicated concerns.
- **Special Educators**: 12 states indicated concerns.
- **Paraprofessionals**: 24 states indicated concerns.

Obtaining Qualified Personnel in EI

Facilitators

- The most frequently identified factors that facilitate obtaining qualified personnel to deliver ECSE services across disciplines are:

- **Specific Recruitment Strategies**: 21 states indicated facilitators.
- **Salary and/or Benefits**: 7 states indicated facilitators.
- **Standards, Certification and/or Credential**: 7 states indicated facilitators.
- **Higher Education Programs**: 7 states indicated facilitators.
- **Training Opportunities**: 3 states indicated facilitators.

Barriers

- The following factors were the most frequently identified barriers to obtaining qualified ECSE personnel:

- **Standards, Certification and/or Credential**: 21 states indicated barriers.
- **Geographic Issues**: 12 states indicated barriers.
- **Lack of Personnel Pool**: 12 states indicated barriers.
- **Higher Education Program Issues**: 14 states indicated barriers.
- **Salary and/or Benefits**: 15 states indicated barriers.

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I Staff at each of the three research sites reviewed 20% of all telephone survey data for accuracy of interpretations and data entry. An inter-rater reliability of 91% was obtained.

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Curriculum Alignment

Multidisciplinary faculty (n = 1,085) indicated if their programs’ curriculum was aligned with licensure and certification standards:

Program Goals

• Most higher education programs prepared students to become direct service providers (86%).
• Programs also prepared students to become community/inclusion consultants (31%), researchers (31%), evaluators (30%), and service coordinators (29%).
• The majority of programs prepared students to be employed in schools (76%), hospitals (58%), and clinics (57%).
• Less than half of programs prepared students to enter child care programs (42%), private residences (44%), or inclusive preschool programs (45%).

Parent Involvement in Higher Education Programs

• Parents with children with special needs were involved in 30% of programs.
• Of those programs, 30% reported that parents were most likely to participate by teaching or co-teaching a single class session, and 21% of programs reported parents were involved by teaching or co-teaching an entire semester course.
• Most parents participated as unpaid volunteers (65%).
Curricular Content

- Respondents (n = 693) indicated which of the following content areas were addressed by their programs’ courses.

Field Experiences

- Most programs required students to complete field experiences (87%).

- Field experiences with children with and without special needs were offered in 71% of programs.

- Most field experiences were with children between the ages of 5 and 21 years (67%) and between the ages of 3 and 5 years (61%). Field experiences with children under the age of 3 years were offered in about half (49%) of the programs.

Cross-Disciplinary Collaboration

- More than half of the respondents surveyed (55%) indicated that they collaborated with other programs outside of their department.

- The most common collaborative feature of programs identified was cross-disciplinary courses.

- Courses are jointly listed by multiple programs for 39% of programs. Courses are team taught by instructors from different disciplines in 37% of programs.

Program Evaluation

- Program evaluation is largely based on assessments of students performance. The forms of information most commonly cited by respondents were:

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The Center to Inform Personnel Preparation Policy and Practice in Early Intervention and Preschool Education is funded through grant #84.325J from the Office of Special Education Programs, U. S. Department and Education.

Opinions expressed herein are those of the authors and do not necessarily represent the position of the U. S. Department of Education.
Federally Funded Doctoral Programs Specific to Early Childhood Special Education

Primary Components of Curricula

- Total academic credits required to complete a program was, on average, 82.
- Required coursework and seminars made up an average of 53 academic credits.
- Coursework and seminars with a birth through five years emphasis made up, on average, 11 required credits and 7 elective credits.
- Internships and practicum for most of the programs (83%) allowed students to focus on children ages birth through five years.
- Research requirements for most of the programs (91%) allowed students to focus on children ages birth through five years.

Factors that Influence Recruitment and Retention of Doctoral Students

- Professional networking with colleagues within and across universities and community agencies was an effective means of recruitment.
- Visibility or reputation of the program facilitated student recruitment.
- Student cohorts allowed for built-in support, creating opportunities for connections to be made and for collaboration among students.
- Faculty mentorship provided students with an opportunity to enhance skills, such as: research; proposal developmental; grant writing, and manuscript development.
- Financial support allowed programs to assist with student tuition, assistantships and other stipends. Assistantships were made available by all but one of the programs reviewed. Of the programs that provide assistantships, thirty-nine percent offered them for the duration of the program and the vast majority (95%) offered them for at least two years.

Financial Support

- Amount of assistantships provided per year varied greatly, ranging from $2,500 to $29,000.

![Financial Support Chart](chart_image)
Tuition Support

- Tuition assistance is available at 91% of the programs. The level of tuition support is depicted in the table below:

<table>
<thead>
<tr>
<th>Tuition Support</th>
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<th>%</th>
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</thead>
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<tr>
<td>100%</td>
<td>18</td>
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<td>75%</td>
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<td>60%</td>
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<td>4</td>
</tr>
<tr>
<td>In-state tuition rate for all students</td>
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<td>4</td>
</tr>
<tr>
<td>0%</td>
<td>2</td>
<td>9</td>
</tr>
</tbody>
</table>

After Graduation

- Positions Obtained by Graduates varied greatly, with the largest percentage of students (41%) pursuing careers as faculty in higher education institutions.
Leadership training for future faculty members in EI/ECSE was assessed in an effort to maintain and improve services for young children with disabilities and their families. From this information, challenges and recommendations were delineated.

**Student Recruitment and Retention**

**Issue:**
- There is a shortage of future EI/ECSE faculty members.

**Suggestions:**
- Offer competitive student stipends that reflect the cost of hiring from year one until program completion.
- Advertise locally and begin recruitment with undergraduate and master’s level students.
- Make ongoing personal contacts with potential students.
- Develop options for distance students (e.g., “fly in” weekend, summer programs).
- Increase diversity by offering sign on bonuses, paid recruitment visits, and faculty role models.
- Decrease and clarify OSEP service obligations.

**Curriculum of Doctoral Programs**

**Issue:**
- Due to the small number of program faculty in EI/ECSE, the curriculum may not allow for specialization in EI/ECSE.

**Suggestions:**
- Facilitate student’s opportunities to participate in research projects matched with their interests.
- Use portfolio process to individualize curriculum based on students’ past educational and professional experiences.
- Increase content in how to conduct research in special education, grant writing, and academic writing.
- Help students connect with other leaders and students in the field through video conferences across programs, visits to other campuses, conference attendance, etc.
- Modify the dissertation format (e.g., article format) and comprehensive exams (e.g., literature reviews) to be more meaningful.

**Assessment of Student Progress and Program Quality**

**Issue:**
- There is a need to assess student progress and the quality of the program.

**Suggestions:**
- Develop valid and measurable constructs for program evaluations (e.g., time for program completion, student retention, achievement of departmental goals, student publications, student success after graduation).
- Evaluate students at multiple points across their educational experiences using diverse evaluation methods.
- Methods to assess student progress (e.g., portfolio, updated vita, advisor evaluations).
Fostering Leadership

**Issue:**
- Doctoral students must obtain the leadership skills to become future faculty members.

**Suggestions:**
- Mentor students on the specific roles of the profession and the politics of academia.
- Discuss leadership expectations with students and create leadership opportunities (e.g., through professional organizations, structured internships, and teaching).

Support Doctoral Students

**Issue:**
- There is an urgent need to increase the number of doctoral students who choose a profession in higher education.

**Suggestions:**
- Increase support to new faculty (e.g., reduced teaching loads, research support).
- Provide dual career supports, and improve the reputation of the field.

**Recommendations for Policy Makers**

The following represents the collaborative recommendations agreed upon by the Think Tank participants.

- Find a mechanism for evidence-based leadership performance indicators and create common benchmarks for high quality programs.
- Investigate supply and demand issues and EI/ECSE leadership in future Center studies.
- Increase funding for leadership projects at a high enough level to attract and retain students.
- Reinvest in student-initiated grants as a source of support for students.
- Clearly define criteria for funding leadership projects. Target funding for full-time students, to address critical faculty shortages, and to be specific to EI/ECSE.
- Target marketing of profession to diverse populations.
- Improve student mentorship by demystifying and conveying positive aspects of leadership roles.
- Find a mechanism to link projects together to share expertise and help the field to move in a unified direction.
- Utilize existing resources and create a community of practice (e.g., encourage linkages between UCEDDs and leadership programs).

