

**LESSONS LEARNED:
PERSONNEL FOR EARLY INTERVENTION, BIRTH-3**

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The term "early intervention" as used in this paper refers to services for birth-3 year olds with disabilities, as defined, supported, and governed in federal legislation related to special education. It includes young children with all disabilities, as well as children identified as having developmental delays. Depending on the state, it may also include children who are at risk for developing disabilities or developmental delays based on conditions in the child (e.g., low birth weight) or in the environment (e.g., poverty). Early intervention services include a comprehensive system of services that address the multiple needs of these children, and the multiple needs, concerns and priorities of their families. It may be provided by any one or more type of agency, school or program, and may involve the services of professionals from any one or more discipline (e.g., special education, social work, occupational therapy).

Federal and state legislation to support early intervention is relatively new, and many of the conditions that initially characterized the early intervention field are analogous to those that currently characterize prekindergarten services and a qualified prekindergarten work force. For example, in most states there were no personnel standards related to this unique population, and personnel were often under-educated for the roles in which they found themselves. There also was little training available. Early childhood education and early childhood special education training, where available, tended to focus on older portions of this age group and on public school settings. Where university programs were available, there was little expertise among faculty with respect to this population, and few resources available for faculty retooling. Training for already working personnel, when available at all, was delivered primarily in the form of one-time workshops, and was inconsistent in content. Because the field was rapidly expanding, there were also huge shortages in personnel, creating the temptation not to set standards so that vacancies could be more easily filled. Finally, there was a significant mismatch between the workforce and the families receiving services with respect to primary language and ethnicity.

In short, those concerned about personnel to provide early intervention services were torn between meeting short-term needs for many new personnel, and long-term needs with respect to quality. These same opposing forces are also apparent in the prekindergarten movement. It is our hope that lessons

learned from our experience in early intervention will enable those in the prekindergarten movement to at least be on the alert for similar issues. To set the context for understanding these lessons, we will first provide an overview of how early intervention emerged. We then describe the experiences of one state as it addressed its personnel needs. We end with a summary of lessons learned as we negotiated our way through the quantity vs. quality dilemma.

Historical Perspective

Personnel preparation in the field of early intervention is intertwined with federal legislation in special education. To set the context for what we learned from our work in personnel preparation in early intervention, it is necessary to provide a bit of history of three parts of the Individuals with Disabilities Education Act and how they relate to what has transpired in early intervention. These include Part B, which addresses special education for children with disabilities between 3 and 21 years of age; Part C (formerly Part H), which addresses services for infants and toddlers with disabilities and their families; and Part D, which funds various kinds of grants focused on the infrastructure (including personnel preparation) to support special education services.

Part B – Special Education and Part C

Early childhood intervention for young children with disabilities received impetus as a field with the 1968 funding, within the Bureau of Education of the Handicapped (BEH), of the Handicapped Children's Early Education Program (HCEEP). This Program funded a small number of "First Chance" projects, with the mandate to develop, provide, and disseminate model programs for young children with disabilities. Many of these and later projects funded through HCEEP were developed within university settings. Given extensive replication, services to young children with disabilities expanded rapidly.

HCEEP provided the foundation for a national network of professionals interested in early childhood program development and evaluation, and nurtured the emergence of a new, unique body of theory and knowledge. In 1973 these leaders joined together to form the Division for Early Childhood within the Council for Exceptional Children. DEC has provided national leadership on personnel standards and preparation. Based on the work of DEC, many states now have certification requirements for teachers of young children with disabilities.

The passage of Public Law 94-142 in 1975 provided a national special education mandate for school age children (the IDEA), as well as a mechanism (Section 619) that encouraged states to develop services for preschoolers with disabilities. Some states passed mandates for preschool special education, and also began to prepare personnel to serve this population. Subsequently, in 1986, preschool special education

became part of the special education mandate (P.L. 99-457), due in large part to the advocacy efforts of families and of leaders in DEC. A new Part (Part H, now Part C) of the 1986 special education legislation, while not a mandate, provided significant incentives to states to develop programs for infants and toddlers.

Part C – The Infant-Toddler Program

Many aspects of Part C were unique to the special education world, not the least of which was that the Program was designed to be cross-agency and cross-disciplinary. Part C enumerated 14 components that each state had to address in developing their infant-toddler programs. Of these, two were related to personnel. As shown in **Table 1**, the first required that states use the highest minimum standard for each discipline that was already required in their state, but also allowed each state to develop any new occupational categories that might be needed. The second personnel component required states to develop a comprehensive system of personnel development (CSPD) for Part C, and to integrate this as much as possible with the CSPD for special education (Part B).

