Leadership Strategies

for Supporting Children's Social Emotional Development and
Addressing Challenging Behavior

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**The Center on the Social and Emotional
Foundations for Early Learning**

**Child Care
Bureau**

**Head Start
Bureau**

Learner Objectives

- Participants will describe an evidence based framework for addressing social emotional development and challenging behavior.

- Participants will identify strategies to address common barriers to evidence based practices.

- Participants will identify effective leadership strategies including collaborative planning, program-wide planning, and professional development.

- Participants will apply collaborative action planning strategies for improving children's social emotional and behavioral outcomes.

Suggested Agenda

|		
I.	Introduction to Topic	45 min.
II.	Evidence based Practice & Resources	30 min.
III.	The Pyramid Approach	15 min.
IV.	Inventory of Practices and Activity	60 min.
V.	What Is Challenging Behavior?	30 min.
VI.	Role of Program Administrators	30 min.
VII.	Evidence based Leadership Strategies • Collaborative Action Planning • Enhancing Knowledge and Skills	90 min.
VIII.	Three Levels of Change: Child, Program, System	60 min.
IX.	Summary/Optional Take-Home Activity	30 min.

Materials Needed

☐ Agenda

☐ PowerPoint

☐ 4 signs for 4 walls of room: "Knowledge & Skills of Professionals & Parents;" "Beliefs & Attitutdes;" "Collaboration & Coordination;" "Other"

☐ Copies of the Reflection on Concerns and Vision questionnaire from the workbook (Handout 4.2) (for all participants)
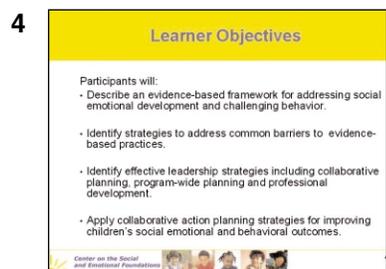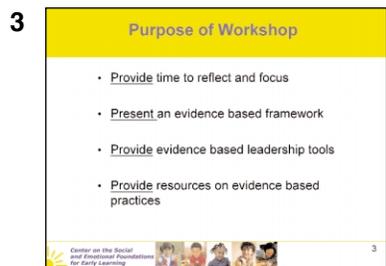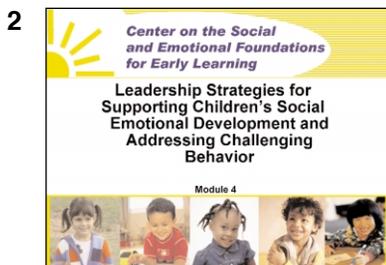
Handouts

☐ 4.1   Participants' PowerPoint Slides

☐ 4.2   Participants' Workbook

☐ 4.3   Linking Social Development and Behavior to School Readiness

☐ 4.4   Facts about Young Children with Challenging Behaviors

☐ 4.5   Program Practices for Promoting the Social Development of Young Children and Addressing Challenging Behavior

☐ 4.6   Supporting Infants and Toddlers with Challenging Behavior

☐ 4.7   *Young Children* article, The Teaching Pyramid: A Model for Suporting Social Competence and Preventing Challenging Behaviors in Young Children

☐ 4.8   Inventory of Practices for Promoting Children's Social Emotional Competence

☐ 4.9   DEC Concept Paper on the Identification of and Intervention with Challenging Behavior

☐ 4.10 Administrator's Essentials

☐ 4.11 Resources for Leadership Strategies

☐ 4.12 Collaborative Planning Model for Program Improvement and Systems Change

☐ 4.13 Strategies for Transfer of Quality Practices

☐ 4.SE Session Evaluation Form

I. Introduction to Topic
(45 minutes)

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Handout 4.2

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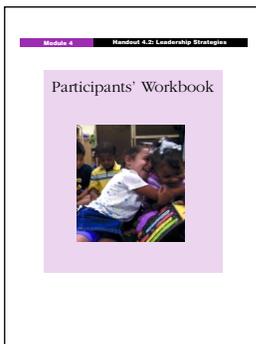
I. Introduction to Topic (45 minutes)

Slide 1. As the participants enter the room, give them a copy of the Reflection on Concerns and Vision Questionnaire, which is in the "Participants' Workbook" **(Handout 4.2)**, and ask them to complete the reflective questionnaire before the session begins.

Slide 2. As you begin the session, welcome everyone to the session (title), introduce the speakers, and say that the participants will be introducing themselves in a few minutes in conjunction with an activity.

Thank everyone for completing the questionnaire and tell them they can keep the questionnaire. Explain that this exercise was designed to help them quiet their busy minds and to take advantage of the luxury they have today to focus on one topic—supporting children's social emotional development and preventing challenging behaviors—rather than on the myriad of other issues program leaders must deal with daily.

Point out to participants that they can use the Participants' PowerPoint slides **(Handout 4.1)** to take notes.

Slide 3. Read the purposes of the workshop.

Go through all the workshop materials to familiarize the participants with them. Pay particular attention to those they will be using during the workshop: Participants' Workbook, *Young Children* article, "Inventory of Practices for Promoting Children's Social Emotional Competence," and the "Collaborative Planning Model."

Slide 4. Review the Learner Objectives.
- Describe an evidence based framework for addressing social emotional development and challenging behavior.

- Identify strategies to address common barriers to evidence based practices.

- Identify effective leadership strategies including collaborative planning, program-wide planning, and professional development.

5

Agenda
- Introduction to Topic
- Evidence Based Practices and Resources
- The Pyramid Approach
- Inventory of Practices and Activity
- What is Challenging Behavior?
- Role of Program Administrators
- Evidence Based Leadership Strategies
- Three Levels of Change
- Summary

6

Introductory Activity

Which of the following <u>do you think</u> is the most significant barrier to effectively addressing social emotional development and challenging behavior in young children?
1. Knowledge and skills of professionals and parents
2. Collaboration and coordination
3. Beliefs and attitudes
4. Other

* Introduce yourself: name and role, agency, etc.

7

Some Sobering Facts

8

An estimated 9 to 13% of American children and adolescents between ages nine to 17 have serious diagnosable emotional or behavioral health disorders resulting in substantial to extreme impairment.

(Friedman, 2002)

9

Students with SED miss more days of school than do students in all other disability categories (U.S. Department of Education, 1994)

More than half of students with SED drop out of grades 9-12, the highest rate for all disability categories. (U.S. Department of Education, 2002)

Of those students with SED who drop out of school, 73% are arrested within five years of leaving school (Jay & Padilla, 1997)

10

Children who are identified as hard to manage at ages 3 and 4 have a high probability (50% of continuing to have difficulties into adolescence (Campbell & Ewing, 1990; Egeland et al., 1990; Fischer, Rolf, Hasazi, & Cummings, 1984).

**11**

It begins early...

• Apply collaborative action planning strategies for improving children's social emotional and behavioral outcomes.

Slide 5. Go over the agenda and ask if there are any concerns or suggestions. Suggest that questions be asked throughout the session so that they can be addressed at the time they come up.

Slide 6. Activity: Have signs in four places in the room: "Knowledge and Skills of Professionals and Parents;" "Collaboration and Coordination;" "Beliefs and Attitudes;" "Other." Ask the participants to stand by the sign that represents what they think is the biggest barrier to effectively addressing social development and challenging behavior in young children. Once there, ask them to discuss the issue with the others there.
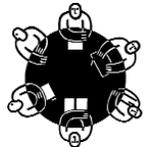
Small Group Activity

Once they have spent 5 minutes talking, ask them to introduce themselves, their "role" (teacher, administrator, parent, etc.), and their agency to the larger group. Ask for one person at the sign to summarize their discussion. Then ask everyone to go back to their seat.

Slides 7-16. Sobering Facts. A review of the literature conducted by staff from the Center for Evidence-Based Practices: Young Children with Challenging Behaviors (CEBP) reveals some startling research. This research illustrates the critical importance of leaders ensuring that there is a primary focus on promoting healthy social emotional development in young children. Note that these slides are exerpted from a larger Powerpoint presentation by Timm and Fox, available at the CEBP Web site: www.challengingbehavior.org.

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Early appearing aggressive behaviors are the best predictor of juvenile gang membership and violence.

(Reid, 1993)

13

When aggressive and antisocial behavior has persisted to age 9, further intervention has a poor chance of success.

(Dodge, 1993)

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Of the young children who show early signs of problem behavior, it has been estimated that fewer than 10% receive services for these difficulties.

