

FIRST STEPS

KENTUCKY'S EARLY INTERVENTION SYSTEM

Commonwealth of Kentucky

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- Check out the on-line surveys while they last: Training Survey, Technical Assistance Survey, and Satisfaction Survey. They will be available on the First Steps homepage through October 31. Don't miss this opportunity to give your feedback!

First Steps Says Good Luck as Staff Move to New Positions

Recently, Meredith Brown First Steps Section Supervisor/Part C Coordinator accepted a position for Personnel, Training and Outreach with the Commission for Children with Special Health Care Needs. We will truly miss her energy and enthusiasm for First Steps.

Hello,

I am emailing to inform you that I will be leaving the position of Part C Coordinator effective September 15, 2006. This was a very hard decision; however I am transferring to a state agency that is closer to my home. I have enjoyed the two years that I have worked for First Steps. I will take this opportunity to say thank you to those who supported and encouraged me during my time

with this program. During this time, I have had the privilege to work along with dedicated individuals who strive to ensure that families and children receive the early intervention services that they need.

The Central Office Staff I leave behind are great individuals who will continue to work hard to assist you. This dedicated group will continue to strive to make the First Steps program a national success. While I am leaving the First Steps program, I will continue to speak proudly of your hard work and efforts and promote the services that you provide to families and children.

I will not say goodbye because I am sure our paths will meet again....until then I wish you the

best in all of your future endeavors.

With sincere thanks,

*Meredith Brown MS, RD, LD
First Steps Section Supervisor/
Part C Coordinator*

Changes in the field:

First Steps also says a fond farewell to Pam Rockwell- Parent Consultant at Murray State University, Sandra Wilson-Program Consultant at Western Kentucky University, and Deborah McKenzie-Evaluation Specialist at Morehead State University.

We wish you all the best with your new pursuits !

First Steps Welcomes a New Part C Coordinator- Kirsten Hammock

It's official; Kirsten Hammock has accepted the position of First Steps new Part C Coordinator.

Kirsten was recently hired as the Quality Assurance Administrator, and has an extensive back-

ground in early intervention. She worked for the Lead Agency in Illinois for 11 years providing monitoring and technical assistance, developing policies and procedures, and coordinating program planning efforts. Kirsten worked closely with the

State Interagency Coordinating council in Illinois, participated in and technically supported the development of a system of performance contracting, and coordinated the development of a Child Outcome measurement system. Welcome Kirsten!

Anne Bolly to present at HANDS fall retreat Co-presenter will be Kelly Basham

First Steps will offer an informational seminar presented by our own Anne Bolly. She will be presenting with Kelly Basham. The session will give an overview of the First Steps program, and will illustrate how the HANDS and First Steps programs compliment each other. Anne and Kelly will illustrate opportunities for First Steps and HANDS to collaborate.

Kelly Basham was a HANDS home visitor and is now an Initial Service Coordinator in the First Steps program. The presentation will include eligibility determination, costs to the family, services, Individualized Family Service Plan (IFSP), and the consultative model of service delivery. The session will address how a HANDS worker can help support a family who is dually

served by First Steps and HANDS. The session will demonstrate how HANDS workers can collaborate with First Steps Service coordinators to identify community resources that could benefit families served by these programs.

The HANDS Fall Retreat will be held on October 18th and 19th at the Holiday Inn North in Lexington, KY.

Ever Heard of Chicken Soup for the Soul?

Do you have a heartwarming, insightful, and powerfully moving story about what life has taught you and how to live life to its fullest? The authors of the New York Times Best-selling book series, *Chicken Soup for the Soul* are currently seeking stories to be included in a new book tentatively titled *Chicken Soup for the Special Needs Community: 101 heartwarming, helpful, healing stories that offer inspiration and promise surrounding the lives of special needs individuals. Through these stories, the readers learn how others facing similar*

challenges can learn to overcome the many obstacles they have.

They do this by connecting with emotions in the real life experience by learning they can choose peace and happiness in each situation regardless of how challenging it appears from the outside.

Now you have an opportunity to contribute to this new series by sharing your strengths, insights, knowledge, and wisdom.

What makes a good Chicken Soup story?

A Chicken Soup story is an inspirational, true story that opens the heart and re-kindles the spirit.

It is the personal account of an event, an obstacle overcome, a lesson learned or a dream fulfilled that helps the reader discover basic principles they can use in their own lives.

They are looking for "teaching tales" that inspire the reader to draw their own conclusions and insights from the story itself. If you have a story you would like to submit, please email your stories to:

stories@chickensoupforthesoul.com

Thanks to Robert Day for this information.

What is the Consultative Model of Service Delivery?

In response to requests from the field for additional information, the First Steps program is beginning a series of articles dedicated to the Consultative Model of service delivery. The purpose of this series of articles is to give First Steps service coordinators and providers a better overall understanding of the Consultative Model, to assist IFSP team members in developing service plans that reflect the Consultative Model of service delivery, and to enable First Steps providers to reflect on and adjust, when necessary, current practice in order to better support the Consultative Model of service delivery.

The First Steps program began to move toward a Consultative Model of service delivery almost two years ago. This move was supported by an increased knowledge base related to early childhood development and learning and a growing body of research supporting naturalistic, activity/routine-based intervention.