Part D – Infrastructure Support including Personnel Preparation

Another important part of the IDEA and its precursors has been the guidance and support for personnel preparation provided through Part D. These have taken several forms, including requiring each state to develop a "Comprehensive System for Personnel Development" (CSPD), as well as providing competitive training grants to universities across the country.

In the early 1970s, BEH (now OSEP) began including early childhood special education as one of the areas funded for university training. The number of programs funded was initially quite small; often, these were connected to the same universities that had developed models through HCEEP funds. These training programs had a tremendous influence on the growth of early childhood special education (ECSE) as a field by nurturing new leaders who were at the cutting edge of research and practice with respect to young children with disabilities.

For a number of years in the 1980s and 90s, in conjunction with the new focus on infants and toddlers, targeted funding was provided for preparing early intervention personnel, birth-3. These new personnel preparation programs responded to the personnel sections of the new Part H. Much of the thinking about personnel standards and personnel preparation approaches related to early intervention came from these programs as faculty and program graduates became involved in national and state activities related to infants and toddlers. This work was furthered by additional federally funded projects related to faculty training and to assisting states to develop systems of personnel development for this age period.

Personnel Issues

States encountered many issues as they began to implement the two personnel components of Part C. First, many early intervention services were already in place, and the majority of individuals working in those programs were not covered by state licensing requirements for any discipline (e.g., teaching, therapy). Little training was available, so that many of the individuals providing early intervention services had not been prepared with the skills and knowledge to work with this new population. Second, the new legislation was expected to greatly increase the number of children and families entering early intervention services, such that huge shortages of personnel were expected in addition to those that already existed in many of the disciplines involved. Studies conducted nationally and within some states consistently identified the issues shown in **Table 2**; as noted earlier, these are quite similar to those currently facing prekindergarten services. Third, the roles of preservice and inservice preparation had to be clarified with respect to current and future service providers. "Quantity vs. quality" became a primary issue as new personnel standards and required training were considered.

The new Part C funding made it imperative that current programs, providing services under different agencies, collaborate together. Similarly, members of different disciplines, often speaking different languages and with very different training backgrounds, were expected to collaborate in providing services to children and families. As shown in **Table 3**, each state had to address a number of difficult questions as personnel standards and activities were developed.

An Example: One State's Story

The story of one state's response to these issues may be instructive. The status of personnel in Illinois mirrored that described above. When Part H/C was passed, there were no preservice programs in Illinois that focused on early intervention, birth-3. A statewide inservice/technical assistance system for early childhood was preschool-focused, and relied primarily on large-scale, brief inservice trainings, responding to statewide needs assessments. Further, these trainings were oriented toward educators who worked in public school programs; personnel from other disciplines, working with young children in other settings, were not targets.

On the positive side, several universities soon began to address this population, and some took an interdisciplinary approach based on collaboration among faculty in different departments. In addition, there was an active personnel committee attached to the interagency council for early intervention, which was taking an active role in developing recommendations for standards and training opportunities. This

committee included multiple players, crossing agencies, disciplines, universities, and also including parents among the primary membership.

Long-term goals for the personnel system, agreed upon by this committee and subsequently by the Illinois Interagency Council for Early Intervention, are shown in **Table 4**. In addition, the committee adopted a set of guiding principles, shown in **Table 5**. Based on these goals, and recognizing these principles, a structure evolved that included personnel standards for each discipline, as well as for three new occupational categories deemed necessary (child development specialist, family support specialist, and service coordinator). We found that having a set of principles that were agreed upon by multiple parties greatly expanded our ability to think about both short-term and long-term needs, and ways that each could be addressed.

An important assumption made in adopting these standards was that current personnel were the most qualified individuals in the state to fill their current positions. Therefore, while high standards were adopted, it was deemed essential that ways of achieving these standards also be provided. An overview of the system, shown in **Table 6**, shows the multiple approaches that were adopted. These included development of both preservice and alternative avenues to credentialing, as well as a variety of ways of obtaining credit under the alternative approach.

