



INDIVIDUALIZED TRAINING PROGRAM DEVELOPMENT Technical Assistance Paper



Known Validated Assessment Tools:

The Assessment of Practices in Early Elementary Classrooms (APEEC), (K-3); Hemmeter, Maxwell, Ault and Schuster, Teachers College Press, 2001.

The Assessment Profile for Early Childhood Programs – Research Version; Abbott-Shim & Sibley, 1998. (Preschool and K)

The Caregiver Interaction Scale; Arnett, 1989.

The Classroom Practices Inventory; Hyson, Hirsh-Pasek & Rescorla, 1990. (Preschool)

Early Childhood Environmental Rating Scale-Revised (ECERS-R); Harms, Clifford and Cryer, Teachers College Press, 1998.

Family Day Care Rating Scale (FDCRS); Harms and Clifford, Teachers College Press, 1989.

Infant/Toddler Environmental Rating Scale-Revised (ITERS-R); Harms, Cryer and Clifford, Teachers College Press, 1990.

School-Age Care Environmental Rating Scale (SACERS); Harms, Jacobs and White, Teachers College Press, 1995.

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An Individualized Training Program (ITP) can provide an extremely high level of comprehension and practical application of high quality care if developed appropriately. One study (Kontos, Howes, Galinsky, 1996) determined that individualized, site-based coaching experiences are more effective than workshops and classroom sessions for creating the type of change that significantly impacts quality in family child care homes.

This Technical Assistance Paper is produced to provide training organizations with a template that offers a quality ITP. All of the information in this paper has been field tested by the first year participants in the Educational Incentive Program (EIP) Pre-approved ITP. A training organization may modify what is in this technical assistance paper, but there may be a difference in the final outcomes if changes are made. The final evaluation results of this ITP framework are available by contacting the EIP office.

This packet of information contains all the steps, documentation and resources needed to develop a quality Individualized Training Program. Please read the information carefully.

Questions regarding any of this information may be directed to Colleen O'Grady at cogrady@tsg.suny.edu or (518) 443-5940.

Definition

An Individualized Training Program is a type of training that contains the following components:

- Pre assessment by provider and pre and post assessment by trainer and
- One-on-one training of provider at the provider's work site during child care operating hours and
- Program evaluation



Use a validated assessment tool

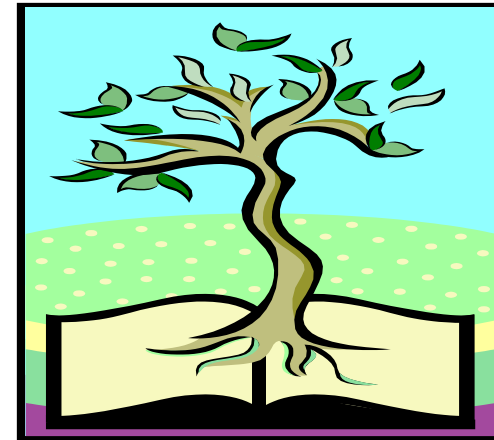
The assessment tool that is selected can make all the difference in the focus of the learning as well as in the ability of all parties to determine the success of the program. Using a validated tool (one that has been tested in the professional field) significantly increases the users ability to accurately draw conclusions and evaluate improvement. The recommended tool is any of the Environmental Rating Scales developed by Harms and Clifford, et al. They are all listed on the last page of this paper.

The provider and trainer should use the same, appropriate rating scale as a pre assessment tool before individualized training begins. The two pre assessments become the basis of discussion

Scholarships for Individualized Training Programs

The Educational Incentive Program (EIP) provides scholarships to eligible individuals choosing to take ITPs.

Contact EIP at 800-295-9616 for more information on scholarships.



Notice to Training Organizations

This particular type of training is more costly than classroom training. Not every organization will be able to afford to offer this training in their community.