(Kazdin & Kendall, 1998)

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Preschool children are three times more likely to be "expelled" then children in grades K-12

(Gilliam, 2005)

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There are evidence-based practices that are effective in changing this developmental trajectory...the problem is not what to do, but rests in where and how we can support children and help families access services

II. Evidence based Practice & Resources
(30 minutes)

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Evidence-Based Practice: A Definition

Evidence-based practice refers to the use of interventions and supports that have research documenting their effectiveness. The identification of evidence-based practices promotes the use of approaches that lead to positive outcomes for children and families. Practices that are considered evidence-based are ones that have been demonstrated as effective within multiple research studies that document similar outcomes.

Available at http://www.evidencebasedpractices.org/whatever.

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Evidence-Based Practice: A Definition

Dunst, Trivette, and Cutspec (2002) offer the following operational definition of evidence-based practice that is particularly meaningful for the field of early education and intervention.

Evidence-based practices are *"Practices that are informed by research, in which the characteristics and consequences of environmental variables are empirically established and the relationship directly informs what a practitioner can do to produce a desired outcome."*

Dunst, C. J., Trivette, C. M., & Cutspec, P. A. (2002). Toward an operational definition of evidence-based practice. Centerscope, 1(1), 1-10. Available at http://www.evidencebasedpractices.org

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What does "Evidence-Based Practice" Mean?

• Evidence: the data on which a conclusion or judgment may be based (Webster's II New College Dictionary1995)

• Proven to work

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What does "Evidence-Based Practice" Mean?

• Levels of evidence or levels of confidence that the practice will have the desired outcome:
  – Peer-reviewed published research findings (high)
  – Published synthesis of research
  – Multi-authored position papers
  – Government reports
  – Consensus/values
  – Opinion, etc. (low)

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Effective Practices

• Changing adult behavior and expectations
• Promoting overall high program quality
• Promoting social skills, preventing & addressing challenging behavior (pyramid model)
• Teaching parents effective techniques
• Using empirically validated interventions which include:
  – Comprehensive strategies e.g., adaptations to environment and activities, learning class rules, role-playing alternative behaviors, arranging for peer models & reinforcing desirable behaviors
  – Individualizing approaches
  – Positive programming, e.g., Positive Behavior Support (PBS)
  – Team-based and multidisciplinary approaches
  – Using data-based strategies and decision making

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What Positive Social Emotional Outcomes Can Be Expected from Evidence-based Practices?

• Decrease in:
  – Withdrawal, aggression, non-compliance, and disruption
  – Teen pregnancy, juvenile delinquency, and special education placement

• Increase in:
  – Positive peer relationships including understanding of friendship, cooperation, and sharing
  – Self-control, self-monitoring, and self-correction and improved social-emotional health
  – Academic success

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Evidence-Based Practices: Resources

• Evidence-based practices in:
  • services
  • systems/programs
  • service utilization

• The Center for Evidence-Based Practices: Young Children with Challenging Behavior (CEBP) Research Syntheses, power point, "Recommended Practices" (www.challengingbehavior.org)

• Center on the Social and Emotional Foundations for Early Learning (CSEFEL) "What Works Briefs," "modules," Inventory or Practices" (www.csefel.uiuc.edu)

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II. Evidence based Practice & Resources (30 minutes)

Slides 17-19. Evidence Based Practice: Definition—There are numerous approaches to children's mental health or social emotional and behavioral development. However, to be a good consumer and to help ensure that children receive the best services and that resources are being used wisely, program leaders need to be able to select those that have evidence that they work.

Show the definition of evidence based practice, invite discussion around the concept of "evidence based" practices and the importance of promoting these effective practices in our programs to ensure that children are getting proven interventions and methods.

Slide 20. Review the different levels or types of evidence.
• Peer-reviewed published research findings (high evidence)
• Published synthesis of research
• Multi-authored position papers
• Government reports
• Consensus/values
• Opinion, etc. (low evidence)

Ask how program leaders use this framework of levels of evidence in supporting staff in their work supporting young children's learning and development?

4.3

4.4

4.5

4.6

Slides 21-22. Share **Handouts 4.3, 4.4, 4.5, and 4.6**. These handouts highlight the impact of using interventions that are proven to be effective and the positive outcomes that can result from high-quality interventions.

Slide 23. Show the Web sites of the two national centers that provide information on evidence based practices related to young children's social emotional development and challenging behavior (CSEFEL and CEBP). CEBP (Center for Evidence-Based Practice: Young Children with Challenging Behavior) has synthesized the research on evidence based practices in services, systems, and service utilization, and they are on the Web site: www.challengingbehavior.org.
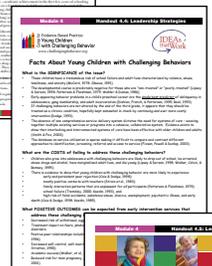
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Slide 24. Discuss the challenges that focus groups described in providing effective services to young children. These are described in the "Participants' Workbook" **(Handout 4.2).**

Focus groups of administrators, teachers, family members, and training and technical assistance (T/TA) providers were held to find out what the challenges are to providing evidence based services to young children and what some strategies might be to overcome these challenges. Discuss the summaries of the focus group findings and the general categories of challenges on **Slide 24.**

a. Lack of knowledge of evidence based practices; where to get this information; and how to ensure that trainers, consultants, and supervisors are providing information and guidance that is based on evidence that the practice works

b. Beliefs/attitutes about children, behavior, their families, and attitudes about philosophies and certain practices.

c. Lack of collaboration within programs, with families, and within the community, including the need for all stakeholders to be involved in decision making about practices, procedures, and individual child planning (e.g., families, teachers, administrators); as well as the need to collaborate at the community-wide level to address evidence based practices, fill in gaps in services, reduce duplication, and share limited resources such as shared training events, etc.

d. Lack of adequate fiscal resources and procedures, such as not enough money for on-site technical assistance (TA) or providing substitute teachers while staff go to training; fiscal procedures such as insurance or medicaid reimbursement procedures that do not allow for adequate service or family support approaches.

We will offer leadership strategies for addressing the first three...we all need more money and it's beyond the scope of this workshop, so we won't be directly addressing the fourth!
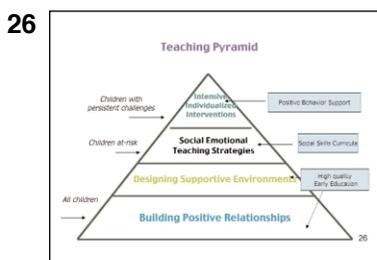
III. The Pyramid Approach
(15 minutes)

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An Evidence-Based Framework:
The Pyramid Approach

- PROMOTION
- PREVENTION
- INTERVENTION

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Teaching Pyramid

Children with
persistent challenges — Intensive Individualized Interventions — Positive Behavior Support

Children at-risk — Social Emotional Teaching Strategies — Social Skills Curricula

Designing Supportive Environments — High quality Early Education

All children — Building Positive Relationships

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III. The Pyramid Approach (15 minutes)

Slides 25–26. Explain that the "Teaching Pyramid" is the framework guiding the work of the center: promotion of social emotional development in all children, prevention of challenging behavior, and intervention with persistent and serious challenging behavior.

Ask them to look over the *Young Children* article for 5 minutes **(Handout 4.7).** Ask a few participants to share a few key highlights that they saw in the article (chart responses).

Talk about the pyramid as it relates to promoting social emotional competence.

Handout 4.7

Promoting positive relationships (promotion) can be a form of prevention along with classroom preventive strategies. Social emotional teaching strategies (both prevention and intervention) are required for children to understand the behaviors necessary for healthy interactions. Individualized intensive interventions will only be needed by a smaller number of children if the base of the pyramid is present. Remember that adult behaviors impact the behaviors of the children. If adults use proven approaches, the behaviors of the children will be more positive (there will be fewer children at the top of the pyramid). If the adult behaviors are not effective, the behaviors of the children will become more challenging, requiring more intensive interventions.

Refer to the importance for early childhood programs to have a continuum of approaches from promoting social emotional well-being and building positive relationships in all the children to intensive interventions for a few.

Ask for discussion about how people either are or could embed this framework into their program. (Note: CSEFEL Modules 1, 2, 3a, and 3b address all of these levels.)

There is a PowerPoint presentation and a video that give an overview of the "Teaching Pyramid" on the CSEFEL Web site. See www.csefel.uiuc.edu.