For a copy of the full report go to: http://www.uconnucedd.org/projects/early_childhood/publications.html
States with Additional Requirements for Part C Providers

- A total of 22 states have training requirements for Part C providers that exceed the minimal entry level requirements for licensure and/or certification.
- Of those 22 states, 16 states have additional requirements that have been formalized as a credential (staff receive professional distinctions for completing the training).
- The other 6 states have training requirements that have not been formalized as a credential.

Types of Additional Activities Required

- State representatives (n=22) reported mandating a variety of activities to meet credential requirements.
- Training, in the form of on-line modules, workshops, or additional college coursework, was required in all 22 states.
- Eleven states have specific supervision requirements, including: weekly or monthly meetings (n=3); observation by a supervisor (n=6); and an apprenticeship/mentorship (n=7).
- Ten states required professionals to complete a portfolio. The most common components of the portfolios were records from observations (n=9); written reflections (n=9); and work samples (n=8).
Entity Creating Additional Requirements
- Of the 22 states, 17 provided information regarding the entity responsible for creating the additional requirements in their state:

Supports
- Of the 22 states, 20 reported the following sources of support most frequently while developing and implementing the additional requirements:

Barriers
- Of the 22 states, 17 mentioned the following barriers most frequently while developing and implementing the additional requirements:

For a copy of the full report go to: uconnecedd.org

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The Center to Inform Personnel Preparation Policy and Practice in Early Intervention and Preschool Education is funded through grant #84.325J from the Office of Special Education Programs, U. S. Department and Education.

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Key Conclusions:

The participants reviewed the study and concluded:

- There is great variation across states in credentialing requirements.
- There is little consistency in the methods used by states who offer an EI credential.
- The process of EI credentialing is complex and idiosyncratic across states.

Recommendations:

An EI credential should:

- Be based on evidence-based practices and competencies.
- Require demonstrations of competence within regular work activities (i.e. under supervision) or practica.
- Reflect national standards with state specific requirements.

The process to develop a state EI credential should:

- Involve stakeholders such as discipline specific professional organizations, the ICC, families, and service providers, in order to develop consensus on competencies, policies, procedures, and timelines.
- Include content/competencies derived from recommended practices in child development, family systems, IEP/IFSP, policies and professionalism, transition, teaming, and service coordination.
- Reflect national standards related to developmentally appropriate practice (i.e. NAEYC) and evidence-based practices (i.e. DEC Recommended Practices).
- Utilize surveys of service providers and post-training evaluations to identify training needs.

The Implementation of the Credential should:

- Be grounded in support from key stakeholders such as government officials, Part C administrators, ICC’s, national professional organizations, colleges and universities, providers, and families.
- Reflect collaboration between Part C and local colleges and universities.
- Include financial incentives for service providers to obtain the credential (financial, release time, payment for attending trainings, and reimbursement for tuition).
Offering a variety of professional development options allows personnel flexibility in selecting the type of instruction, location, topic, etc.

Address solutions and answers to logistical issues and concerns such as: providers’ limited time and resources; unions concerns about added personnel requirements; additional requirements might result in losing providers; losing “billable” hours while fulfilling requirements.

Components of an EI Credential should include:

- On-going training of evidence-based content and competencies with defined outcomes.
- Linkage to the state’s Comprehensive System of Personnel Development (CSPD).
- Evaluation procedures that include evidence that the required competencies, training, and practice yield an increase in child and family outcomes.
- Partnerships with professional organizations to develop consistent qualifications, requirements across disciplines.
- Both inservice and preservice training systems.
- On-site observation and regular supervision as follow-up to content-based training.
- Professional experience as a requirement.
- An accurate measures of competencies.
- Incentives such as monetary compensation for obtaining the credential.

The Evaluation of the Credential should include:

- Child outcomes that could be measured by family surveys, and norm- and criterion-referenced child assessments.
- Family outcomes that could be measured by: a survey of on service delivery, resources, IFSP development and implementation, team-building, and families’ knowledge of their rights, etc. and by pre-post evaluations.
- Service provider outcomes that could be measured by: observation/videotape; work samples and portfolios; self-assessments of competence and confidence; pre- and post-tests before and after obtaining a credential; written products such as a portfolio with IFSPs and service notes analyzed before and after credential.

All participants noted that obtaining a credential could be an important lifelong learning goal and would not affect the supply of personnel. Participants stated that adding a credential for EI personnel impacts people’s sense of belonging and has other positive outcomes.
State certification requirements for early childhood special educators (ECSE) vary by state. Several variables related to certification development were assessed. From this information, challenges and recommendations were delineated.

Aligning Multiple Systems

Issue:
- There are multiple systems of personnel preparation and/or licensing across the country in early childhood special education.

Suggestions:
- Develop a process for aligning multiple systems using “standardized” national standards.
- Develop state crosswalks for reciprocity across states.
- Develop a framework for articulation across systems (e.g., 2 and 4 year Institutes of Higher Education (IHEs)).
- Develop a process to review credentials for their relevance to the needs of the field acknowledging the need for flexibility in employment, including: career paths, information for candidates to decipher the “certification maze,” standards aligned with those of the Division of Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC).
- Address the delay of response by IHEs to certification changes through incentives and supports to align preservice and inservice development. Provide technical assistance and professional development for faculty in addressing preservice and inservice changes.

Personnel Shortage

Issue:
- There is a shortage of personnel in the field.

Suggestions:
- Design recruitment programs that offer incentives to attract the best candidates and support a diverse workforce, including those in remote areas.
- Begin recruitment programs at the high school level.
- Pool resources in the current infrastructure to recruit and retain teachers.
- Develop a system for supporting and mentoring new teachers.
Capacity Building

Issue:
• Build capacity in Institutions of Higher Education to maximize impact on the field.

Suggestions:
• Define what state policymakers should do, how this should be done, with whom, and by whom.
• Define the expected outcomes and the non-negotiables regarding certification.
• Educate stakeholders about the certification process and define their role.
• Involve ECE/ECSE experts in defining standards and competencies.

Continuum of Professional Development

Issue:
• There is a need to align preservice and ongoing professional development.

Suggestions:
• Develop partnerships between IHEs and state Departments of Education to align content and develop consistent teacher preparation.
• Develop a system for supporting and mentoring new teachers, including those in remote areas.
• Support the development and dissemination of evidence-based practices.
• Update the PRAXIS II exams or state exams to match the current knowledge in the field.

Evidence-based Preparation

Issue:
• There are insufficient data linking teacher preparation and child outcomes.

Suggestions:
• Design multifactor evaluations to analyze state and local workforce needs.
• Design evaluation systems that are linked to standards.
• Collect data specific to self-efficacy and needed supports from teachers on an ongoing basis (e.g., induction year and then periodically).
• Develop a system for employers to provide feedback to IHEs.
• Determine the cost benefits of providing alternate paths to certification.

For a copy of the full report go to: http://www.uconnucedd.org/projects/early_childhood/publications.html
Study V
Analysis of State Certification Requirements for Early Childhood Special Educators: Policy Analysis

Web searches, telephone interviews and policy analyses were used to obtain information about state certification requirements for early childhood special educators who work with preschool children with developmental delays and disabilities. Certification was defined as the set of regulated requirements that lead to initial preparation in Early Childhood Special Education (ECSE). This “At a Glance” describes the policy analysis method and results.

Comparison of State Standards with National Standards

To determine the extent to which states’ ECSE certification standards align with national ECSE standards, an item by item comparison was conducted of states’ certification standards and/or competencies to those of national standards. The national standards used in the comparison were: 1) the CEC early childhood special education knowledge and skills as well as the CEC common core knowledge and skills for all special educators (CEC, 2003), and, 2) the NAEYC early childhood personnel standards, if relevant (Hyson, 2003). NAEYC standards were used for the states with ECE and ECSE blended certification and states that added ECSE endorsement on ECE certification. A purposeful sampling of states was used to ensure that the sample reflected the 5 major certification models found to be used by states for certifying personnel to work with young children with delays and disabilities: 1) ECSE, 2) Special Education, 3) Blended ECE and ECSE, 4) ECSE endorsement on ECE or regular education certification, 5) ECSE endorsement on special education certification. The sampling included one state’s two certification models.

