

SPA 862A: Birth to Three: Communication Assessment and Intervention

Spring 2004

Th: 4:00-5:50 p.m.

Location: Barkley Center, #302

Graduate Assistant: Michele Schmerbauch, mschmerbauch@hotmail.com, Room #310

Instructor: Dr. Cynthia Cress

Office: 202G Barkley, ccress1@unl.edu

Telephone: 472-4431, office hrs MW 11-1

- 1. Course Prerequisites:** Graduate, at least one language development & one language disorders course. Students should understand basic sequences of prelinguistic and symbolic communication development, as well as characteristics of common language disorders and basic principles of preschool assessment and intervention (children ages 3 and up). Experience in direct clinical service is helpful but not required.
- 2. Course Description:** This is a practical clinical course on the subject of early communication intervention for children, ages birth-to-three years. Students will share in problem solving about daily topics for one child in class, and apply information derived from readings and class experiences to children assigned individually. The class will cover approximately 13 different topics (see schedule). Students will be expected to: read the assigned texts and readings **before** class, report on what they have learned from texts and other homework activities, attend and participate in all classes, complete the weekly activities, comment or suggest activities for other classmates, and present a case summary of the child you have addressed during the semester. The instructor's lectures will supplement the assigned readings, and students will be expected to discuss information presented in the text and classroom activities. Students should recognize that not all information from the texts will be covered during class and should be responsible for becoming familiar with the material independently.
- 3. Course Objectives:** The focus in this course will be on infant and toddler communication assessment, and intervention (birth-three years), with particular emphasis on family-centered services, teamwork, and multiple disabilities. The goals are to provide practical strategies for implementing communication intervention for very young children, and focused practice at applying those strategies to class and homework examples of children with various disabilities. Long-term goal of the course is to promote critical thinking and "Key qualities of EI Professionals" in students. Specific topics addressed include: low-incidence disabilities and syndromes, communication signal development and inventories, home-based interview and observations, formal and informal assessment strategies (0-3 years), family-centered interview and intervention, enhancing parent responsivity, modifying communicative environments and routines, supporting selective play, communication, and cognitive skills that facilitate language, home-based service delivery, IFSPs, feeding and speech interventions for prelinguistic children, and SLP roles in the NICU. Specific objectives are listed below:

Prevention of communication disorders:

- Understands characteristics of communication disorders in children aged 0-3 and how these characteristics relate to learning
- Understands risk factors that contribute to communication impairments in young children ages 0-3
- Demonstrates skills at interpreting potential communication risks from chart review and videotape information
- Understands the role of family and integrated service delivery team in family-centered service delivery
- Understands how to implement early screening and identification measures with young children and families
- Demonstrates skill at interpreting communication screening measures for young children
- Demonstrates skill at conducting pre-assessment calls with family members of young child
- Understands rationale and practices in family centered communication intervention
- Demonstrates skill at planning and coaching families in interactions that facilitate healthy communication development

Assessment of Communication Disorders:

- Understands and describes formal and informal communication assessment measures.
- Compares and contrasts assessment measures used for different diagnoses and communicative purposes with young children
- Understands basic principles of assessment strategies from related early intervention disciplines (OT, PT, ECSE, Education).
- Plans specific assessments and probes for young children. Interprets formal and informal assessment information gathered from children aged 0-3.
- Writes simple assessment report indicating client communication and signaling strategies and recommended responses to behaviors (Communication Signal Inventory).

Intervention for Communication Disorders:

- Understands early communication development and can tailor intervention plans to each of major stages (e.g. intentional communication). Compares and contrasts intervention approaches at each of the early communication stages.
- Understands communication tools model and demonstrates application for young child
- Demonstrates family-centered services in intervention plans and progress notes for young child
- Demonstrates team service delivery skills in developing and implementing IFSP plans with young children and families
- Adapts to feedback and progress of young child in revising intervention plans, and reflects on changes and rationale.
- Customizes intervention plans for particular disabilities and circumstances of “virtual” client for final presentation, including specific physical, sensory, social, technological, or educational needs.

- 4. Required Texts:** Rossetti, L.M. (2001). Communication Intervention: Birth to Three (second edition). San Diego: Singular Publishing Group, Inc. (R Chapters)
McWilliam, P.J., Winton, P.J., & Crais, E.R. (1996). Practical Strategies for Family-Centered Intervention. San Diego: Singular Publishing Group, Inc. (MWC Chapters) – out of print, binder copy

Recommended Texts:

- Laikko, P. & Flegal, J. (1995). Feeding Intervention Manual. Omaha, NE: Monroe-Meyer Institute, UNMC.
McLean, J. & Snyder-McLean, L. (1999). How Children Learn Language. San Diego: Singular Publishing.
Hodgdon, L.A. (1999). Visual Strategies for Improving Communication. Solana Beach, CA: Mayer-Johnson.