IV. Inventory of Practices and Activity (60 minutes)

IV. Inventory of Practices and Activity
(60 minutes)

Slide 27. Refer to the Inventory of Practices for Promoting Children's Social Emotional Competence in their materials **(Handout 4.8).** The Inventory of Practices is a set of evidence based practices and was designed to be used by either individuals or by teams to help them reflect on their practice.

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Inventory of Practices & Action Plan

Designed to be used by individuals and/or teams to identify training needs related to four areas:
1. Building Positive Relationships
2. Creating Supportive Environments
3. Social Emotional Teaching Strategies
4. Individualized Intensive Interventions

4.8

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Handout 4.8

Discuss how the Inventory is associated with the Teaching Pyramid. Go over the notion of thinking about the practices in the program from universal (for all children and families) to intensive interventions (for only a few).

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Inventory of Practices for Promoting Social Competence

- Best used in a manner to generate reflection and discussion
- Allows for development of an <u>Action Plan</u> that:
  - Targets skills for training
  - Identifies strategies to support the team in implementing the new practices
  - Identifies resources and supports needed to complete the activities or strategies

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Slide 28. Discuss the Action Plan section of the Inventory and talk about how the second column asks for strategies, including those that would support others in their use of the practices. The last column (Supports and resources needed to accomplish these activities) would include leadership supports like staff development, help with getting information on evidence based practices, etc. Ask for discussion about further ways leadership can support the acquisition and use by program staff of these practices. (Note: many program leaders have found it more effective to break up the Inventory to look at smaller pieces at a time.)

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Activity

- As a group, discuss a set of practices from the Inventory's action plan.
- What can you, as a leader, do in your work with direct service personnel and families that would lead to the use of these practices? Note these under "Supports and Resources"
- Have one member of your team prepared to report to the entire group: 1) the practices and what they mean, 2) the level of the "Teaching Pyramid" they relate to, and 3) the leadership supports and resources needed.

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Slide 29. Activity. Using the ACTION PLAN section of the Inventory, assign a group of practices to each table (no more than four or five in one category—but be sure all categories are addressed). Ask them to note the leadership strategies in the second column and the leadership supports in the last column that could support the acquisition and use of the practices by program staff and parents.
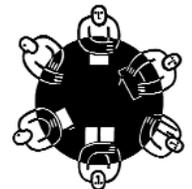
Tell them that, at the end of the activity, team spokespeople will be asked to: (1) describe the practices they were assigned, (2) the level of the Teaching Pyramid the practices relate to, and (3) share their ideas about leadership strategies and support related to the use of the practices by staff and parents. They can use the **flip charts** for their reports.

V. What Is Challenging Behavior?
(30 minutes)

30

> **What is Meant by Challenging Behaviors?**
>
> • They are defined by adult within the context of his/her culture.
> • Sometimes the behaviors decrease with age and use of appropriate guidance strategies.
> • Sometimes they are developmentally expected behaviors.
>
> *DEC Concept Paper on Identification of and Intervention with Challenging Behavior, 1999*
>
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> **What Are Challenging Behaviors Needing Intensive Individualized Intervention?**
>
> Any repeated pattern or perception of behavior that interferes with or is at risk of interfering with optimal learning or engagement in prosocial interactions with peers and adults that is persistent or unresponsive to evidence-based approaches. *Challenging behavior is thus defined on the basis of its effects.*
>
> Center for Evidence-Based Practices: Young Children with Challenging Behavior, www.challengingbehavior.org
>
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V. What Is Challenging Behavior? (30 minutes)

Slide 30. A key point in defining challenging behavior is that different adults find different behaviors "challenging" depending on their own experiences, culture, and expectations. Thus it is important for adults to explore their own feelings about behavior.

Note that all children exhibit challenging behavior at some time. Children who need the "Intensive Individualized Interventions" are children who have severe and persistent challenging behavior.

Slide 31. Children needing intensive individualized intervention are those who exhibit a "repeated pattern or perception of behavior that interferes with or is at risk of interfering with optimal learning or engagement in prosocial interactions with peers and adults that is persistent."

In this way, *challenging behavior is defined on the basis of its effects.*

Point out that a key component in a working definition should be that the child is not blamed, and the focus should be on the effect of the behavior on learning and social development. Discuss the definition and the DEC Concept Paper, which is included in **Handout 4.9.**

Handout 4.9

Discuss the descriptors of serious challenging behaviors. Stress the fact that children who are withdrawn or isolated are also included and are often overlooked by the systems that should serve them. Leaders should make every effort to identify and serve this group.

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Examples of Challenging Behaviors

• Physical and Verbal Aggression
• Noncompliance/Defiance
• Self-Injury
• Disruptive vocal/motor responses (screaming, stereotypic behavior)
• Destruction of property
• Withdrawal

Center for Evidence-Based Practices: Young Children with Challenging Behavior, www.challengingbehavior.org

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Slide 32. Several examples of challenging behavior include the following:

• Physical and Verbal Aggression
• Noncompliance/Defiance
• Self-Injury
• Disruptive vocal/motor responses (screaming, stereotypic behavior)
• Destruction of property
• Withdrawal

Again, we are talking about children who have severe and persistent behavior, not simply a child who occasionally has one of these behaviors.

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Examples of Challenging Behaviors
For Infants and Toddlers

• Attachment difficulties
• Sleeping/eating difficulties
• Excessive crying
• Difficulty in soothing

Center for Evidence-Based Practices: Young Children with Challenging Behavior, www.challengingbehavior.org

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Slide 33. For infants and toddlers, these behaviors may include:

• Attachment difficulties
• Sleeping/eating difficulties
• Excessive crying
• Difficulty in soothing

Importantly, the evidence based strategies that are used with older toddlers and preschoolers are not the same as those used with infants and young toddlers. It is important that you consider the developmental levels of the children prior to selecting intervention approaches.

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Challenging Behaviors

• Behaviors may:
  – Result in self-injury or injury to others
  – Cause damage to the physical environment
  – Interfere with the acquisition of new skills
  – And/or socially isolate the child
• Serious behaviors seldom resolve themselves without systematic intervention
  – Usually children progress through a predictable course of ever-escalating challenging behaviors

DEC Concept Paper on Identification of and Intervention with Challenging Behavior, 1999

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Slide 34. Young children need help when they have persistent and severe behaviors that
• Result in self-injury or injury to others
• Cause damage to the physical environment
• Interfere with the acquisition of new skills
• And/or socially isolate the child

We know that these serious behaviors seldom resolve themselves without systematic intervention.
Additionally, if support is not provided to children with challenging behaviors, there is a great likelihood that they will progress through a predictable course of ever-escalating challenging behaviors.

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Slide 35. While the estimate of prevalence of children who require focused interventions varies across studies, if effective prevention and promotion strategies are in place, we would generally expect that between 1 – 10% of children in a typical early childhood classroom may have significant and persistent challenging behaviors. For environments that have children with greater risk factors, this number may be higher. In general, though, there should not be more than one or two children in a typical classroom who would require this type of intervention. In many instances when there are higher percentages of children exhibiting challenging behaviors, it is the result of a lack of quality in the environment or lack of systematic teaching of social emotional skills.

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Slide 36. The Promise:
We do have evidence based practices. We know:
- Earlier is better
- Support for parents matters
- High-quality environments are key
- A comprehensive approach is necessary
- Behavior consultation makes a difference
- Parents and teachers can implement the practices in natural settings

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Slide 37. The Challenge:
- How do we ensure that effective practices are accessible to all children and families?

- How do we build systems within programs and communities such that teachers and families have the support they need to implement the practices?

The remainder of this training is focused on helping us, as leaders in early childhood, address the challenges.

VI. Role of Program Administrators
(30 minutes)

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Link between Program Administration and Child & Family Outcomes

"...an adequate infrastructure increases the likelihood that recommended practices will be used to deliver services and supports to young children and their families..."

"...When quality [evidence-based] practices are used consistently it is more likely that children and their families will experience positive outcomes."

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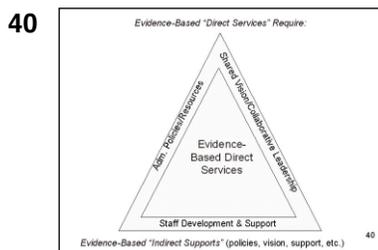for Early Learning   38

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Link between Program Administration and Child & Family Outcomes (Cont.)