Percent of CEC ECSE and Common Core Standards Met by States’ Policies

- Three (17%) of the states’ policies meet or nearly meet 100% of the CEC combined standards for ECSE and common core. These state certification policies either align directly with the CEC combined standards or they stipulate in writing they adopt the CEC combined standards.
- Two (11%) of the states’ policies meet 56% and 81% of the CEC combined standards.
- Thirteen (70%) of the states’ policies meet 52% or less of the CEC standards.
Percent of CEC Common Core vs. CEC Early Childhood Special Education Standards Met By States’ Policies

- States’ ECSE certification policies meet a higher percent of the CEC early childhood special education (ECSE) standards than the CEC common core (CC) standards.
- Eight of the state’s policies meet or exceed 50% of the CEC ECSE standards, while 5 state policies meet or exceed 50% of the CEC common core standards.

Percent of NAEYC ECE Standards Met by Each State’s Policies

- Of the states with ECE and ECSE blended certification or that added ECSE endorsement on ECE certification, four (66%) state policies met 53% or more of the NAEYC standards.

References


For a copy of the full report go to: www.uconnucedd.org

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Web searches, telephone interviews and policy analyses were used to obtain information about state certification requirements for early childhood special educators who work with preschool children with developmental delays and disabilities. This “At a Glance” identifies definitions used for the study, the certification models identified, and the rationale for selecting those models.

**Definition of Terms**
- Certification – the set of regulated requirements that lead to initial preparation in Early Childhood Special Education (ECSE).
- Endorsement – the set of regulated ECSE requirements that are in addition to the requirements for a specific certificate, such as Early Childhood Education (ECE), K-12 special education.
- Blended ECE and ECSE certification – the set of regulated requirements that lead to initial preparation in both ECE and ECSE through a single certificate.

**States with Single Routes/Options for Personnel to Teach Preschoolers with Developmental Delays and Disabilities**
- Twenty-six of the 38 (68%) states represented have one certification model.
- Twenty of the states’ certification models were competency or standards based.

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<thead>
<tr>
<th>States’ Certification Models</th>
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<th>%</th>
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<tbody>
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<td>ECSE</td>
<td>13</td>
<td>50</td>
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<tr>
<td>ECSE Endorsement</td>
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<td>Blended ECE &amp; ECSE</td>
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<tr>
<td>Birth – 8 years</td>
<td>5</td>
<td>19</td>
</tr>
<tr>
<td>3 – 5 years</td>
<td>4</td>
<td>15</td>
</tr>
<tr>
<td>3 years – grade 12</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Birth – 6 years</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Birth – grade 2</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Birth – grade 4</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>3 years – grade 2</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>3 years – grade 3</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>3 – 20 years</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>* K – grade 12 and Birth – 5 years</td>
<td>1</td>
<td>4</td>
</tr>
</tbody>
</table>

**States with Multiple Routes/Options for Personnel to Teach Preschoolers with Developmental Delays and Disabilities**
- Twelve of the 38 (32%) states represented have two or more certifications and/or endorsements.
- Nine of these states’ have competency or standards based certifications or endorsements.
Rationale for Certification Models:

Respondents identified five primary models of certification to qualify personnel to teach preschoolers with developmental delays and disabilities. When asked the rationale for developing a specific model, responses were grouped into one or more themes. The models and themes are identified below:

- **ECSE certification:** (1) Consistency with national and state policies, (2) changes/trends in the field for increased preschool services, (3) depth of preparation in ECSE knowledge and skills.
- **ECSE endorsement:** (1) Legislative mandates for services for preschool age children, (2) political climate within the state that does not support “strong certification requirements” for preschool programs.
- **Blended ECE and ECSE certification:** (1) Preparation of personnel to work in inclusive community settings, (2) preparation of personnel for inter- and intra-agency collaboration and (3) professionalism of personnel and the field.
- **Special education certification:** Supply and demand in rural states with primarily itinerant services.
- **Two endorsements (i.e., special education and ECSE, special education and ECE):** (1) Preparation of personnel to work in inclusive community settings, (2) preparation to work with preschoolers, not just students K-12.

For a copy of the full report go to: uconnucedd.org
Study V
Analysis of State Certification Requirements for Early Childhood Special Educators: Certification Models

Web searches, telephone interviews and policy analyses were used to obtain information about state certification requirements for early childhood special educators who work with preschool children with developmental delays and disabilities. This “At a Glance” identifies definitions used for the study, certification requirements specific to university programs, required certification exams, and induction to the field policies.

Definition of Terms
- **Certification** – the set of regulated requirements that lead to initial preparation in Early Childhood Special Education (ECSE).
- **Endorsement** – the set of regulated ECSE requirements that are in addition to the requirements for a specific certificate, such as Early Childhood Education (ECE), K-12 special education.
- **Induction** – a systemic process identified in state policy through which the development of beginning educators is supported in order to help them become competent professionals and to facilitate retention in the field.

Certification Requirements Specific to University Programs
- In 35 (92%) of the 38 responding states, the certification and/or endorsement can be obtained at the baccalaureate level.
- Twenty-three (61%) of the responding states have specific admission requirements for university/college teacher education programs that lead to the required ECSE certification and/or endorsement.
- Seven (18%) of the states allow the university/college to determine the admission requirements.
- Eighteen (47%) of the states require the PRAXIS I exam as part of the admission requirements (see [http://www.ets.org](http://www.ets.org) for exams required and minimum scores).
- Ten states (38%) require a state developed exam as part of the admission requirements.

Certification Exam Requirements
- After completing a university/college program, the majority of states (n=26, 69%) responding require a nationally validated or a state developed exam to qualify for the state’s certification/endorsement.
- Seventeen of those states (65%) require one or more PRAXIS II exams (see [http://www.ets.org](http://www.ets.org) for exams required and minimum scores).
- Ten states (38%) require a state developed exam.
- Seventeen different PRAXIS II exams are required by those states with the relevance to the certification varying across exams and states.
• The 17 exams that are used by states are:

<table>
<thead>
<tr>
<th>PRAXIS II Exam</th>
<th>n</th>
<th>*%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education of Exceptional Students: Core Content Knowledge</td>
<td>5</td>
<td>29</td>
</tr>
<tr>
<td>Special Education: Preschool/Early Childhood</td>
<td>5</td>
<td>29</td>
</tr>
<tr>
<td>Education of Young Children</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td>Elementary Education: Content Knowledge</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td>Special Education: Application of Core Principles Across Categories of Disability (Exceptional Children 1-8)</td>
<td>2</td>
<td>12</td>
</tr>
<tr>
<td>Early Childhood Education</td>
<td>2</td>
<td>12</td>
</tr>
<tr>
<td>Elementary Education: Curriculum, Instruction, and Assessment</td>
<td>2</td>
<td>12</td>
</tr>
<tr>
<td>Principles of Learning and Teaching: Grades K-6</td>
<td>2</td>
<td>12</td>
</tr>
<tr>
<td>Exceptional Needs: Mild Intervention</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Reading Across the Curriculum: Elementary</td>
<td>1</td>
<td>6</td>
</tr>
</tbody>
</table>

* Percentages total more than 100% as seven of the 17 states require more than one exam.

**Induction to the Field**

• Twenty-five of the responding states (66%) require individuals to complete some type of induction to the field to become fully certified.

• Induction requirements are as follows:

<table>
<thead>
<tr>
<th>Induction Requirements</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mentorship – One year</td>
<td>12</td>
<td>32</td>
</tr>
<tr>
<td>Mentorship – Two years</td>
<td>4</td>
<td>11</td>
</tr>
<tr>
<td>Mentorship – Three years</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Mentorship – Years not specified</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Mentorship – One Year, Courses, Seminars</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Mentorship and PD Plan</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Mentorship, PD Plan, Portfolio</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Individualized with LEA and IHE</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Pass state performance assessment</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>None specified</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>

For a copy of the full report go to: uconnucedd.org
Definition of Training Systems

A training system was defined as having all of the following elements: (1) dedicated funding, (2) staffing, (3) oversight by a dedicated agency, (4) a procedure to determine professional development expectations, (5) training content, (6) quality assurance, (7) identified and measured outcomes, (8) is ongoing, (9) has structure for delivery, (10) work-place applicability. Out of the 51 states and territories included in this study, only 20 states met these criteria. The following reports trends within the sample of 20 states with a training system.