One of the major supports to implementing some parts of this structure was a federally funded Partnerships Project implemented collaboratively by the Illinois State Board of Education, the University of Illinois in Champaign-Urbana, and the University Affiliated Program at the University of Illinois in Chicago. This project supported in full some of the more creative alternatives for achieving credit toward credentialing, including minigrants to universities for program development and minigrants to existing infant-toddler programs to provide observation and training to other personnel. The intent was not only to build expertise, but also to recognize and make use of the expertise already available in the state. The Partnerships Project also developed and managed a system for credentialing personnel that was subsequently adopted as the basis for a state-funded system.

Lessons Learned

- **Lesson 1: Federal and state agencies or other entities can play beneficial roles by setting the directions that personnel efforts will take.**

The federal government has played a strong, historic role in creating special education services and the infrastructure to support the services (see history). The need for some sort of federal role for helping pull together the fragmented and disorganized set of initiatives for young children with disabilities and their

families was compelling. Family voices were especially strong in making this case. The federal legislation outlined 14 required components to which each state had to respond, but gave each state the opportunity to develop a state-specific plan. In other words, the federal role was to provide guidelines and a vision for quality.

- **Lesson 2: Focusing infrastructure support for leadership development, model development, and research in the same locations or institutions can be a powerful way to develop a cadre of versatile leaders who understand and can combine research, practice, and teaching.**

Federal funding for a full range of professional activity was important in building versatile leaders. Centers of excellence combining research, model demonstration, personnel preparation and outreach sprang up in certain areas. Leadership was developed in an environment where research and practice co-existed, and researchers in early intervention have historically had an applied and intervention focus.

- **Lesson 3: Mandates can provide a powerful "rationale" for starting the processes of change, and mandating collaboration helps it to happen.**

Mandating that personnel standards be developed provided a strong incentive to improve the quality of personnel standards and personnel preparation across multiple disciplines. The collaborative aspects of special education and **especially** early intervention services have always been an important part of their identities. Collaboration in Part C has been emphasized in many ways: among agencies, organizations and disciplines, between school-home/parents-providers, across federal, state and local levels, and so on. The competitive federal grants for personnel preparation programs from OSEP gave preference to grants that were interdisciplinary and collaborative. Collaboration challenges abounded when Part C was first passed (see history); over time interdisciplinary and interagency relationships have been strengthened because of the legislation and because of various support structures under Part D of the legislation (Trohanis, 2001).

- **Lesson 4: Financial incentives for improving the quality and quantity of personnel are powerful tools for creating and sustaining innovation and systems change.**

Federal and some state resources to support an infrastructure for personnel development have been available for the last 20 years, and have supported students, faculty, universities, parent organizations, and state personnel systems. This funding has provided a catalyst for innovation and collaboration and the development of a strong network across the country of researchers, administrators, faculty, staff development specialists, state agencies, and parent organizations. A federally funded national technical assistance system (NECTAS) has played a significant role in building and supporting this collaboration. Most of the current leaders in early intervention were supported by stipends and fellowships from OSEP

funded personnel preparation programs. The federal funding did not go to students directly. It was awarded to IHEs that wrote competitive grants for innovative personnel preparation programs, thereby building knowledge about high quality approaches to personnel preparation. As shown in the Partnerships Project in Illinois, financial support does not have to be extensive in order to bring about system change.

- **Lesson 5: Collaboration among the many entities involved in early intervention is complex. Solutions to one set of problems create different problems that must be addressed. Thinking systemically and systemically about these issues is critical.**

An analysis of states' progress in implementing Part C conducted five years after it was passed indicated that the two components that address professional development...CSPD and standards...were the areas in which the least amount of progress had been made (Harbin, Gallagher & Lillie, 1991). In addition, NECTAS, whose job it was to provide technical assistance to the states in implementing Part C, reported that personnel preparation was the most requested area for technical assistance (NECTAS, 1994). Early challenges faced by states included personnel shortages, especially within the related disciplines (see Table 2). In many states the pressure to serve children was so great that personnel preparation took a "back seat" to getting services off the ground.

The need to retrain and retool large numbers of existing early intervention specialists in the new priorities for family-centered, interdisciplinary early intervention was an enormous task for states. IHEs were not set up to address this need, and were often viewed as expensive, inaccessible, and overly theoretical. Moreover, early intervention and the birth-3 population in general was not a major focus of many professional certifications and licenses, and faculty often did not have expertise in this area. Another significant issue that states had to address was the question of potentially different early intervention preparation expectations for "generalist" roles such as those of child development specialists or family support specialists versus "specialist" roles such as those filled by therapists. Because of already significant shortages for specialists, many states chose not to require additional training related to birth-3 for specialist personnel.