"...The interdependent relationships between structure, services, supports, and outcomes are consistent with ecological theories of development....these theories suggest that the child's development is influenced not only by the family, neighborhood, subculture, and community, but by the systems of services and supports that serve them as well."

– Harbin & Salisbury, in Sandall, McLean & Smith, 2000

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Evidence-Based "Direct Services" Require:

Shared Vision/Collaborative Leadership

Adm. Policies/Resources

Evidence-Based Direct Services

Staff Development & Support

Evidence-Based "Indirect Supports" (policies, vision, support, etc.)   40

VI. Role of Program Administrators (30 minutes)

Slides 38-39. Read the following quotes about the link between administrative infrastructure, high-quality (evidence based) practices, and child and family outcomes:

"…an adequate infrastructure increases the likelihood that recommended practices will be used to deliver services and supports to young children and their families…"

"…When quality [evidence based] practices are used consistently it is more likely that children and their families will experience positive outcomes."

"…The interdependent relationships between structure, services, supports, and outcomes are consistent with ecological theories of development…these theories suggest that the child's development is influenced not only by the family, neighborhood, subculture, and community, but by the systems of services and supports that serve them as well."

Ask the group why and how they think child and family outcomes are affected by the program's administrative policies and procedures.

Slide 40. For teachers to provide evidence based direct services to children, administrators must provide the infrastructure or "indirect supports" like training and good working conditions. Other "indirect supports" like administrative policies and training are essential to implementing "direct-services" (teaching, therapies, etc.).

Ask for other examples of an "indirect support" and "direct service." Continue the discussion about these important links. If the participants don't mention these, make sure you cover the following points. The ability of direct service personnel to provide high-quality, evidence based practices is driven by:
• the vision of the leadership;
• the training, technical assistance, coaching, and supervision provided for staff;
• how the programs resources are used;
• their job descriptions (e.g., the job descriptions include time for planning and collaboration, etc.).

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> ### Leaders Must Be Well Trained
>
> Program administrators should have training in early childhood education, early intervention, child development, or early childhood special education; and administration, supervision.
>
> Smith, Barbara J. (2000). Administrators essentials, in S. Sandall, M. McLean & B. Smith (Eds.), DEC Recommended Practices in Early Intervention/Early Childhood Special Education, www.dec-sped.org; NAEYC accreditation standards and performance criterion (2004), Leadership and Management, www.naeyc.org.
>
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Slide 41. Additionally, leaders must be well trained in early childhood and in supervision or administration. The Division for Early Childhood (DEC) included this requirement in the DEC Recommended Practices in Early Intervention/Early Childhood Special Education (see **Handout 4.10**—Administrator's Essentials), and the National Association for the Education of Young Children (NAEYC) has included key administrator competencies in their new program accreditation criteria (www.NAEYC.org). Both of these sets of recommendations are evidence based.

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> ### 5 Practices of Exemplary Leadership
>
> • Model the way
> • Inspire a shared vision
> • Challenge the process
> • Enable others to act
> • Encourage the heart
>
> Kouzes & Posner (2003). The Leadership Challenge , San Francisco: Jossey-Bass
>
> 42

Slide 42. Kouzes and Posner suggest five key practices of Exemplary Leadership:
· Model the way
· Inspire a shared vision
· Challenge the process
· Enable others to act
· Encourage the heart

Handout 4.10

Ask the participants what each of these means to them.

43

> ### Evidence-based Practices: Role of Program Leadership
>
> • Provide Leadership and Vision
> • Monitor Compliance with Requirements
> • Ensure Child Well-being/Progress
> • Ensure Appropriate Deployment of Resources/Budget
> • Support Staff Knowledge and Skills
> • Provide Collaborative Leadership and Planning
> • Others?
>
> 43

Slide 43. Research on leadership describes the following roles of effective program leadership:
· Provide leadership and vision
· Ensure compliance with requirements
· Ensure child well-being and progress
· Resource deployment/budgeting
· Provide support staff knowledge and skills
· Collaborative leadership and planning

Ask if there are other key roles participants would add for program leadership.

VII. Evidence based Leadership Strategies
(90 minutes)

VII. Evidence based Leadership Strategies
(90 minutes)

44

> ### 3 Evidence-Based Strategies
>
> • Leadership & Vision
>
> • Collaborative Leadership and Planning
>
> • Supporting Personnel Knowledge & Skills
>
> 44

Slide 44. There is a clear link between the program leader's role and high-quality programs that utilize evidence based practices to support children's social emotional development and prevent challenging behavior. Next, we are going to discuss the areas of:
· Leadership and Vision
· Collaborative Leadership and Planning
· Supporting Knowledge and Skills

45

Leadership/Vision

- Leaders model developmentally and culturally appropriate expectations for children's behavior.
- Leaders help staff reflect on the relationship of their behavior and children's behavior.
- Leaders set a vision that expectations and practices are evidence based.
- Leaders view all stakeholders (program personnel, families, community) as partners.
- Other?

45

46

DEC Recommended Practices: *Creating Policies and Procedures that Support Recommended Practices in Early Childhood*

There is a link between program quality and child outcomes. Therefore, programs that employ best practices will positively impact the outcomes of children and families they serve.

1. Ensure that leaders and staff have knowledge, training, and credentials.
2. Ensure that families are partners.
3. Promote the use of standards (foundations).
4. Promote interagency and interdisciplinary collaboration.
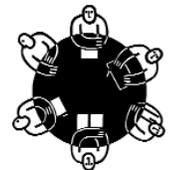5. Plan for program evaluation and systems changes.

4.10

46

47

Activity

Working with the DEC Administrator Essentials Checklist

47

Slide 45. Discuss providing leadership and vision. Ask participants how effective leaders that they have known provide leadership and vision related to supporting children's social emotional development and challenging behavior. (**chart responses**)

Slide 46. Review the "Administrator's Essentials" checklist **(Handout 4.10).** This checklist is drawn from the DEC Recommended Practices (Sandall et al., 2005), which is a set of recommended practices drawn from a synthesis of the research literature as well as focus groups of parents, teachers, administrators, and researchers. Although the checklist focuses on early intervention and early childhood special education, it encompasses the role of the administrator in any early childhood program that is striving to be evidence based and provide high-quality services. This checklist is free from the DEC Web site (www.dec-sped.org), which is on the List of Resources.

Slide 47. ACTIVITY: assign a set of practices from the "Administrator's Checklist" and a different color marker to each table. Ask participants to write on the flip chart with that color marker (1) what the set of practices means and (2) ideas for how to use the practices in their programs to promote social emotional development and prevent and/or address challenging behavior (10 minutes).

Then do a "round robin"— have each group move to the next flip chart and using the color marker they started with, add to the original notes on the flip chart. Do this for 5 minutes. Repeat this until all groups have worked on all flip charts for 5 minutes each. When each group has returned to its original flip chart, ask for one person to report to the group what is now on the chart (total time for this activity is approximately 45 minutes).

The remainder of the workshop will focus on evidence based leadership practices for addressing challenges, particularly those related to collaborative leadership and knowledge and skills.

48

Collaborative Leadership, Planning and Decision Making: A Model

1. Make the commitment and provide leadership.

2. Share decision making with stakeholders (staff, families, other agencies, consultants, etc.) to build commitment: *create a decision making stakeholder team.*

4.11-4.12

48

49

Steps for Collaborative Planning (Cont.)

3. Build a vision with the Stakeholder Team related to supporting children's social emotional development and addressing challenging behavior through evidence-based practices.

4. Identify challenges to the vision with the Team (beliefs, policies, systems, knowledge/skills).

5. Engage in action planning with the Team to address the challenges.

49

50

Steps for Collaborative Planning (Cont.)

6. Cultivate leadership and risk taking.

7. Continue to build and expand the commitment through incentives, recognition, T/TA, fiscal, and other resources.

8. Evaluate the process *and* the outcomes of the collaboration and action planning.

50

Slides 48-50. The "Collaborative Planning Model" is based on over 15 years of work with programs and communities and on the literature on effective program improvement. There is a wealth of literature from business, school reform, and children's services about the effectiveness of collaborative planning. Collaborative planning and decision making mean involving people who will be affected by a change in a policy, procedure, or practice in the planning of that change. Involving these "stakeholders" results in their valuable input and ideas and therefore a better plan, and it results in their feeling ownership of the plan and change. Thus, there is a better plan, implementation, and results, and there is less resistance. The Collaborative Planning Model has been used with local programs and community teams in several states and communities to develop better services for young children and families (see Hayden, Frederick, and Smith, 2003, on the List of Resources, **Handout 4.11**).