Participants

The graph below displays the training participants across the 20 states:

Identification of Training Needs

The graph below displays methods used by states to determine training needs:
Content

As displayed below, Part C Coordinators listed the following training topics:

- Data Management
- Risk Factors
- Child Development
- Disability Specific
- Family Collaboration
- Policies/Procedures
- Service Delivery

Delivery of Training

Training was delivered using the following methods:

- Applied Learning
- Annual Meeting
- Distance Learning
- Workshops

Incentives for Trainees

Several types of incentives were provided for trainees, as displayed below:

- Stipends
- Travel Reimbursement
- Free Training
- Paid Time

Evaluation of Training

Eighteen states utilized trainee surveys or feedback forms to evaluate training.

The impact of the training over time was measured in 14 states while performing monitoring visits. Seven states administered follow-up surveys to trainees a month or longer after the training, and one state observed trainees performing job duties (i.e., writing IEP's) to evaluate the effectiveness of their training.
Study VI
State Technical Assistance Systems for Part C Personnel

This study identifies and describes states that currently have processes and mechanisms for the delivery of technical assistance (TA) to early intervention professionals under Part C of IDEA 2004. Part C Coordinators from 51 states and territories completed semi-structured phone interviews. Interviews examined how TA systems were funded, who participated in TA, who provided TA, how it was delivered, how TA needs were assessed, the content of TA, and how outcomes are assessed and quality assured. Information from the interview was used to categorize whether or not states had a system in place for TA based on a definition developed by the researchers.

Definition of Technical Assistance Systems

A TA system was defined as having all of the following elements: (1) dedicated funding, (2) staffing, (3) oversight by a dedicated agency, (4) a procedure to determine professional development expectations, (5) technical assistance content, (6) quality assurance, (7) identified and measured outcomes, (8) work-place applicability, (9) provides individual professional development, and (10) problem-solving services. Of the 51 states and territories included in the study, only 12 met these criteria. The following reports trends within the sample of 12 states with a TA system.

Participants

The graph below displays the TA participants across the 12 states:

Identification of TA Needs

The graph below displays methods used by states to determine TA needs:
Content

As displayed below, Part C Coordinators listed the following TA topics:

- Risk Topics
- Family Collaboration
- Professional Development
- Policies/Procedures
- Disability Specific
- Data Management
- Service Delivery

Incentives for Trainees

Several types of incentives were provided for trainees, as displayed below:

- Reimbursed for Travel
- Linked to Certification
- Linked to Credential
- Paid Time
- TA is Required

Evaluation of TA

Nine states utilized monitoring data to ensure the quality of TA. Two states used feedback mechanisms (e.g., general effectiveness surveys, quarterly progress reports from programs), one state used trainee evaluation forms, and TA was observed by a supervisor in one state.

For a copy of the full report go to: www.uconnucedd.org
Study VI
State Training Systems for Section 619 Personnel

This study identifies and describes states that currently have well-developed processes and mechanisms for the delivery of training under section 619 of IDEA 2004. These findings are based on information provided by 45 state-level 619 coordinators. The interviews examined how training systems were funded, who participated, who provided the training, how it was delivered, how training needs were assessed, the content of training, and how outcomes are assessed and quality assured.

Definition of Training Systems

A training system was defined as having all of the following elements: (1) dedicated funding, (2) staffing, (3) oversight by a dedicated agency, (4) determines professional development expectations, (5) training content, (6) quality assurance, (7) identifies and measures outcomes, (8) is ongoing, (9) has a structure for delivery, (10) has work-place applicability. Of the 45 states included in this study, approximately half met these criteria (23 states). The following reports trends within the sample of 23 states with a training system.

Participants

The graph below displays the training participants across the 23 states:

Identification of Training Needs

The graph below displays methods used by states to determine training needs:
Content

As displayed below, state coordinators listed the following training topics:

- Child Development
- Risk Factors
- Family Collaboration
- Professional Development
- Disability Specific
- Policies/Procedures
- Data Management
- Service Delivery

Delivery of Training

Training was delivered using the following methods:

- Written Material
- Applied Learning
- Regular Staff Meetings
- Distance Learning
- Conferences
- Workshops

Incentive for Trainees

Several types of incentives were provided for trainees, as displayed below:

- Decided Locally
- Reimbursed for travel
- Other (e.g., networking)
- Free Training
- Paid Time
- Stipends
- CEUs

Evaluation of Training

Nine states utilized a feedback form or survey as the primary method of evaluating the quality of training opportunities. Eight states assured the impact of training through monitoring, five states used a follow-up evaluation form, and five linked it to another type of feedback mechanism.

For a copy of the full report go to: www.uconnucedd.org
Definition of Technical Assistance Systems

A TA system was defined as having all of the following elements: (1) dedicated funding, (2) staffing, (3) oversight by a dedicated agency, (4) a procedure to determine professional development expectations, (5) technical assistance content, (6) quality assurance, (7) identifies and measures outcomes, (8) has work-place applicability, (9) provides individual professional development, and (10) problem-solving services. Of the 45 states included in this study, 20 met this criteria. The following reports trends within the sample of 20 states with a TA system.

Participants

The graph below displays the TA participants across the 20 states:

Identification of Training Needs

The graph below displays methods used by states to determine TA needs:
Content

As displayed below, 619 Coordinators listed the following TA topics:

<table>
<thead>
<tr>
<th>Professional Development</th>
<th>Family Collaboration</th>
<th>Disability Specific</th>
<th>Data Management</th>
<th>Policies/Procedures</th>
<th>Service Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Incentive for Trainees

Several types of incentives were provided for trainees, as displayed below:

- Decided Locally
- Reimbursed for travel
- CEUs
- Free TA
- Stipends
- Other (e.g., flexible hours)
- Paid Time

Delivery of Training

TA was delivered using the following methods:

<table>
<thead>
<tr>
<th>Regular Staff Meetings</th>
<th>Applied Learning</th>
<th>Written Material</th>
<th>Conferences</th>
<th>Distance Learning</th>
<th>Phone Calls/Emails</th>
<th>Workshops</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Evaluation of TA

Eleven states used a trainee evaluation form or survey as the primary method of evaluating the quality of TA opportunities. Seven states ensured the impact of TA through monitoring, three states had supervisors observe TA sessions/classrooms, two states utilized trainee exams, and two states considered the verbal feedback of TA recipients.

For a copy of the full report go to: www.uconnucedd.org
Study VII
Competence and Confidence of Practitioners Working with Children with Disabilities

This study assessed the level of competence and confidence of personnel who provide services under Part C under IDEA of 2004. Part C providers from 45 states and territories completed an online survey created for this study. The survey focused on the following eight domains of competence and confidence: Family-Centered Practice; Assessment and Evaluation; IFSP Practices; Instructional Practices; Natural Learning Environment; Collaboration and Teaming; and Early Literacy Learning. Information from the interview was used to identify strengths and weaknesses in the selected domains.

Participant Characteristics

1,084 local providers from 45 states and territories completed the survey. The majority who responded were white (93%) and female (98%), and they were divided into the age groups of less than 40 (37%), 41 to 50 (30%), and older than 51 (31%). The majority held a master's degree (63%) and one-third held a bachelor's degree. The majority of respondents were certified as educators (53%), and 40% were certified as therapists (i.e., OT, OTR/L, PT, and SLP).

Competence and Confidence Domains

The survey contained a total of 47 items of which 19 elicited background information. The remaining questions were made up of two questions that pertained to competence and two questions that pertained to confidence for each of seven early childhood domains listed on the following chart.

Overview of Findings

As displayed below, findings suggest that practitioners reported being “always” or “almost always” more confident than competent in most of the practice areas.
Competence Areas by Profession

Below are data from participants in the study who rated themselves as “always” or “almost always” competent in the following domains.