5. Class Expectations

- a. Students are expected to attend all classes. Attendance will be taken each week, and attendance records will be considered when assigning a final course grade.
- b. Daily participation in class discussions is expected. Students will contribute to each class discussion with relevant comments, questions, suggestions, or examples, related to the topic assigned.
- c. Students are responsible for all information presented in class lectures including guest lectures, the assigned readings, handouts, and other assigned information or videotapes. This information will be reflected in the classroom assignments and homework/journal activities. Students should recognize that not all information from the readings will be covered during class and should be responsible for being familiar with the material.
- d. Students with disabilities are encouraged to contact the professor for a confidential discussion of their individual needs for academic accommodation. It is the policy of the University of Nebraska-Lincoln to provide flexible and individualized accommodation to students with documented disabilities that may affect their ability to fully participate in course activities or to meet course requirements. To receive accommodation services, students must be registered with the Services for Students with Disabilities (SSD) office, 132 Canfield Administration, 472-3787 voice or TTY.

6. Course Grading:

The grade for the course will be based on class participation, completion of assigned projects and readings prior to and during class, application of course content as demonstrated in graded projects and final exam activities. The final exam will include a written and oral presentation on a “virtual client” project. Final exams will each be worth 100 points, and will count for 40% of the final grade. There will be five graded weekly assignments for a maximum of 10 points each, collectively worth 50% of the final grade. The remaining 10% of the final grade will be based on credit/no credit in-class or homework assignments, each worth 1 point for credit.

Up to 5 percentage points may be deducted from the final grade each for consistent problems with participation or attendance not resolved within the semester. You will receive two “Get out of jail free” cards that allow you to turn in any of the graded assignments a week late (not valid for the final); any assignments more than a week late will receive no credit. No additional GOJF cards will be issued, so use them wisely early in the semester.

Each graded assignment will receive a score of up to 10 points, based on the following criteria. Half-completed or minimal effort responses will receive 5 points, and assignments that are not completed in the designated week will receive a zero. Students will be expected to complete all assignments unless extenuating emergencies are clearly discussed with the instructor. Assignments will be scored 10 points if they demonstrate sufficient accuracy, insights, relevance to topic, and breadth (see attached “5 ways of thinking”). Significant gaps in any of these qualities is 1 point each off the assignment with errors such as:

- Accuracy error: Clear inaccuracies in reported facts from readings or clinical materials (e.g. “All Cerebral Palsy results from traumatic brain injuries prenatally”). Be careful not to overstate information you find.
- Insight error: Simply reporting information from resources without comparing, applying, adapting, or otherwise responding to this information with particular relevance to your assigned child. Think “why...”
- Relevance error: Providing useful information that doesn’t directly relate to the topic or task assigned.
- Breadth error: Missing a major portion of a subtask involved in the assignment, or providing only a few pieces of information or insights that don’t reflect the complexity of the situation.

In order to earn an acceptable participation rating, students will attend classes and demonstrate that they have put a good faith effort in completing the basic requirements:

1. Made an effort to review materials sufficient to address the topic or question.
2. Consistently contributed something relevant to discussion during class sessions on this topic.
3. Responded appropriately to the purposes specified in weekly assignments.

To earn an “A” students must demonstrate completion of these 3 tasks with accuracy, insights, relevance to course, and breadth, in addition to final course grades in the “A” range as listed below:

<u>Letter Grade</u>	<u>Final Course Average</u>
A+	97-100
A	93-96
A-	90-92
B+	87-89
B	83-86
B-	80-82
C+	77-79
C	73-76
C-	70-72
D+	67-69
D	63-66
D-	60-62
F	0-59

General guidelines for assignments

1. Written work may be handwritten legibly, unless particular projects are requested in typewritten form.
2. Written work should include both original thought and the application of information from the assigned readings. When referring to information from the readings, make a brief note which resource you used to find this information, both to assist with accuracy checks and for your own reference later.
3. All referral to children and youth with disabilities must avoid stigmatizing language and emphasize “person first” language. For example, "student with severe disability", "young child who relies on AAC", "learner with multiple handicaps" should be used rather than "severely disabled student" or "multiply handicapped child". Terms such as “crippled, deformed, suffers from, the retarded” are never acceptable. Accuracy points can be deducted for failure to use person-first language.
4. All written work and other weekly assignments must represent student's independent work, although students are encouraged to brainstorm or collaborate with other students during your decision process for an assignment. Even if you are sharing videotapes or other information on the children for your class projects, your assignments should reflect your own work. Any portion of an assignment that is apparently copied/modified from another student (from current or past courses) will result in an automatic grade of "0" for the assignment.
5. Additional resources and references not assigned in the readings may be used (and this is encouraged). These should also be cited in your assignments, with a more detailed reference to identify the resource.
6. Reference to actual persons with disabilities must maintain confidentiality and consequently the last names should not be used. Under no circumstances should you copy the tapes showing your assigned child.
7. **IMPORTANT:** The videotapes and clinical materials that present the children for your final projects are provided at the courtesy of families and must be treated with extreme care and confidentiality. All of the ethical restrictions for clinic materials also apply directly to these materials, and you may not show or discuss these materials with outside persons in any ways that convey confidential information. **You must return all videotapes and client materials at the end of the semester or you will not receive a grade.**