Handout 4.11
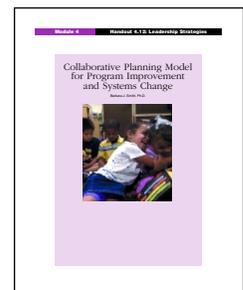
Review with the group the steps of the "Collaborative Planning Model" **(Handout 4.12)**, explaining each step that is in the handout on the model. It is important to go over each step.

Handout 4.12

Steps to the Collaborative Planning Model:

1. Make the commitment and provide leadership for collaborative decision making.
2. Share decision making with a team of stakeholders (staff, families, other agencies, consultants, etc.) to build commitment.
3. Build a vision with the stakeholder team related to supporting children's social emotional development and addressing challenging behavior through evidence based practices.
4. Identify challenges to the vision with the team (beliefs, policies, systems, knowledge/skills).
5. Engage in action planning with the team to address the challenges.
6. Cultivate leadership and risk taking.

7. Continue to build and expand the commitment through incentives, recognition, T/TA, fiscal, and other resources.

8. Continuously evaluate the process and the outcomes of the collaboration and action planning.

51

Action Planning:
Identify Challenges

• Follow steps of Collaborative Planning Model (commitment, team, vision, etc.).

• Develop Team Definitions and Philosophy (Evidence-based, Promotion, Prevention, Intervention, etc.).

• Brainstorm the Statement: "We'd like to use evidence-based practices to promote social emotional development and address challenging behavior, but...

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Action Planning:
Identify Challenges (Cont.)

• List the challenges that emerge from brainstorming.

• Transfer to Action Plan Form.

• If a challenge is believed to be a written policy or procedure...GET A COPY! Don't believe it 'til you see it!

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Put up **Slides 51-52.** Talk about the action planning steps and the materials in the "Participants' Workbook" related to action planning. **(Handout 4.2).**

• Follow steps of the Collaborative Planning Model (commitment, team, vision, etc.).
• Develop team definitions and philosophy (Evidence based, Promotion, Prevention, Intervention, etc.).
• Brainstorm the statement: "We'd like to use evidence based practices to promote social emotional development and address challenging behavior, but…
• List the challenges that emerge from brainstorming.
• Transfer to Action Planning Form.
• If a challenge is believed to be a written policy or procedure…GET A COPY! *Don't believe it 'til you see it!*

It has been our experience that in nearly all cases where a policy was thought to be a challenge, once the planning group obtained a written copy of the policy itself, it was more flexible than they had thought and, therefore, was not the challenge. Rather, the perception of the policy was the challenge. Therefore, do not rely on someone else's interpretation of a policy; they may have never read it!

Review each step. Talk about the importance of the stakeholder team brainstorming the suggested statement then transferring the selected barrier or challenge to the Action Planning Form.

53

Action Planning:
Identify Strategies (Objectives)

• Establish criteria for trying possible strategies (ease, timelines, durability, etc.).

• For each challenge, brainstorm this statement: "We could remedy this challenge by..."

• Select strategies from the brainstorming.

• Transfer to Action Plan Form.

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Slide 53. The stakeholder team would then brainstorm the question "We could remedy this challenge by…" and write the strategy on the Action Planning form.

Identifying strategies will include establishing criteria for trying possible strategies (like timeliness, cost, etc.).

54

Slide 54. Go over the components of the Action Planning Form. There are forms and instructions in the "Participants' Workbook" **(Handout 4.2).**

The Action Planning form is designed to serve as a meeting agenda as well—that way every meeting of the team is focused on the action plan and progress on it.

55

Knowledge and Skills:
Professional Development

Experiences designed to develop new knowledge, skills, and behaviors that are expected to be applied immediately on the job

Purpose of Professional Development:

Change of behavior in the work environment

Slide 55. Discuss the definition of professional development: Experiences designed to develop new knowledge, skills, and behaviors that are expected to be applied immediately on the job.

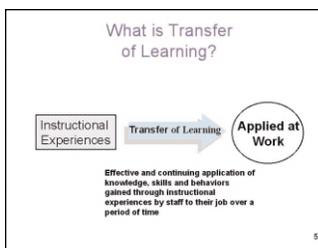And discuss the purpose of professional development: change in behavior in the work environment.

56

Methods for Professional Development

• Direct in-service or pre-service training
• Use of professional materials – (e.g., books, journals)
• Coaching
• Supervision
• Evaluation and recognition

Slide 56. Many current methods of staff development rely heavily on staff attending one-day training sessions. Discuss how the participants think these training sessions alone impact job performance.

Talk about the other methods mentioned (coaching, mentoring, supervision, etc.). Discuss the potential impact on job performance of these methods **(Handout 4.13)**.

Handout 4.13

57

What is Transfer of Learning?

Instructional Experiences → Transfer of Learning → Applied at Work

Effective and continuing application of knowledge, skills and behaviors gained through instructional experiences by staff to their job over a period of time

Slide 57. What is transfer of learning?

For behavior to change in the work environment, transfer of learning has to take place. Ask participants how they would describe transfer of learning.

Restate the goal—For the knowledge/competencies learned during the professional development experience to transfer back to the work environment so that a change of behavior can take place and lead to good-quality practices for children and families.

The key point of the definition is that learning is applied over time. Learning is not just tried out but is applied.

58

> **Research Says:**
>
> "While American industries annually spend up to $100 billion on training and development, not more than 10% of these expenditures actually result in transfer to the job."
>
> Transfer of Training: A Review and Directions for Future Research in Personnel Psychology, 1988, 31, pg. 63
>
> *Center on the Social and Emotional Foundations for Early Learning*
>
> 57

Slide 58. Discuss this statistic:

"While American industries annually spend up to $100 billion on training and development, not more than 10% of these expenditures actually result in transfer to the job." (Transfer of Training: A Review and Directions for Future Research in *Personnel Psychology,* 1988, *31,* pg. 63)

Ask the participants if they think that about 10% of the current staff development activities they offer to their staff results in behavior change in practice. Is this number high or low? Talk about the "return for the dollar" being actualized in their budgets for training.

59

> **Transfer Strategies**
>
> • Match professional development to needs.
> • Communicate importance and expectations.
> • Help staff prepare for training/instruction.
> • Support application of new knowledge/skills.
> • Recognize staff for applying new knowledge/skills.
>
> Kentucky Training Into Practice Project, Director's Seminar, 2003
>
> *Center on the Social and Emotional Foundations for Early Learning*
>
> 59

Slide 59. Discuss Transfer Strategies. Point out that there's a lot involved in transfer. There are five basic ways to promote this, and we're going to talk about each one.
You can facilitate the transfer of learning if you:
1. Match professional development activities to the needs of your staff.
2. Communicate the importance and relevance of the activity to their jobs AND what you expect from staff after they complete the activity.
3. Help staff prepare for the professional development activity.
4. Support application of what they've learned.
5. Give recognition to employees who do apply what they learned.

60

> **Match Professional Development to Need**
>
> ➤ Identify needs
> • Conduct staff needs assessment to identify opportunities for growth.
> • Respond to needs assessment and pre-instruction activities (director/trainee).
> • Help instructor design "real-life work-related" scenarios, examples, etc.
> • Determine post activity outcomes that need to be measured.
> • How can the Inventory of Practices be used to identify need?
>
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>
> 60

Slide 60. In order to match professional development to the needs of staff, you need to do two things.

The first is identifying the needs of your staff, and the second is insuring that staff choose relevant professional development activities that will address the identified needs.

Let's talk about identifying needs first.
• We've already talked about the importance of conducting a staff needs assessment to identify opportunities for growth, such as the Inventory.
• It's also important that you help trainers/instructors design their training to meet the needs of staff.

- When you contact a trainer about training your staff, be as specific as possible, i.e., what knowledge and skills do you want staff to have when they complete the training, and how will they use it in their work environment. You can use the specific practices from the Inventory. Tell them what's going on in your program.
- You can also offer to help the trainer design "real-life work-related" scenarios, examples, etc.

Once you've worked with your staff to identify training needs, you need to insure that staff attends training that will address the identified training needs and that training is evidence based! How can you use the Inventory of Practice **(Handout 4.8)** in these steps?