<table>
<thead>
<tr>
<th>Types of Practice</th>
<th>SE/ECSE (n=384)</th>
<th>SLP (n=234)</th>
<th>EC (n=193)</th>
<th>OT (n=106)</th>
<th>PT (n=89)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family-Centered Practice</td>
<td>16%</td>
<td>5%</td>
<td>5%</td>
<td>5%</td>
<td>2%</td>
</tr>
<tr>
<td>Assessment Practices</td>
<td>35%</td>
<td>31%</td>
<td>26%</td>
<td>26%</td>
<td>26%</td>
</tr>
<tr>
<td>Achieving IFSP/IEP Outcomes</td>
<td>6%</td>
<td>8%</td>
<td>6%</td>
<td>11%</td>
<td>12%</td>
</tr>
<tr>
<td>Instructional Practices</td>
<td>13%</td>
<td>12%</td>
<td>18%</td>
<td>7%</td>
<td>18%</td>
</tr>
<tr>
<td>Natural Environments/ LRE</td>
<td>11%</td>
<td>13%</td>
<td>18%</td>
<td>20%</td>
<td>55%</td>
</tr>
<tr>
<td>Collaboration/Teaming</td>
<td>42%</td>
<td>43%</td>
<td>36%</td>
<td>25%</td>
<td>24%</td>
</tr>
<tr>
<td>Early Literacy</td>
<td>21%</td>
<td>20%</td>
<td>25%</td>
<td>12%</td>
<td>11%</td>
</tr>
</tbody>
</table>

Types of Trainings

Additionally, participants were asked to identify the types of training they received (participants were allowed to list more than one training).

For a copy of the full report go to: www.uconnucedd.org
Study VII
Competence and Confidence of Practitioners Working with Children with Disabilities

This study assessed the level of competence and confidence of personnel who provide services under Section 619 under IDEA of 2004. Section 619 providers from 38 states completed the online survey created for this study. The survey focused on the following seven domains of competence and confidence: Family-Centered Practice; Assessment and Evaluation; IFSP Practices; Instructional Practices; Natural Learning Environment; Collaboration and Team; and Early Literacy Learning. Information from the interview was used to identify strengths and weaknesses in the selected domains.

Participant Characteristics

735 local providers from 38 states completed the survey. The majority who responded were white (95%) and female (97%), and they were divided into the age groups of less than 40 (38%), 41 to 50 (28%), and older than 51 (33%). The majority held a master’s degree (70%) and roughly one-quarter held a bachelor’s degree (26%). The majority of respondents were certified as educators (84%), and 22% were certified as therapists (i.e., OT, OTR/L, PT, and SLP).

Competence and Confidence Domains

The survey contained a total of 47 items of which 19 elicited background information. The remaining questions were made up of two questions that pertained to competence and two questions that pertained to confidence for each of seven early childhood domains listed on the following chart.

Overview of Findings

As displayed below, findings suggest that practitioners reported being “always” or “almost always” more confident than competent in most of the practice areas.
Competence Areas by Profession

Below are data from participants in the study who rated themselves as “always” or “almost always” competent in the following domains.

<table>
<thead>
<tr>
<th>Types of Practice</th>
<th>SE/ECSE (n= 470)</th>
<th>EC (n= 222)</th>
<th>SLP (n= 106)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family-Centered Practice</td>
<td>6%</td>
<td>7%</td>
<td>6%</td>
</tr>
<tr>
<td>Assessment Practices</td>
<td>32%</td>
<td>31%</td>
<td>35%</td>
</tr>
<tr>
<td>Achieving IFSP/ IEP Outcomes</td>
<td>10%</td>
<td>11%</td>
<td>6%</td>
</tr>
<tr>
<td>Instructional Practices</td>
<td>15%</td>
<td>20%</td>
<td>8%</td>
</tr>
<tr>
<td>Natural Environments/ LRE</td>
<td>12%</td>
<td>12%</td>
<td>19%</td>
</tr>
<tr>
<td>Collaboration/ Teaming</td>
<td>49%</td>
<td>49%</td>
<td>36%</td>
</tr>
<tr>
<td>Early Literacy</td>
<td>15%</td>
<td>19%</td>
<td>16%</td>
</tr>
</tbody>
</table>

Types of Trainings

Additionally, participants were asked to identify the types of training they received (participants were allowed to list more than one training).

For a copy of the full report go to: www.uconnucedd.org
Comparison of IHE Curricula with National Standards
To determine the extent to which IHE's ECSE curricula align with national standards, Center faculty completed a content analysis of all syllabi and other relevant program documents. All components of the documents were reviewed (e.g., course objectives, course outline, assignments, topics and related readings). The national standards used in the comparison were: the CEC/DEC early childhood special education knowledge and skills, the CEC Common Core knowledge and skills (CEC, 2003), and the NAEYC early childhood personnel standards, if relevant (Hyson, 2003). NAEYC standards were used for the states with ECE and ECSE blended certification, states that added ECSE endorsement on ECE certification, and those states that added ECE endorsement onto ECSE. One senior investigator completed the content analysis. Percentages of standards represented in the IHE documents that matched the national standards were computed by certification model, in comparison to the standards represented by the respective state's certification model, in comparison to the degree of inclusion in undergraduate and graduate programs, and in comparison across programs that focus on preparation for different age ranges. See the data report for the latter two comparisons.

Characteristics of IHEs/Programs
- Results for 15 IHE programs - three IHE programs per each of the five certification models.
- Geographically representative of the United States.
- 8 master's programs; 3 baccalaureate programs; 4 combination master's and baccalaureate analyzed.
- Size based on student enrollment ranging from 1,683 to 46,174.
- Number of program syllabi ranging from 6 to 24.

IHE Curricula Alignment with National Personnel Standards
- Program documents for the 15 universities/colleges reported in this report were analyzed in comparison to the personnel standards of CEC, CEC/DEC, and NAEYC.
- common core 33% to 93%
- ECSE 21% to 98%,
- NAEYC 84% to 100%.

<table>
<thead>
<tr>
<th>IHE Model</th>
<th>% CC &amp; ECSE (n=167)</th>
<th>% CC, ECSE, &amp; NAEYC (n=186)</th>
<th>% CC (n=125)</th>
<th>% ECSE (n=42)</th>
<th>% NAEYC (n=19)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 ECSE</td>
<td>80</td>
<td>NA</td>
<td>78</td>
<td>86</td>
<td>NA</td>
</tr>
<tr>
<td>2 ECSE</td>
<td>56</td>
<td>NA</td>
<td>56</td>
<td>57</td>
<td>NA</td>
</tr>
<tr>
<td>3 ECSE</td>
<td>71</td>
<td>NA</td>
<td>68</td>
<td>81</td>
<td>NA</td>
</tr>
<tr>
<td>4 ECSE on SPE</td>
<td>78</td>
<td>NA</td>
<td>74</td>
<td>93</td>
<td>NA</td>
</tr>
<tr>
<td>5 ECSE on SPE K-12</td>
<td>69</td>
<td>NA</td>
<td>70</td>
<td>67</td>
<td>NA</td>
</tr>
<tr>
<td>6 ECSE on SPE K-12</td>
<td>77</td>
<td>NA</td>
<td>73</td>
<td>88</td>
<td>NA</td>
</tr>
<tr>
<td>7 Blended</td>
<td>66</td>
<td>70</td>
<td>66</td>
<td>69</td>
<td>100</td>
</tr>
<tr>
<td>8 Blended</td>
<td>56</td>
<td>59</td>
<td>58</td>
<td>48</td>
<td>84</td>
</tr>
<tr>
<td>9 Blended</td>
<td>74</td>
<td>76</td>
<td>69</td>
<td>88</td>
<td>95</td>
</tr>
<tr>
<td>10 ECSE on ECE</td>
<td>94</td>
<td>94</td>
<td>93</td>
<td>98</td>
<td>95</td>
</tr>
<tr>
<td>11 ECSE on ECE</td>
<td>70</td>
<td>73</td>
<td>69</td>
<td>74</td>
<td>95</td>
</tr>
<tr>
<td>12 ECSE on ECE</td>
<td>60</td>
<td>64</td>
<td>54</td>
<td>76</td>
<td>100</td>
</tr>
<tr>
<td>13 Special Education</td>
<td>57</td>
<td>NA</td>
<td>62</td>
<td>43</td>
<td>NA</td>
</tr>
<tr>
<td>14 Special Education</td>
<td>43</td>
<td>NA</td>
<td>50</td>
<td>21</td>
<td>NA</td>
</tr>
<tr>
<td>15 Special Education</td>
<td>34</td>
<td>NA</td>
<td>33</td>
<td>38</td>
<td>NA</td>
</tr>
</tbody>
</table>

CC = CEC Common Core, ECSE = CEC/DEC ECSE standards, NAEYC = NAEYC standards

Total Number and Percentage of Personnel Standards Addressed by IHE Programs

This study was conducted to determine the extent to which institutions of higher education (IHE) Early Childhood Special Education (ECSE) curricula align with DEC, CEC, and NAEYC (as appropriate) personnel standards. A previous Center study (The Center to Inform Policy and Practice in Personnel Preparation for Early Intervention and Preschool Education, 2008) identified the following certification models in ECSE: (1) ECSE, (2) Special Education, (3) Blended Early Childhood Education (ECE/ECSE), (4) ECSE endorsement on ECE or special education certification, (5) ECE endorsement on special education certification, and (6) ECSE endorsement on special education certification and completed an item-by-item content analysis comparing state certification standards. Three states were randomly selected per model. As a follow-up to that analysis, IHEs in those states with degree programs approved to result in the respective state certification/endorsement were identified. Program syllabi, descriptions, and handbooks were analyzed to determine the extent to which IHE curricula in ECSE are based on national personnel standards. The percentage of standards in IHE curricula and state certification policies were also compared.
Comparison of National Personnel Standards in IHE Curricula and State Certification Requirements

- A greater percentage of the standards are addressed in nine of the IHE curricula than in their respective state policies.
- A greater percentage of standards are addressed in five of the state's policies than in the IHE curricula.