In the article *More is Better: Maximizing Natural Learning Opportunities (Young Exceptional Children, 6(3), 21-26)*, author Lee Ann Jung describes Consultative Service Delivery in the following way:

“File and Kontos (1992) provide a clearer picture of consultation in natural environments. They describe consultation as a triadic helping process in which the consultant (early interventionist) provides intervention to the child through the child’s family or caregiver. In other words, while it is important for early interventionists to collaborate and share what each is doing, the consultation should focus on sharing information and supporting the family and childcare providers.

By providing strategies to caregivers that allow them to maximize natural learning opportunities in their daily routines and activities, the child has multiple opportunities for intervention across the day, every day and in contexts that are immediately meaningful to the child and family.”

This model of service delivery directly supports the way in which young children learn. In the book *Teaching Infants and Preschoolers with Disabilities (3rd ed.)*, R.A. McWilliam describes how young children learn in the following way:

“Young children learn through repeated interactions with their environments, dispersed over time, not through trials massed into sessions or lessons. Each repeated practice that older children might receive in such situations adds to the child’s learning. In young children, practices need to (be) spaced apart enough for the child to process the information. Furthermore, when the child is taught in the context of naturally occurring stimuli, the child learns to use the behavior in the relevant context. The corollary is teaching language through flash cards versus conversation. The role of the home visitor (interventionist) needs to reflect the reality that children learn throughout the day, whether planned or otherwise. It will emphasize support to the family to be effective teachers, rather than direct intervention with the child.”

What is the Consultative Model of Service Delivery? (continued)

In contrast to a Direct Services Model, in which an interventionist works directly with a child while the caregiver passively observes or even leaves the room, a Consultative Model views the caregiver as the primary focus of the intervention. In a Consultative Model, the interventionist provides the caregiver with strategies to embed intervention into everyday routines and activities; whereby increasing the number of opportunities the child has during a given day to practice one or more new skills across a variety of activities and settings.

Consider and compare the following vignettes:

- 1) *Lindsay, a Physical Therapist (PT) with the Part C Early Intervention program, arrived at Mary Smith's home at 11:30 am for Mary's 18 month old daughter, Jaya's, PT session. Jaya was in the living room sitting awkwardly on the floor with her four year old brother, Mason, who was engineering a battle between a velociraptor and a T-Rex. Jaya was entranced. Mary rushed to clean up the children's toys, poured herself a cup of coffee and went with Mason to the bedroom. Jaya cried as Mary and Mason left the room.*

Lindsay smiled and spoke sweetly to Jaya to calm her down. She worked with Jaya for 30 minutes on appropriate sitting, balance and standing skills and then returned her to the floor. Lindsay prepared a note for Mary describing the day's activities and listing five strategies/activities to work on during the week. Lindsay retrieved Mary and Mason from the bedroom, discussed the note she had written, asked if Mary had any questions and left the home at 12:15 pm.

- 2) *Monique, a Physical Therapist (PT) with the Part C Early Intervention program, arrived at Karen Davidson's home at 11:30 am for Karen's 13 month old son, Peter's, PT session. Peter was sitting in a seat on the floor with his 3 year old brother, Dylan, who was racing and crashing two beat up toy cars. Peter was entranced.*

Monique and Karen sat on the floor near Peter. Karen shared with Monique the activities she and her husband had worked with Peter on during the previous week. As she talked, she lifted Peter out of his seat and sat him on the floor in front of her. Monique reviewed with Karen the positioning strategies that would best support Peter's sitting. As Peter fidgeted, Monique asked Dylan to "crash" his toy car into Peter's feet. Peter laughed as Dylan's car tickled his toes. As Dylan continues to tickle Peter's "pigs", Monique and Karen discuss ways to support Peter's sitting during meals, in the swing at the park, and in the bath.

Although both of these vignettes describe competent, concerned and compassionate therapists, Monique's consultative approach offers Karen the support and assistance she needs to meet the developmental needs of her son Peter. Karen has also been encouraged to include Peter's sibling in his "intervention", heightening Peter's interest and increasing his availability for learning. Following Monique's visit, Karen is equipped to incorporate strategies to support Peter's sitting into numerous daily routines and activities.

What is the Consultative Model of Service Delivery? (continued)

The purpose of this month's article has been to provide a brief overview of the Consultative Model of service delivery. In coming months we will address related issues, including identifying family routines, priorities and concerns and putting the Consultative Model into practice. If you would like more information about the Consultative Model of service delivery, please contact your local Technical Assistance Team Program Consultant.

Thanks to Kirsten Hammock for contributing this article.

OCTOBER 2006

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4 Provider Orientation-W. Liberty	5	6 Provider Orientation-North Key	7
8	9	10	11	12	13	14
15	16	17	18	19 ^{TAT} Monthly Meeting-Frankfort	20	21
22	23	24 SC Day 1 Training	25 SC Day 2 Training	26	27	28
29	30	31				

Accomplishments Since Provider Forums

- Improvements to First Steps website
- Providers now receive checks directly from the Kentucky Department of Treasury
- Investigating ways to provide direct deposit for providers
- Considering a monthly billing cycle
- Completed a survey on the use of the DOCS screening tool
- Record review process is being reviewed
- Working with organizers of the Infant Toddler Conference to establish a First Steps track
- Stakeholder meeting May 2-3, 2006 with Federal Technical Assistance partners and Point of Entry staff in order to improve the 45-day timeline