Slide 61. When staff do attend training, you need to make sure that they attend relevant and appropriate trainings. There are several things you can do:

- Unfortunately, workshop titles don't always tell you exactly what will be covered during a specific workshop. So the first step in selecting relevant training is to find out more about specific workshops; e.g., what is the actual content, what is the evidence that the knowledge/practices will have the intended effects on children's social emotional and behavioral development?

- Then, select training that addresses the gaps you identified during the needs assessment. If it isn't offered, let training organizations know what your staff needs as well as your expectation that it be evidence based.

Address the issue of sending all staff to the same training (e.g., school-age teacher to an infant/toddler training).

Research tells us that staff become more motivated about training they choose rather than training they are told to attend.

Instead of telling staff what training they will attend, whenever possible, allow staff to select training based on the needs they've identified and the evidence base of the practices to be covered. OR offer staff choices of relevant training and allow them to select from these choices.

61

Match Professional Development to Need

- ✓ Ensure a link between practices/methods being promoted and supportive *evidence*.
- ✓ Determine the link between program philosophy and practice being promoted.
- ✓ Select instruction based on gaps in knowledge base and competency levels.
- ✓ Offer staff choices of relevant instruction
- ✓ Support peer-to-peer learning (i.e., send co-workers to training together).

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It is also important to consider sending staff that work together to training together (to support each other when they come back). But this doesn't mean to send ALL staff to the same training if it is not appropriate.

62

Slide 62. Communicate two things to your staff about training:
1. Importance and relevance of training to their job and the children they teach, and
2. Your expectations of staff when they return from training.

You can help staff see the importance and relevance of training by expressing your expectations during interviews, writing expectations as part of the job descriptions, including them in staff orientations, and requiring written professional development plans.

63

Slide 63. Help staff prepare for learning experiences. The more that staff members think about what they want to get out of a training BEFORE they attend, the more likely they are to apply what they learn.
- Set training goals (included in professional development plans): Encourage staff to think about what he/she expects to learn and how this will be applied.
- Complete pre-training activities: Trainers are being encouraged to send trainees pre-training activities. Do you ever see something like that before a training?—something designed to get trainees to think about the training content before they arrive (e.g., something to read—director could have file on subject to share with trainees, etc.). Information that describes the evidence that the practice works?
- Explore content before the training: If the trainer doesn't send a pre-training assignment, develop one yourself. Find a short article on the topic, ask staff to research topic on the Internet, etc.
- Identify current situation related to training that needs a solution: Help staff identify a current problem/challenge related to social emotional development and challenging behavior that the training is likely to provide a solution for.
- Identify a follow-up activity: Identify an activity the employee can undertake as a result of what he/she learns during training.

The most effective way to do any or all of these things is to conduct a pre-training meeting with staff. Staff members clearly need to understand you expect them to transfer what they've learned to the work environment. You can develop a pre-training plan as part of a professional development plan.

64

> **Support Application of New Knowledge/Skills**
>
> • Conduct post-instructional meetings.
>
> • Help staff develop an individual action plan and monitor/supervise progress.
>
> • Modify the work environment to support application.
>
> • Provide opportunities to practice new skills.
>
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Slide 64. Support application of new knowledge. Conduct post-training meetings:
- Help staff develop an individual action plan or post-training plan, and monitor progress—collect data on implementation and effect on child progress.
- Modify the work environment to support application.
- Provide opportunities to practice new skills.

65

> **Support Application of New Knowledge/Skills (Cont.)**
>
> • Provide resources and supervision needed for application.
>
> • Schedule briefings for co-workers.
>
> • Provide coach/mentor and/or establish peer/coaching program.
>
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Slide 65. Give examples of points on the slide:
- Provide resources needed for application: release time, funding, use of computer, samples.
- Schedule trainee briefings for co-workers: staff meetings, write abstracts, team practice.
- Support the use of job aids: pre-training plans, post-training action plan, articles to read, pre-training assessment/questionnaire.
- Coaching/mentoring—note that you will talk about this in a few minutes.

What other supports can program leadership provide?

Slide 66. Discuss the coaching process.

Planning Conference—During a planning conference, the coach and staff person (1) discuss a new skill the teacher would like to become better at, (2) discuss the staff person's plan for using the new skill, (3) make plans for the coach to observe the staff person using the new skill; and (4) discuss the exact kind of feedback the staff person wants from the coach.

66

> **The Coaching Process**
>
> Planning Conference
>
> Debriefing Conference
>
> Observation Teaching Performance
>
> Reflection Time
>
> 66

Observation/Teaching Performance—Coach observes staff person using the new skill in the program, or staff person may observe the coach performing the skill.

Reflection Time—After the observation, both the coach and staff person individually take time to think about what was expected to happen and compare this to what actually happened—what they need to do differently and possible ways to deal with the discrepancy.

Debriefing Conference—During a debriefing conference, review what the coach observed (objectively) and the teacher's thoughts about trying the new skill and any other issues surrounding the activity. Plan for any change to minimize discrepancies between planned behavior and actual behavior. Staff person makes decisions of what to do next and what he/she wants the coach to do. Staff person is an equal partner in deciding what he/she wants to develop and how he/she wants to develop desired behaviors.

67

Recognize Staff for Applying New Knowledge/Skills

Acknowledge and recognize successes:
• Hats-off bulletin board
• Special certificates
• "Pats on the back" notes
Create incentives:
• Promotions
• Pay increases
• Rewards

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Slide 67. Recognize staff. Research shows that employees are more likely to apply newly learned knowledge and skills if their director
1. establishes the expectation that employees are to use knowledge and skills learned in training and
2. acknowledges the employees' use of the new knowledge/skill in a positive way.

Start by catching employees applying the knowledge/skills learned during training and letting him/her know that you have noticed and appreciate the desired behavior.

Then, to the extent possible, tie application of training to tangible benefits.

Brainstorm what some of these benefits might be and record them on a **flip chart.**

Administrators could tie these kinds of recognitions to the end of a review period (e.g., six-month or yearly review). Application of new skills could result in a pay increase, etc.
Does anyone do this now? Any questions?

68
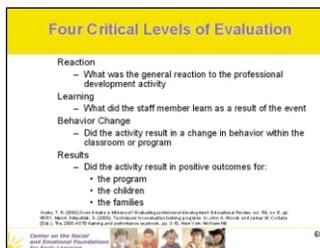
Slide 68. Discuss four critical areas of evaluation.
Reaction
• What was the general reaction to the professional development activity?

Learning
• What did the staff member learn as a result of the event?

Behavior Change
• Did the activity result in a change in behavior within the classroom or program?

Results
• Did the activity result in positive outcomes for:
 – the program
 – the children
 – the families

Discuss each of the areas of evaluation (reaction, learning, behavior change, results).

Are you currently incorporating each of these into your evaluation system?

69

Slides 69-71. Rewarding employees for a job well done is important. There are many ways to do this, both formal and informal.
• Informal rewards
 – No-cost recognitions
 – Low-cost recognitions
 – Activities
 – Public recognitions/Social rewards
 – Communication
 – Time-off
 – Cash/cash substitutes/gift certificates
 – Merchandise/Apparel/Food
 – Recognition items/Trophies/Plaques
 – Fun/Celebrations

70

71

• Awards for specific achievements and activities
 – Outstanding employee awards
 – Quality awards
 – Employee suggestion awards
 – Customer service awards
 – Group/team awards
 – Attendance and safety awards

- Formal Awards
  - Contests
  - Field trips/special events/travel
  - Education/personal growth/visibility

Talk about the various ways listed and consider how easy or difficult it might be to use them.

72

Individual Growth Plan

AREA	GOAL	
Activities	**Evaluation**	**Resources Needed**

Slide 72. Discuss the Individual Growth Plan (in Participants' Workbook—**Handout 4.2**). This form or something like it can be used as a professional development plan, it can include pre-training as well as post-training plans. The important thing is to be specific about the knowledge and skills to be acquired, how they will be learned, how the use of them will be evaluated, and the resources needed for the staff person to carry out the plan.

73

Table Activity

For the challenge assigned to your table:

- Identify a strategy for solving the challenge (see sample in "Participant's Workbook").

- Name team members for collaborative planning.

- Draft an action plan (action plans are in the workbook).