Comparison of the CEC Common Core, ECSE, and NAEYC Personnel Standards Across IHE Curricula and State Policies

- Each of the three sets of national standards is incorporated at a higher percentage in IHE curricula than in state policy.

Comparison of National Personnel Standards in IHE Curricula and State Certification Policies

<table>
<thead>
<tr>
<th>IHE</th>
<th>Model</th>
<th>% CC &amp; ECSE Standards in IHE Curricula</th>
<th>% CC &amp; ECSE Standards in State Certification Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ECSE</td>
<td>80</td>
<td>38</td>
</tr>
<tr>
<td>2</td>
<td>ECSE</td>
<td>56</td>
<td>56</td>
</tr>
<tr>
<td>3</td>
<td>ECSE</td>
<td>71</td>
<td>100</td>
</tr>
<tr>
<td>4</td>
<td>ECSE on SPE</td>
<td>78</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>ECSE on SPE K-12</td>
<td>69</td>
<td>41</td>
</tr>
<tr>
<td>6</td>
<td>ECSE on SPE K-12</td>
<td>77</td>
<td>10</td>
</tr>
<tr>
<td>7</td>
<td>Blended</td>
<td>66</td>
<td>14</td>
</tr>
<tr>
<td>8</td>
<td>Blended</td>
<td>56</td>
<td>21</td>
</tr>
<tr>
<td>9</td>
<td>Blended</td>
<td>74</td>
<td>13</td>
</tr>
<tr>
<td>10</td>
<td>ECSE on ECE</td>
<td>94</td>
<td>100</td>
</tr>
<tr>
<td>11</td>
<td>ECSE on ECE</td>
<td>70</td>
<td>98</td>
</tr>
<tr>
<td>12</td>
<td>ECSE on ECE</td>
<td>60</td>
<td>98</td>
</tr>
<tr>
<td>13</td>
<td>Special Education</td>
<td>57</td>
<td>19</td>
</tr>
<tr>
<td>14</td>
<td>Special Education</td>
<td>43</td>
<td>0</td>
</tr>
<tr>
<td>15</td>
<td>Special Education</td>
<td>34</td>
<td>39</td>
</tr>
</tbody>
</table>

CC = CEC Common Core, ECSE = CEC/DEC ECSE standards

Comparison of the Percentage of CEC Common Core, ECSE, and NAEYC Standards across IHE Curricula and State Policies

<table>
<thead>
<tr>
<th>IHE</th>
<th>Model</th>
<th>CC in IHE Curricula</th>
<th>CC in State Policy</th>
<th>ECSE in IHE Curricula</th>
<th>ECSE in State Policy</th>
<th>NAEYC in IHE Curricula</th>
<th>NAEYC in State Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ECSE</td>
<td>78</td>
<td>86</td>
<td>50</td>
<td>100</td>
<td>95</td>
<td>100</td>
</tr>
<tr>
<td>2</td>
<td>ECSE</td>
<td>56</td>
<td>57</td>
<td>68</td>
<td>98</td>
<td>98</td>
<td>98</td>
</tr>
<tr>
<td>3</td>
<td>ECSE</td>
<td>68</td>
<td>81</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>4</td>
<td>ECSE on SPE</td>
<td>74</td>
<td>93</td>
<td>0</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>5</td>
<td>ECSE on SPE K-12</td>
<td>70</td>
<td>67</td>
<td>48</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>6</td>
<td>ECSE on SPE K-12</td>
<td>73</td>
<td>7</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>7</td>
<td>Blended</td>
<td>66</td>
<td>69</td>
<td>27</td>
<td>100</td>
<td>90</td>
<td>100</td>
</tr>
<tr>
<td>8</td>
<td>Blended</td>
<td>58</td>
<td>48</td>
<td>59</td>
<td>84</td>
<td>88</td>
<td>88</td>
</tr>
<tr>
<td>9</td>
<td>Blended</td>
<td>69</td>
<td>88</td>
<td>27</td>
<td>95</td>
<td>95</td>
<td>95</td>
</tr>
<tr>
<td>10</td>
<td>ECSE on ECE</td>
<td>93</td>
<td>98</td>
<td>100</td>
<td>95</td>
<td>95</td>
<td>95</td>
</tr>
<tr>
<td>11</td>
<td>ECSE on ECE</td>
<td>69</td>
<td>74</td>
<td>98</td>
<td>95</td>
<td>98</td>
<td>98</td>
</tr>
<tr>
<td>12</td>
<td>ECSE on ECE</td>
<td>54</td>
<td>76</td>
<td>98</td>
<td>100</td>
<td>98</td>
<td>98</td>
</tr>
<tr>
<td>13</td>
<td>Special Education</td>
<td>62</td>
<td>43</td>
<td>7</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>14</td>
<td>Special Education</td>
<td>50</td>
<td>21</td>
<td>0</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>15</td>
<td>Special Education</td>
<td>33</td>
<td>18</td>
<td>42</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

CC = CEC Common Core, ECSE = CEC/DEC ECSE standards, NAEYC = NAEYC standards

For a copy of the full report go to: www.uconnucedd.org

Prepared by: A. J. Pappanikou Center for Excellence in Developmental Disabilities
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Farmington, Connecticut 06030-6222

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Opinions expressed herein are those of the authors and do not necessarily represent the position of the U. S. Department of Education.
Study IX
Parent Perceptions of Competence & Confidence of Practitioners Working with Children with Disabilities

The purpose of this study was to better understand parent perceptions of early intervention personnel who provide services under Part C of IDEA 2004. Information gathered from the Parent Perceptions of the Confidence and Competence of Service Providers Survey is presented in this report. Results were used to identify strengths and weaknesses in several areas of early intervention.

Participant Characteristics
174 parents from 23 states and territories completed the survey. The majority who responded were white (64%) and female (98%). Valid ages ranged from 17 to 44 years old with the majority of participants reporting an age between 17 and 25 (80%). The majority held a college degree (42%), and most were married (86%).

The Survey
The survey consisted of 59 questions, 19 of which were designed to collect demographic and background information about the respondent and child. The remaining 40 questions assessed parent perceptions of the competency and confidence, as well as, overall satisfaction of their child’s primary service provider.

Confidence and Competence Results
As displayed below, findings suggest that parents feel their child’s service providers are more confident than competent in all seven areas of practice. Overall parent perceptions was determined by percentage of respondents who reported “always” or “almost always” on a 7-point scale to two items assessing each domain.
**Parental Satisfaction Results**

As displayed below, overall parental satisfaction varied by service provider type. Satisfaction was determined by percentage of parents who indicated their child’s service provider did an “excellent”, “very good” or “good” job on a 5-point scale providing assistance to the child and family.