Guidelines for working directly with families

1. Remember that it is your responsibility to work around the schedules of the families with which you work, and not their responsibility to adapt to your schedule. If families are ill or activities changed, you need to be adaptable to the variability inherent in “real-life” interactions.
2. You should conduct your interactions with your child in their natural contexts, instead of planning pull-out activities. This will involve balancing your goals with the situational variables, and may include adapting your activities or helping with ongoing tasks (e.g. positioning, lunch).
3. Your family will complete a brief feedback sheet at the end of the semester to verify that you were: a) respectful in interactions with family, b) appropriate in interactions with families, c) responsible in schedules and arrangements, and d) generally professional and courteous to everyone involved.
4. You should observe HIPAA guidelines when referring to both face-to-face and virtual clients. Your class assignments that refer to clients should be completed in the HIPAA secure area.

Tentative 862A Class Schedule: Spring 2004

Jan. 15: Class Syllabus & Policies, Administration, EI Philosophy, Selecting families, Pre-Assessment Call
Homework: Read MWC 2-3, start C/NC #1: Preassessment Call & Interpretation [DUE: Jan. 29]

Jan 22: Family-Centered Overview, Communication Stages, and Informal Assessments (CSI)
Homework: Read MWC Ch. 1, and R Ch. 1, **Graded #1:** CSI and Family Questionnaires [DUE: Feb. 12]

Jan. 29: Disability Characteristics & Screening, Sensory Issues, C/NC #1: Family Call interpretation Due
Homework: Read R Ch. 3,

Feb 5: Formal Assessment Strategies,
Homework: Read MWC Ch. 4-5, **Graded #2:** Formal/Informal Probes (family, Checklist) [Due Feb 26]

Feb. 12: In-Class Family Visit (Guest lecturers: Lissa & Mitch Hegg) **Graded #1 Due**
Homework: Read MWC Ch. 6, C/NCs: IFSP website, Contribute in-class parent questions,

Feb. 19: Service Coordination, IFSP (Guest: Charlie Lewis, Service Coordinator)
Homework: Read Crais, MWC 8, Hanen materials, C/NC in class: Evaluate missing elements of IFSP goals

Feb. 26: Family Centered and Responsivity intervention strategies (Brass Tacks, Hanen) **Graded #2 Due**
Homework: Read R. Ch. 5, 242-262, **Graded #3:** Incorporating parent and responsivity Tx (Due March 25)

March 4: Incidental Teaching and Trigger/Tempt strategies
Homework: Read R Ch. 5, 211-242, **Graded #4:** Trigger/Tempt intervention (Due April 8)

March 11: Modeling Speech, Emergent Literacy, Cognition, Language & Social Goals (Milieu strategies)
Homework: Read Autism article, **Graded #5** Modeling Strategies of Intervention (Due April 22),

March 18: Spring Break

March 25: Autism Assessment and Intervention **Graded #3 Due**
Homework: Read MWC Ch. 7, C/NC: Adapting own intervention goals for child with autism

April 1: Home-Based Service Delivery (Guests: Carol Bowen, Carole Curry, SLPs)
Homework: Read R Ch. 2, 4,

April 8: Communication and environmental interventions in the NICU **Graded #4 Due**
Homework: Read PT Handouts, C/NC: In-Class SLP questions **Receive Final Project Instructions**

April 15: Positioning and Physical Issues (Guest Lecture: TBA: PT)
Homework: Read OT Handouts, C/NC: integrate IFSP Activities w/team & OT goals

April 22: Sensory Integration and NDT Interventions (Guest Lecture: Diane Boney, OT) **Graded #5 Due**
Homework: Read R. Ch. 6, C/NC: integrate IFSP Activities w/team & PT goals,

April 29: Special Cases of Intervention: Wrap-up and Preparation for Finals

May 5 (Finals): Wednesday 3:30-5:30 pm.
In-Class Presentation – Presenting your child/family to the transition team, C/NC: Respond to presentations

Key Qualities for an Early Intervention Professional
SPA 862A: Cress

- Flexible thinker, able to try new ideas
- Low need for structure and rigid plans
- Able to adapt to circumstances
- Caring and active listener
- Able to work as a team, in both planning and intervention
- Able to see things from other's perspective
- Comfort with ambiguity and the unknown
- Good at trial and error learning
- Able to observe fine distinctions in skills
- Able to interpret subtle or inconsistent behaviors
- Comfort with medical technologies
- Independence in finding resources and strategies
- Appreciation of simplicity
- Able to communicate clearly in real-life practical terms
- Well-grounded in the purposes and context of young children's communication
- Able to value small steps in improvement in skills or situations
- Willing to look "stupid" if needed
- Curiosity, ability to learn from even non-optimal situations
- Patience, patience, patience, (and persistence)