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Slide 73. ACTIVITY: Give each table a challenge (see the challenges in the Participants' Workbook **Handout 4.2, p. 3/12**) and ask them to complete the steps on the slide and to have someone report to the group if there is time.
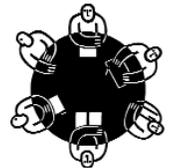
Debrief: How did the form work for you? Was it useful? Did it seem easy to use? Was it practical?

GROUP DISCUSSION: Ask how all these leadership practices: Leadership, Vision, Collaborative Planning, Action Planning, and Supporting Knowledge and Skills can address attitude and belief barriers to effective practices related to children's social emotional development and challenging behavior (refer to the attitude and belief barriers in the Particpants' Workbook, **Handout 4.2, p. 4/12**).

VIII. Three Levels of Change (60 minutes)

74

Three Levels of Promoting Social Emotional Development and Addressing Challenging Behavior:

• Child level

• Program or Center-wide level

• Community or System level

75

Teaching Pyramid

76

Child Level

• Create team of administrators, families, direct services, staff members, and consultants.

• Commit to evidence-based promotion, prevention, and intervention practices in class or home-visiting services.

• Use the teaching pyramid.

77

Program- or Center-wide Level

What is program-wide model for preventing/addressing challenging behavior?

* Builds on the Teaching Pyramid by designing intervention from the whole (universal) program to the individual child

78

Program- or Center-Wide Level

* Uses collaboration to ensure:

• Administrative support and buy-in
• Buy-in from staff
• Family involvement

Dunlap, Glen, Fox, Lise, Hemmeter, Mary Louise (2004) Program Wide Approaches for Addressing Children's Challenging Behavior, National Training Institute presentation, Clearwater Beach, FL.

79

Program- or Center-wide Level (Cont.)

* Critical Elements:
• Identification of program-wide vision and expectations that are developmentally appropriate
• Strategies for embedding the pyramid approach (promotion, prevention, intervention) throughout the program
• Curriculum approaches that promote vision and expectations and acknowledge children's achievement of the expectations

80

Program- or Center-wide Level (Cont.)

* Critical Elements:
• Strategies for responding to challenging behavior
• Team based, individualized approach for addressing ongoing challenging behavior
• Professional development plans
• Strategies for supporting teachers
• Process for monitoring outcomes- data collection

Dunlap, Glen, Fox, Lise, Hemmeter, Mary Louise (2004) Program Wide Approaches for Addressing Children's Challenging Behavior, presentation, National Training Institute, Clearwater Beach, Fla

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VIII. Three Levels of Change (60 minutes)

Slide 74. Other ways to approach implementing the pyramid conceptual framework can be seen by exploring three levels of promoting social emotional development and addressing challenging behavior: child level, program level, and community or system level.

Slide 75. Review the Teaching Pyramid again.

Slide 76. At the child level, we can collaborate with families and direct services staff and consultants to use evidence based practices in the program and at home. We can apply the Teaching Pyramid as we have discussed.

Slides 77—80. While individual teachers can and do make changes that affect children, it is far more effective to consider adopting the Teaching Pyramid "program-wide." The next several slides describe strategies and steps that programs in several communities have used to implement the Teaching Pyramid and the promotion-to-intervention framework throughout their program.

Critical elements include:
• Identification of program-wide vision and expectations that are developmentally appropriate
• Strategies for embedding the pyramid approach (promotion, prevention, intervention) throughout the program
• Curriculum approaches that promote vision and expectations and acknowledge children's achievement of the expectations
• Strategies for responding to challenging behavior
• Team-based, individualized approach for addressing ongoing challenging behavior
• Professional development plans
• Strategies for supporting teachers
• Process for monitoring outcomes—data collection

These strategies are developed collaboratively by a stakeholder team of leaders, direct service staff, families, and others that would be key to the success of the effort. The goal is for: all staff and families to know the behavioral expectations of the children and how the program (1) promotes prosocial behavior, (2) prevents challenging behavior, and (3) addresses challenging behavior through individualized intensive interventions.

Resources and supports are needed to make the approach successful. A key to success is a data system for monitoring outcomes (child behaviors, teacher and family satisfaction, etc.). Basically this process involves applying the pyramid, the staff development/supervision/evaluation, and collaborative planning throughout the program rather than focusing on isolated problems.

Discuss how buy-in from various staff might be garnered.

Stress that successful achievement of these elements can only occur through an ongoing process and not a one-day training. Further, various planning activities for individualized approaches, staff support, and monitoring outcomes require a serious commitment, rooted not only in training and practice but also in policy.

81

Example: SEK-CAP Head Start

• Rural program in southeast Kansas
• Covers over 7,000 square miles in 12 counties
• Serves 768 children and families
• Employs 174 staff in the Early Childhood Services
• 14 centers, 17 classrooms, 25 home visitors, and 19 child care partners

Slide 81. The next series of slides describe the steps used by one program in Kansas to adopt the Teaching Pyramid throughout its program.

82

Why They Chose Program-wide Adoption

Background:

Even with training in behavior management techniques, Head Start staff reported:

• leaving work in tears
• inability to deal with all children
• high levels of stress and burnout
• looking to outside "experts" to solve problems in the classroom

Slide 82. The Southeast Kansas Community Action Program (SEK-CAP) Head Start program began implementing the Teaching Pyramid with some level of exposure to behavior management techniques. Even with this background, the Head Start staff reported:
• leaving work in tears
• inability to deal with all children
• high levels of stress and burnout
• looking to outside "experts" to solve problems in the classroom

83

ADMINISTRATIVE SUPPORT FOR PROGRAM-WIDE ADOPTION

Leadership Commitment

Resource Deployment

Data-based, Intentional Planning

Shared Decision making, Collaboration

Staff Development

Slide 83. The administration made a commitment to a program-wide adoption of the Teaching Pyramid and the use of data-based planning. To pull the pieces together, they also realized they would need not only a commitment from all levels of leadership, but also a commitment of resources, a commitment to ongoing staff development, and a commitment to the process of shared decision making across all members of the staff and families.

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Leadership

• Leader as resource & support to staff
• Leader as listener and data collector
• Shared decision making: Build a team and shared vision; foster a climate of risk-taking
• I.D. consultant re: evidence-based practices
• Develop collaborative plan
• Deploy resources/$ as dictated by plan

Slide 84. The roles that leadership of SEK-CAP defined for themselves were as follows:
• Leader as resource & support to staff
• Leader as listener and data collector

- Shared decision making: Build a team and shared vision; foster a climate of risk-taking
- I.D. consultant re: evidence based practices
- Develop collaborative plan
- Deploy resources/$ as dictated by plan

Slides 85-86. Several components of the plan required deploying financial resources and altering the budget. Major shifts in the budget were required to ensure:

- Resources were re-focused to support promotion and prevention, e.g., MH consultants assisted with promotion and prevention not just intervention.
- Resources were allocated for staff development and support, transfer of knowledge activities, and continuing education.
- Resources were targeted for data collection, management, consultants for ongoing analysis, and evaluation.
- Resources were used for consultants to i.d. evidence based practices, training, facilitation.
- Resources and time were allocated for acknowledging staff work.
- Resources were allocated for staff well-being, benefits.
- Resources were allocated for teaming.
- Satisfied, trained staff equals less turnover, better outcomes.

Slides 87-88. A staff development plan that included ongoing support was created. Key features of the plan were ensuring that:

1. the Teaching Pyramid would be embedded throughout the program;
2. existing staff and new hires understood the expectations;
3. initial training would be provided;
4. following initial training, each center would work as a team to identify needs;
5. leadership would meet with supervisory staff person to develop an implementation plan across the program; and
6. program, staff, and site professional development plans would be created

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Resource Deployment/Budget

- Resources re-focused to support promotion and prevention, e.g., MH consultants assist with promotion & prevention not just intervention
- Resources for staff development & support; transfer of knowledge activities; and continuing education
- Resources are targeted for data collection, management, consultants for ongoing analysis and evaluation

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Resource Deployment/Budget

- Resources are used for consultants to i.d. evidence-based practices, training, facilitation
- Resources and time are allocated for acknowledging staff work
- Resources for staff well-being, benefits
- Resources are allocated for teaming
- Satisfied, trained staff = less turnover, better outcomes

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Staff Development & Support

- Embed Pyramid throughout the program
- Staff/interviewees learn expectations
- Initial training provided

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Staff Development & Support

- Following initial training, each center works as a team to identify needs
- Meet with supervisory staff person to develop an Implementation Plan
- Program, staff, and site professional development plans

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Staff Development & Support

Attend to transfer of knowledge by:
- Mentoring: staff and sites can mentor based on assessed strengths
- Acknowledging work
- Employing "substitutes"
- Continuing education support

90

Planning & Accountability

Ongoing evaluation and Data-based planning meetings. Data collected through:
- Classroom Observations
- Staff Interviews & Satisfaction Survey
- Referral Data
- Staff self-assessments and development plans

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Planning & Accountability

- Build a data management system
- Child and family outcome data
- All data used by Team for short and long range planning and evaluation
- Consultants hired to analyze data and develop reports

92

Collaboration

- *Collaboration!* Takes time, effort, and patience.
- With families: Partner from beginning. What are their objectives? What does the child like? Policy Council approved initiative
- With staff: Core and staff teams collaborate in planning and decision making; home-visitor program is transdisciplinary.
- With community: Share training opportunities; collaborate with higher education (courses, field placements); ensure child care and other community programs at table when planning for a child.
- Challenges: Philosophies, beliefs, turf, and finances.