<table>
<thead>
<tr>
<th>Service Provider Type</th>
<th>Physical Therapist</th>
<th>Special Ed. Teacher</th>
<th>Speech/ Lang. Therapist</th>
<th>Occupat. Therapist</th>
<th>All Other Service Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managing child’s chronic condition</td>
<td>100%</td>
<td>93%</td>
<td>90%</td>
<td>100%</td>
<td>89%</td>
</tr>
<tr>
<td>Providing general health care</td>
<td>77%</td>
<td>73%</td>
<td>88%</td>
<td>90%</td>
<td>50%</td>
</tr>
<tr>
<td>Help in coordinating care</td>
<td>94%</td>
<td>89%</td>
<td>83%</td>
<td>90%</td>
<td>82%</td>
</tr>
<tr>
<td>Communicating with other providers</td>
<td>91%</td>
<td>86%</td>
<td>71%</td>
<td>95%</td>
<td>78%</td>
</tr>
<tr>
<td>Effort to be flexible</td>
<td>94%</td>
<td>97%</td>
<td>85%</td>
<td>100%</td>
<td>94%</td>
</tr>
<tr>
<td>Sensitivity to background and beliefs</td>
<td>100%</td>
<td>100%</td>
<td>94%</td>
<td>93%</td>
<td>85%</td>
</tr>
<tr>
<td>Really listening to your opinions</td>
<td>100%</td>
<td>96%</td>
<td>88%</td>
<td>95%</td>
<td>86%</td>
</tr>
<tr>
<td>Ability to answer questions about condition</td>
<td>88%</td>
<td>80%</td>
<td>84%</td>
<td>95%</td>
<td>83%</td>
</tr>
<tr>
<td>Amount of information and guidance</td>
<td>85%</td>
<td>78%</td>
<td>78%</td>
<td>100%</td>
<td>78%</td>
</tr>
<tr>
<td>Referral to other providers as needed</td>
<td>93%</td>
<td>85%</td>
<td>79%</td>
<td>100%</td>
<td>77%</td>
</tr>
<tr>
<td>Putting you in touch with other parents</td>
<td>55%</td>
<td>56%</td>
<td>54%</td>
<td>89%</td>
<td>64%</td>
</tr>
<tr>
<td>Understanding condition’s impact on family</td>
<td>84%</td>
<td>87%</td>
<td>72%</td>
<td>79%</td>
<td>83%</td>
</tr>
<tr>
<td>Mean Overall Satisfaction</td>
<td>88%</td>
<td>85%</td>
<td>81%</td>
<td>94%</td>
<td>79%</td>
</tr>
</tbody>
</table>

For a copy of the full report go to: uconnucedd.org
The purpose of this study was to better understand parent perceptions of early childhood special education personnel who provide services under Section 619 of IDEA 2004. Information gathered from the Parent Perceptions of the Confidence and Competence of Service Providers Survey is presented in this report. Results were used to identify strengths and weaknesses in several areas of early childhood special education.

**Participant Characteristics**

201 parents from 30 states and territories completed the survey. The majority who responded were white (65%) and female (95%). Valid ages ranged from 17 to 52 years old with the majority of participants reporting an age between 17 and 25 (74%). The majority held a college degree (45%) and most were married (83%).

**The Survey**

The survey consisted of 59 questions, 19 of which were designed to collect demographic and background information about the respondent and child. The remaining 40 questions assessed parent perceptions of the competency and confidence, as well as, overall satisfaction of their child’s primary service provider.

**Confidence and Competence Results**

As displayed below, findings suggest that parents feel their child’s service providers are more confident than competent in all seven areas of practice. Overall parent perceptions was determined by percentage of respondents who reported “always” or “almost always” on a 7-point scale to two items assessing each domain.
Parental Satisfaction Results

As displayed below, overall parental satisfaction varied by service provider type. Satisfaction was determined by percentage of parents who indicated their child’s service provider did an “excellent”, “very good” or “good” job on a 5-point scale providing assistance to the child and family.

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Special Ed. Teacher</th>
<th>All Other Service Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managing child’s chronic condition</td>
<td>78%</td>
<td>78%</td>
</tr>
<tr>
<td>Providing general health care</td>
<td>79%</td>
<td>68%</td>
</tr>
<tr>
<td>Help in coordinating care</td>
<td>58%</td>
<td>62%</td>
</tr>
<tr>
<td>Communicating with other providers</td>
<td>71%</td>
<td>64%</td>
</tr>
<tr>
<td>Effort to be flexible</td>
<td>75%</td>
<td>73%</td>
</tr>
<tr>
<td>Sensitivity to background and beliefs</td>
<td>87%</td>
<td>83%</td>
</tr>
<tr>
<td>Really listening to your opinions</td>
<td>82%</td>
<td>69%</td>
</tr>
<tr>
<td>Ability to answer questions about condition</td>
<td>71%</td>
<td>75%</td>
</tr>
<tr>
<td>Amount of information and guidance</td>
<td>56%</td>
<td>71%</td>
</tr>
<tr>
<td>Referral to other providers as needed</td>
<td>53%</td>
<td>58%</td>
</tr>
<tr>
<td>Putting you in touch with other parents</td>
<td>36%</td>
<td>30%</td>
</tr>
<tr>
<td>Understanding condition’s impact on family</td>
<td>58%</td>
<td>69%</td>
</tr>
<tr>
<td>Overall Mean Satisfaction</td>
<td>67%</td>
<td>66%</td>
</tr>
</tbody>
</table>

For a copy of the full report go to: uconnucedd.org
Study X
Case Studies Report:
Training and Technical Assistance Systems

The purpose of these in-depth case studies of states with training and technical assistance (T/TA) systems was to better understand and highlight various strategies in personnel preparation of early intervention (Part C) and early childhood special education (Section 619) professionals. Information was gathered via telephone interviews and searching state websites on seven topic areas: (a) contextual information, (b) content, (c) delivery, (d) collaboration, (e) staffing, (f) data collection, and (g) funding. Results were used to identify critical components and possible strategies that could be used to design and implement a comprehensive and effective T/TA system.

Participants and Methodology

The sample for this study was chosen from an earlier assessment of the T/TA systems throughout the country (see Study VI). States were identified by the Center as having a comprehensive T/TA system as defined by factors identified in Study VI. California, Kansas, Minnesota, Nebraska, Pennsylvania, and Wisconsin, Ohio and Illinois met the criteria for either their T/TA Part C and/or 619 systems and agreed to participate. Telephone interviews were conducted with key informants from each of the states. The interview protocol consisted of 65 open-ended questions.

Identified Themes and Proposed Indicators:

Themes emerged across states from the qualitative interviews. From these themes, potential indicators or standards were proposed by the Center that could be used as guidelines for compiling a comprehensive T/TA system. Below are the themes and indicators for six of the seven topic areas. Collaboration was collapsed and embedded throughout.

### Contextual Information

<table>
<thead>
<tr>
<th>Themes &amp; Indicators</th>
<th>CA</th>
<th>IL</th>
<th>KS</th>
<th>MN</th>
<th>NE</th>
<th>OH</th>
<th>PA</th>
<th>WI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal: to provide quality services for children and families</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Goal: to comply with state and federal regulations</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>System in existence for at least 10 years</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Part C and 619 collaborate</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
</tbody>
</table>

- A clear, overarching mission or goal statement frames the entire system
- The purpose of the T/TA efforts are clearly defined and distinct, yet complimentary

### Content

<table>
<thead>
<tr>
<th>Themes &amp; Indicators</th>
<th>CA</th>
<th>IL</th>
<th>KS</th>
<th>MN</th>
<th>NE</th>
<th>OH</th>
<th>PA</th>
<th>WI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influence: state and federal requirements/priorities</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Influence: evaluations from past trainings</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Influence: evidence-based practice or research</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Multiple agencies collaborate to determine content</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
</tbody>
</table>

- Content is clearly defined and communicated
- The capacity to successfully balance and address multiple influences/priorities
- Content addresses both state and local priorities
- Collaboration with other agencies and programs help shape the T/TA content
Delivery

<table>
<thead>
<tr>
<th>Themes &amp; Indicators</th>
<th>CA</th>
<th>IL</th>
<th>KS</th>
<th>MN</th>
<th>NE</th>
<th>OH</th>
<th>PA</th>
<th>WI</th>
</tr>
</thead>
<tbody>
<tr>
<td>TA is given on-site or through phone consultation</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Primary method of training delivery is large group events</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Increased use of electronic or online formats for T/TA</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Influence: adult learning principles</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Some trainings delivered through collaboration</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
</tbody>
</table>

- Multiple methods of delivery is used to ensure access across the state
- Delivery methods reflect best practices in adult learning
- Delivery of T/TA reflects and builds on strong collaborative efforts