While the decision to offer this training may seem simple because it has high impact results, it needs to be thought through carefully before it is initiated. Organizations who have offered this successfully have started out small; offering this type of training to a small number of providers as a "pilot." After a thorough evaluation, adjustments to the program can be made without over-burdening the organization's budget or professional staff.

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Applying for Pre-Approval

Organizations wishing to apply for pre-approval must submit the following documentation:

Identification of self-assessment/observation tool

These tools should be validated. No tool developed by an agency should be used, unless validation testing has been established.

Credentials of Trainer/Organization

Pre-Approval applications must include evidence that the ITP trainer has received instruction in at least one of the rating scales.

Statement of goals and objectives

Goals reflect what you wish to accomplish through the ITP (e.g. improve the quality of child care in the community). Objectives describe how you will measure the impact of the ITP (e.g. % increase in score from rating scale).

Training schedule for each provider

- How and when the assessment tool is distributed to providers prior to training. Whether or not there was training for the provider on how to use the tool.
- Anticipated training schedule hours and actual training schedule hours.
- Number of hours the trainer used for pre and post training evaluation tool use (must not exceed 2 hours each for pre- and post-training).

Full description of program evaluation

The training organization should collate the pre and post assessment tool rating scales to see the overall improvement. Other helpful information might include:

- modality of care
- hours of actual training
- topic area or section of rating scale
- length of child care experience of providers

and determine of training content to improve competence by the end of the Individualized Training Program. The trainer will do a post assessment at the end of the training using the same tool to determine relative improvement.

For providers who do not read or write English, the bi-lingual field trainer may need to be the only participant in the pre and post assessment process. Please note: Early Childhood Environmental Rating Scale and the Infant/Toddler Environmental Rating Scale-Revised are available in Spanish.

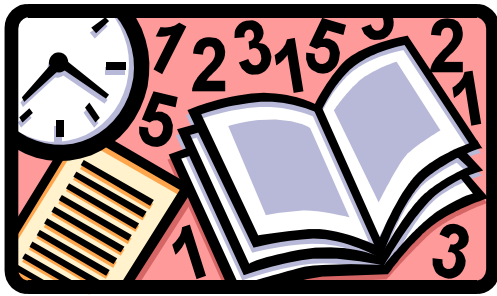


Selecting a trainer

The trainer is a very important component in this particular type of training. The individual needs to be knowledgeable in child development, health, safety and nutrition issues, developmentally appropriate practice, early learning environments, communication skill development and professionalism. This person needs to be sensitive to the individual provider in terms of experience and level of education, and adjust the training accordingly. To be a guest in someone's home takes a degree of respect and diplomacy.

It is also helpful for the trainer to have mentoring skills as well as quality child care experience to share with providers. Most providers who improved dramatically gave credit for their improvement to their trainer. An established relationship of trust, nurturing and respect encourages learning to take place.

All ITP trainer must complete a four hour training in at least one of the rating scales. They may then conduct ITPs in any of the other rating scales. In addition, they may instruct other trainers on the use of the rating scale.



Number of training hours

The total number of training hours a provider will need is directly correlated to the outcome of the initial rating scale results. The ITP must contain between 10 and 30 hours.

Based on initial results of the first year participants, unless a provider scores very high in each category it is strongly suggested that a minimum of 25-30 hours be encouraged. These hours appear to work best when scheduled over a number of weeks (6) or months (2-3). Please note: the purpose of the ITP is not to satisfy the 30 hour training requirement.

Co-workers taking ITP simultaneously

When 2 or more co-workers in the same class setting are going through ITP at the same time, it may be helpful to meet as a team. This would be done to train on such topics as communication and/or individual children's developmental needs. Due to the confidential nature of these discussions, team training must not exceed 20% of the total training hours. This training will need to take place during non-child care hours. A maximum of three ITP providers from the same room/group can be adequately trained simultaneously.

An individual provider may also need up to 20% of his/her time to obtain training in non-child care hours for confidential reasons.