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Program-wide Adoption: Outcomes

- Staff view themselves as having the skills to better support children in classrooms.
- Staff look to each other as sources of additional information and support.
- Staff can demonstrate the fundamental elements in their classrooms.

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Outcomes

- A culture of support is created throughout the program.
- Staff become intentional and purposeful in interactions with children in order to build on their strengths.
- Staff turn over is reduced; staff satisfaction is increased.

Slide 89. Importantly, the leadership at SEK-CAP attend to transfer of knowledge by:
- Mentoring: staff and sites can mentor based on assessed strengths
- Acknowledging work
- Employing "substitutes"
- Continuing education support

Slide 90. Discuss planning and accountability. A strong commitment was made to evaluation and making data-based decisions in their planning meetings.

Data were collected through:
- Classroom Observations
- Staff Interviews and Satisfaction Surveys
- Referral Data
- Staff self-assessments and development plans

Slide 91. Through the evaluation, a data system was created to manage information on child and family outcomes. This data system was used by the SEK-CAP program for both short- and long-term planning. As needed, a consultant was hired to analyze data trends and create additional reports.

Slide 92. It was critical to collaborate and share decisions and ideas with all stakeholders. Challenges to collaboration included differing philosophies and beliefs, turf guarding, and financial and other resource constraints.

Slides 93-95. Describe the outcomes. Several significant outcomes were achieved by SEK-CAP. These outcomes included:

- Staff view themselves as having the skills to better support children in classrooms.
- Staff look to each other as sources of additional information and support.
- Staff can demonstrate the fundamental elements in their classrooms.
- A culture of support is created throughout the program.
- Staff become intentional and purposeful in interactions with children in order to build on their strengths.
- Staff turnover is reduced; staff satisfaction is increased.

95

Outcomes

- Staff ask for fewer suggestions from mental health professionals.
- The number of children receiving individual counseling from psychologists decreased.
- The number of children identified as having challenging behavior and referred for mental health services decreased.
- Program spends less time and resources on intervention level and more on prevention level of the Pyramid.

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Community or System-wide

- Systems must provide *range or continuum* of service: promotion to prevention to intervention.
- Systems must provide a *comprehensive* array of services.
- Services must be *individualized*.

Smith, B. & Fox, L., Synthesis of Evidence Related to Systems of Services, Center for Evidence-Based Practice: Young Children with Challenging Behavior, www.challengingbehavior.org

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Community or System-wide (Cont).

- Systems should be *family-centered* and include both child-focused services and family supports.
- *Personnel* need resources and working conditions to provide evidence-based services: adequate funding, caseloads, collaborative arrangements, professional development opportunities, wages, and benefits, etc.

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Community or System-wide (Cont).

The *"systems of care"* concept used in mental health offers promising guidelines.

"System of care":
The weaving together of multiple existing services or programs into a cohesive, collaborative system that reduces overlap, fills gaps, and addresses transition issues for children moving from one service to another or needing to access multiple services.

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Community/System Pyramid

Children with
Delays & Persistent
Challenges
(Family-Centered Intervention Focused on
Targeted Outcomes)

Children At-Risk
(Parenting Support and Education, Health Care,
Home Visiting, High Quality Early Care, Family
Supports and Services, Screening and
Assessment, Service Coordination and Case
Management, Mental Health Consultation, etc.)

All Children
(Nurturing Relationships, Health Care, Parent
Education, Screening, High Quality Early Care,
etc.)

99

- Staff ask for fewer suggestions from mental health professionals.
- The number of children receiving individual counseling from psychologists decreased.
- The number of children identified as having challenging behavior and referred for mental health services decreased.
- Program spends less time and resources on intervention level and more on prevention level of the Pyramid.

Slides 96-97. Discuss community or system-wide change. The Center for Evidence-Based Practices: Young Children with Challenging Behavior (CEBP) reviewed the research literature on community and system-wide change. The following slides contain the recommendations from the literature synthesis for systems that would support young children's social emotional development and address challenging behavior through evidence based practices. These recommendations include:

- Systems must provide a range or continuum of service from promotion to prevention to intervention.
- Systems must provide a comprehensive array of services. Services must be individualized, related to child and family needs, culture, and language.
- Systems should be family centered and include both child-focused services and family supports.
- Personnel need the resources and working conditions to provide evidence based services.
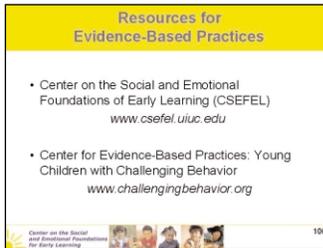
See the Synthesis at www.challengingbehavior.org

Slide 98. One recommendation from the synthesis of literature is the "systems of care." The "systems of care" concept used in mental health offers promising guidelines and refers to the weaving together of multiple existing services or programs into a cohesive, collaborative system. The Collaborative Planning Model would be a strategy for advancing that notion in the community.
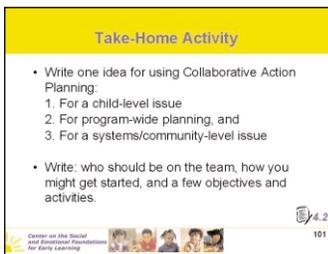
Slide 99. Discuss how the pyramid approach applies to the community/system level.

IX. Summary/Optional Take Home Activity
(30 minutes)

100

> ### Resources for Evidence-Based Practices
>
> • Center on the Social and Emotional Foundations of Early Learning (CSEFEL)
>   *www.csefel.uiuc.edu*
>
> • Center for Evidence-Based Practices: Young Children with Challenging Behavior
>   *www.challengingbehavior.org*
>
> *Center on the Social and Emotional Foundations for Early Learning*   100

101

> ### Take-Home Activity
>
> • Write one idea for using Collaborative Action Planning:
>   1. For a child-level issue
>   2. For program-wide planning, and
>   3. For a systems/community-level issue
>
> • Write: who should be on the team, how you might get started, and a few objectives and activities.
>
> *Center on the Social and Emotional Foundations for Early Learning*   4.2   101

102

> ### BE THE CHANGE YOU WISH TO SEE
>
> Mahatma Gandhi
>
> *Center on the Social and Emotional Foundations for Early Learning*   102

IX. Summary/Optional Take Home Activity
(30 minutes)

**Slide 100.** Talk about the resources available to the participants and the Web sites:

• www.csefel.uiuc.edu Center on the Social and Emotional Foundations for Early Learning (CSEFEL)

• www.challengingbehavior.org Center for Evidence-Based Practices: Young Children with Challenging Behavior

Slide 101. TAKE-HOME ACTIVITY. Ask the group to do the activity as individuals or, if they have a partner from their program, ask them to work with a partner. Take 10 minutes.

They should take this work home to facilitate their continued work on action planning to overcome challenges to evidence based practice for children's social emotional development and challenging behavior.

There are other Take-Home Activities in the Participants' Workbook (**Handout 4.2**).

Slide 102. Gandhi said, "Be the change you wish to see." The best leadership is often communicated through modeling.
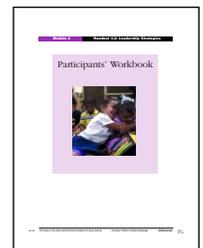
Thank the participants for their attention and hard work throughout the day and ask them to complete the evaluation.

> Participants' Workbook

Handout 4.2