Attention to quantity and quality must go hand in hand; if one is emphasized over the other, it is often at the expense of the other. A quick fix one-shot workshop approach to addressing quantity was unfortunately a common approach to addressing short-term need, to the neglect of longer-term, sounder solutions. Nevertheless, federal grants for personnel preparation programs for IHEs began to call for stronger responsiveness to state needs and looked for greater innovations in terms of making courses available through distance education, weekend and summer institutes, and so on. As mentioned earlier, national

faculty institute projects were funded that focused on systems change issues and partnerships among IHEs, state and local agencies, disciplines and families.

- **Lesson 6: Families can be powerful allies for setting the tone of personnel preparation and for sustaining funding for personnel preparation, especially when they have a central role as both beneficiaries and leaders of the initiatives.**

Families, especially those who were professionals as well, have played a strong advocacy role and have made an impact at many points in time in getting special education legislation passed. In Part C early intervention legislation, parents have a mandated advisory role through participation on statewide and federal ICC. This role was not mandated but strongly encouraged at the local ICC level. By mandating advisory roles for parents, Part C helped grow the visibility and power of parents. Recently the leadership role for families has expanded to include personnel preparation. Strong family voices have been important for saving the special education infrastructure when funding has been tight. For instance, during the last reauthorization, Part D was threatened. The first component of Part D to be reinstated during debate was the Parent Training and Information centers. The PTIs are designed to provide support and training to parents.

More Lessons to Learn: Emerging and Unresolved Issues

Collaboration

The federal role in funding infrastructure development related to professional development has been important in terms of improving the quality of services; however, there are instances when the strong federal role may have hindered collaboration in unintended ways. For example, some IHEs wrote competitively funded grants for personnel preparation programs that did not reflect state licensure or certifications and did not necessarily prepare or encourage early intervention specialists to work in in-state positions. This was particularly galling to state agencies who were dealing with personnel shortages and not seeing the public IHEs as being responsive to state need. Federal personnel preparation grant applications now demand stronger documentation for state-IHE partnerships and consider that documentation in their funding decisions.

The CSPD component of Part C legislation was envisioned as an important way to create collaboration around personnel preparation (see history). It has not necessarily worked as such. In most states the Comprehensive System for Personnel Development is a paper document that is not even known to exist by the majority of stakeholders and does not serve as a vehicle to promote collaboration. In many states

agencies engage in “parallel play” when planning and implementing personnel preparation efforts related to young children.

Diversity

The lack of diversity in the early childhood/early intervention workforce at the leadership levels has gotten increasing attention. As mentioned earlier, for decades there has been federal funding to support leadership development in early intervention. What if from the beginning there had been a genuine emphasis on attracting non-traditional students into these programs? If diversity had been a competitive and enforced priority for these grant programs from the start, would the leadership in early intervention look different now? A recently funded OSEP project, The Alliance Project, provides technical assistance to historically black colleges and universities to enhance their ability to compete for OSEP personnel preparation grants. The Alliance Project has been successful at achieving this goal, suggesting that in the future more leaders will emerge from these colleges to participate in early childhood policy setting and personnel preparation.

Sustainability

The early intervention story is one of rapid change and innovation when one considers what has been accomplished in a relatively short 15 year period since the passage of Part C legislation. The federal role in promoting that change has been significant. According to Trohanis (2001) 80-89% of the federally funded early childhood OSEP projects have continued to provide service beyond their federal grant period. Nevertheless, a follow-up study of 10 OSEP funded interdisciplinary personnel preparation projects indicated that once funding ended the programs returned to their uni-disciplinary focus (Rooney, 1996). Projects that seem to have the most success in bringing about long term systemic change are those that are extended by several rounds of grant funding with a sustained focus that builds on the research and evaluation and model development efforts of previous grants. Initially, coursework and practica experiences related to infancy, families, and interdisciplinary practices were lacking in the preservice programs of most of the key early intervention disciplines (special education, allied health, etc.). Regional faculty institutes funded by OSEP were used to help bring about systemic change in higher education through faculty retraining and networking. Early intervention faculty consortia have developed in many states, and a recent research study has attributed that change to these projects (McCormick, Vail, & Gallagher, in press). Family involvement in leadership roles in personnel preparation have increased in states that have been part of these projects, and the catalyst for this change has been attributed to these projects.