Staffing

<table>
<thead>
<tr>
<th>Themes &amp; Indicators</th>
<th>CA</th>
<th>IL</th>
<th>KS</th>
<th>MN</th>
<th>NE</th>
<th>OH</th>
<th>PA</th>
<th>WI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualifications: advanced degrees/experience</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Dedicated T/TA staff</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>On-going skill development for providers of T/TA</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Low staff turnover</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
</tbody>
</table>

- Highly qualified staff to carry out the design, delivery, and evaluation of T/TA
- Ongoing staff development is provided for ensuring quality T/TA

Data Collection

<table>
<thead>
<tr>
<th>Themes &amp; Indicators</th>
<th>CA</th>
<th>IL</th>
<th>KS</th>
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<th>WI</th>
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</thead>
<tbody>
<tr>
<td>Collects evaluation data from all training events</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
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<tr>
<td>Data is used to improve future T/TA</td>
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<td>x</td>
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<tr>
<td>Maintains a database containing training event information</td>
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- Evaluation of all T/TA events includes both process and outcome measures
- Evaluation data is used to improve future T/TA, measure the impact on services and outcomes, and, when appropriate, inform ongoing licensure
- Periodic evaluation of the state's overall T/TA system

Funding

<table>
<thead>
<tr>
<th>Themes &amp; Indicators</th>
<th>CA</th>
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<th>OH</th>
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</thead>
<tbody>
<tr>
<td>Consistent funding</td>
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<tr>
<td>Uses informal collaboration of funds for T/TA events</td>
<td>x</td>
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</tbody>
</table>

- Funding is dedicated, stable, and adequate
- Funding comes from multiple sources, including federal and state funds, as well as other agencies

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Policy Recommendations for Addressing Issues in Ensuring a Qualified EI/ECSE Workforce

Preservice Education (Higher Education)

Program/IHE/Local Level:
• Cross disciplinary common core content and training in IHEs.
• Field experiences in every semester in program.
• B-5 preparation at IHE level for licensure/certification.
• Policy to ensure equal preservice that is aligned across various delivery methods (e.g., web, job-based, etc.).
• Preservice preparation in consultation and coaching.

State Level:
• Teachers need to be prepared to provide special instruction in B-5 services.

National/Federal Level:
• Supply and demand of doctoral students in EI/ECSE should be monitored on national level.
• Secure Part D – OSEP funds for preservice and inservice including cross-discipline personnel preparation grants and doctoral programs.

Inservice Professional Development (PD)
(Training and Technical Assistance-T/TA)

Program/IHE/Local Level:
• Inservice preparation in consultation and coaching.

State Level:
• All states should have comprehensive TA system for EI/ECSE that uses research-informed PD practices for T/TA systems (no one-shot workshops).
• Policy to ensure quality PD (i.e., content and competencies) regardless of delivery method or provider.
• Unified Comprehensive System for Personnel Development on the state level across EC, Head Start, Part C, and 619.
• Funding to support T/TA (research-informed) at state level.

National/Federal Level:
• Integration of EI/ECSE content in EC career ladders across programs and levels (e.g., more training in ECSE for Head Start and Early Head Start).

Certification and Credentialing

State Level:
• Certification and licensing standards should be consistent across all eligible licensing programs.
• Certification is time-limited with substantive renewal requirements.
• B-5 year certification.
National/Federal Level:
- Professional associations (NAEYC, NASP, AOTA, APTA, ASHA) adopt practice guidelines for Part C & 619 that are consistent/aligned with DEC Personnel Standards & Recommended Practices, and these help inform practice licensure and standards.
- National credential for Part C personnel across disciplines (common core content).
- Develop a National Certification that would eliminate state/local control.
- Policy that states have induction and mentorship in EI/ECSE.
- National board certification (Similar to BCBA-Board Certified Behavior Analysts) for EI/ECSE professional.

Standards
State Level:
- State policy that ensures that standards around who delivers EI/ECSE and what they do (i.e., intensity of service) allows for practice that result in meaningful outcomes for kids and families.
- Program quality standards should require membership in professional organizations.

National/Federal Level:
- A national set of standards for personnel & competencies for program accreditation that are implemented at the various levels.

Other
Program/IHE/Local Level:
- Ensure preparation and hiring of under-represented groups (nationality, males).

State Level:
- State policy devotes resources to salary, working conditions and administrative support to improve recruitment and retention of qualified EI/ECSE personnel.
- The procedures used for Highly Qualified should reflect ECSE and states should use measures commensurate with the group the licensure covers.
- Make special instruction a billable service to encourage the delivery of special instruction in EI.
- EI/ECSE staff “on-the-job” supervisor has competencies needed to supervise appropriately.

National/Federal Level:
- Wording in IDEA related to Highly Qualified Teacher should address Early Childhood Special Education and should be developed for Part C and should make sense.
- Increase child care subsidy so that child care can hire qualified staff.
- Interagency federal funding for grants to promote unified systems for pre-service and in-service.

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The Center to Inform Personnel Preparation Policy and Practice in Early Intervention and Preschool Education is funded through grant #84.325J from the Office of Special Education Programs, U. S. Department and Education.

Opinions expressed herein are those of the authors and do not necessarily represent the position of the U. S. Department of Education.
Strategies for National Associations to Consider

Developing and Approving Standards

At the National Level:

- Provide input/review to standards and feedback on implications for states.
- Disseminate information on standards.
- Bring the major player associations together, and also superintendents and principals to reach consensus on a set of standards being developed.
- Build an advocacy campaign based on data from this center.
- Hire a marketing firm to help with “branding” as a coalition of association.
- Continue the work of CEC/DEC and NAEYC on blended set of standards.
- Build a national coalition for Early Childhood to influence other: including Superintendents, State Boards of Education, and Directors of Educator Licensing.
- Develop a common Language between EC & ECSE, such as a glossary across associations and across state.
- Promote cross-education of disciplines: within associations in multiple disciplines, IHE’s.
- Educate others about IE, ECSE and standards: include the public, certification officials, legislators, school boards, chief state officers, professional standards boards, teachers, and the medical field.
- Provide good information about issues to all association affiliates/members.

At the State Level:

- Better understand State, National, Political context.
- Know and understand various cycles, e.g., regulatory cycles, renewals, accreditation, etc., of systems in states and associations.
- Have the association affiliates/members feed issues to national association.

Adopting Standards

At the National Level:

- Establish consensus re: Blended Program vs. Non-Blended Program.
- Require states to assure federal agencies that program accreditations & licensure are based on national personnel standards.

At the State Level:

- Link states to resources that will address/support their adoption of standards.
- Provide resources, tool kits, etc, that arm state advocates to make changes in their states.
- Develop no standards without a political action plan; strategies to facilitate adoption.
At a Glance...

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• Have state level stakeholders address this issue with support from the association.
• Encourage state professional development plan that includes EI/ECSE and coordinates with state EC certification.
• Encourage state certification offices to collaborate with other EC state offices re: standards & professional development (PD) bodies.

At the Institutions of Higher Education Level:
• Require personnel preparation programs to submit data to national association (e.g. as CEC does) for national recognition even if don't participate in national (e.g. NCATE) accreditation.

Implementing Standards
At the National Level:
• Support Communities of Practice for states implementing standards.
• Make adoption of national personnel preparation standards a requirement of IHE’s receiving federal funding.

At the State Level:
• Collaborate across associations to develop strategies to promote sustainability.
• Work with states, unions, superintendents, and principal associations to get standards embedded in personnel performance evaluation system.

At the Institutions of Higher Education Level:
• Encourage government affairs offices in Higher Education Institutions to keep their eye on the issues and support/enable faculty to be more politically active in this regard.
• Develop model assessments that evaluate candidate's mastery of EC/ECSE standards.
• Encourage IHE to include as part of induction for EI/ECSE implementation of standards (also impacts states).
• Advocate the ETS Praxis II align with CEC/NAEYC ECSE standards.

Other
• Federal government: require states to improve comprehensive workforce infrastructure so that states assure a sufficient supply of fully licensed & prepared professionals.
• Center: interview certification/program approval office re: higher education and look at differences in Program Approved Standards vs. Certification/Transcript Analysis Standards (varies from state to state). Also pull together discipline associations, e.g., AOTA, APTA, ASHA, etc. and representatives of school administration, etc. into a bigger conversation.

This was an initial participation. It is incomplete and the exercise was time limited. This was not a consensus building process, does not represent consensus or endorsement but rather some ideas for national associations to consider for addressing some of the issues.

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