Sustained effort over a relatively long period of time, combined with support for those making changes, appears essential. The quantity vs. quality dilemma does not quickly disappear; instead, the need to provide enough personnel to serve children and families continues to divert attention away from the need for long-range plans driven by quality as well as quantity. Critical elements in maintaining direction appear to be: a vision that incorporates both of these qualities; a set of long-range goals related to each of the critical different components of a comprehensive personnel system; short-term goals and activities that address immediate as well as long-term needs; linkages among the different components of the system; and policy that puts in place and backs up the personnel system.

In summary, many of the issues that faced our nation when we first embraced the responsibility for providing our youngest (0-3) and most vulnerable citizens (those with disabilities) and their families with the educational supports necessary for them to develop to their highest potential face us today as we stand poised on the brink of universal pre-kindergarten education. The lessons from early intervention are clear: the federal government must provide guidance and a vision for quality; federal and state resources are necessary that support a range of interrelated and coordinated activities (research, TA, model demonstration, personnel preparation) that build the quality of the workforce while addressing quantity; and collaboration among key stakeholders is critical for building support and implementing these efforts.

References

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Table 1 – Personnel Provisions in Part H (now Part C)

- appropriate personnel standards
 - highest standard for the discipline (10 disciplines plus option of developing new occupational categories)
 - comprehensive system of personnel development
 - preservice system
 - inservice system
 - technical assistance
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Table 2 – Status of Personnel Preparation for Infant-Toddler Population

- variability in training across and within disciplines in exposure to disciplines
 - little time voted to assessment or intervention in birth-3 period
 - little time devoted to family-centered practice or to interdisciplinary team process
 - faculty need rebuilding and support to implement infancy content
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Table 3 – Questions to Address Related to Personnel for the Infant-Toddler System

- what occupational categories will meet the needs of our early intervention system?
- what unique knowledge and skill base in infancy is suitable for personnel in different occupational categories?
- what kind of privileging system or structure will ensure that entry level personnel are qualified for early intervention services?
- what standards will be set for current personnel?
- what system will be used to enable current early intervention personnel to meet these standards?
- what are the characteristics of a statewide preservice system that will provide sufficient long-range entry level personnel?
- what system or structure will be needed to meet ongoing inservice and professional development needs?
- what models can preservice programs use to prepare entry level specialists, and how might this vary for different occupational categories?
- what incentives are necessary for colleges and universities to initiate and carry out training programs?

- what incentives are necessary to recruit and maintain early intervention personnel representative of diverse populations?
 - how will needs of various groups be assessed?
 - how will training be made available to the variety of individuals involved in early intervention?
 - what kind of system is needed to determine and project personnel needs?
 - what structures and processes are needed to develop and institutionalize personnel standards and a comprehensive system for personnel development?
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Table 4 – Long-Term Goals for Personnel System in Illinois

- identify and outline the training needs of infant specialists from different disciplines and levels of personnel
 - identify and outline areas of expertise for all disciplines
 - develop a statewide privileging (certification, licensure, credentialing) system to directly reflect infancy specialization
 - institute and support a coordinated statewide preservice training system to meet entry level needs
 - institute and support a coordinated statewide system to respond to short-term entry level needs of current personnel
 - develop a coordinated statewide inservice and technical assistance system to meet non-entry level training needs on a long-term, continuing basis
 - develop statewide mechanisms to insure that personnel reflect the geographic and cultural diversity of the state
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Table 5 – Criteria for a CSPD Supportive of Long-Term Goals

- statewide, geographically and financially accessible
- interdisciplinary
- coordinated across preservice, inservice, and continuing education
- based on standards that reflect highest standards for each discipline as well as infant/family specializations
- responsive to short-term and long-term needs related to credentialing
- based on systematic, ongoing assessment of need (numbers, quality)

- based on parent-professional collaboration in training process
 - supportive of all early intervention personnel and those who prepare them
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Table 6 – Activities of the Statewide System in Illinois

I. Personnel Standards

- Credentialing System
 - approved university programs
 - portfolio process

II. Personnel Development Activities

- Faculty Development
 - summer institutes for faculty
 - intervisitation
 - minigrants for program development
- Credentialing Activities (initial and ongoing)
 - coursework
 - inservice
 - individual performance projects
 - minigrants for demonstration sites
 - mentoring