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# Instructional Practices: Role of Assessment

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Secretary's Advisory Committee on Head Start Research and Evaluation (April, 2011)

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# Promoting Child Developmental Progress in Head Start

- Federal Mandate for HS to Assess and Track Child Development to:
  - Enhance child developmental outcomes
  - Individualize instructional practices
  - Address staff training needs
  - Improve overall program performance

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# Assessment: Implications for Instructional Practice

- To promote developmental progress and school success
- To identify challenges in order to interrupt a series of cascading events associated with maladaptive behavior and/or poor developmental outcomes in high risk preschoolers
- To engage families to be active and informed advocates for their child's developmental wellness
- For accountability

# Developmental Perspective-Nature of Assessment

(Meisels, 2001; Brassard & Boehm, 2007)

- Assessment is an on-going and dynamic process (not an outcome in and of itself)...
- Capitalizes on teachers' interpretations of child behavior based on **multiple experiences** with the child and **varied sources** of information;
- Akin to hypothesis-testing, requiring teachers to behave as —scientists of the classroom”
  - Collect assessment data in a systematic manner
  - Use standardized tools and multiple informants
  - Make interpretations about the child's strengths/needs as they relate to instructional practice
- Assessment is the foundation of instructional practice -- it only becomes meaningful when it is **linked with action**

# Developmental Principles

- ❑ **Development is Complex**
  - Development is episodic—needs to be tracked and monitored over time
  - Domains of development can be assessed independently, yet are linked
  - Normative developmental variation and maladaptive processes — where's the boundary?
- ❑ **Development Unfolds in Context of Relationships**
  - Classrooms (Teacher-child; Teacher-parent; Peer)
  - Families (Parent-child; Parent-parent; Parent-community)
- ❑ **Development and Contextual Risks**
  - Toxic Stress and Brain Development
  - Parental Depression and Stress
  - Parental Substance Use
  - Poverty

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# Assessment Strategies

- Levels of Assessment need to be Linked:
  - Child
  - Family
  - Classroom
  - Program
  
- Taken together, assessment of the whole child is bigger than the sum of his/her parts

# What do Teachers Need for Assessment?

- ❑ Knowledge about:
  - Early development and developmental psychopathology
  - Importance of forming and maintaining positive relationships with children
  - ...and their families, as the foundation of learning
- ❑ Strategies for:
  - Observing and hypothesis testing
  - Organizing assessment information for meaningful use
- ❑ Support and coaching
  - Consultation to manage questions and challenges that arise
  - Ongoing professional development

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# Head Start MAP:0-5: Illustration

- Provides Structure to Record and Organize information embedded within Ongoing HS Program Activities
- Assessment of Child and Family Progress
  - Conducted by HS Staff
  - Integrated into Program Evaluation
- Feedback to HS Staff to:
  - Individualize/Coordinate Practices Plans (Child/Family Level)
  - Inform Classroom and Curriculum Planning (CR Level)
  - Guide Program Improvement Plans and Facilitate Community Collaboration (Program Level)

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# HS MAP: 0-5

## Monitoring Child Progress

- **Developmental Lesson Plan Tracking Forms**
    - Monthly Teacher Ratings in 8 Domains
    - Each Domain Rated on 5-point scale  
(1=Significant Difficulty; 3=Inconsistent/Emerging; 5=Strength)
    - Track Specific Indicators
  - **Developmental Lesson Plan Progress Notes**
    - Incorporates portfolio data
    - Organizes ongoing observations of progress
    - Used for Individualization of Curriculum
  - **Developmental Readiness Reviews**
    - Summary of individual child progress 3x/yr
    - Regular Feedback to Family
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**HEAD START- DEVELOPMENTAL LESSON PLAN TRACKING FORM**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Class: \_\_\_\_\_  HB or  CB

<b>01. Language Development</b>			
0. On Hold			
1. Significant Difficulty/Delay			
2. Moderate Difficulty/Delay			
3. Inconsistent/Emerging			
4. Adequate/Consistent			
5. Strength			
September _____	October _____	November _____	December _____
January _____	February _____	March _____	April _____
May _____	June _____	July _____	August _____

Accomplishments (recorded and reviewed according to progress)	IEP Objective?	Mo/Yr Completed
<b>Listening and Understanding</b>		
1. Attends to and understands conversations, stories, songs, and poems		
2. Understands and follows simple directions		
3. Understands and follows multiple-step directions		
4. Understands complex and varied vocabulary		
5. For non-native-English-speaking children, can understand and follow directions in English		
6. Asks definitions of words		
7. Understands and answers complex questions		
8. Understands prepositions (e.g., on, under, beside, in front of)		
9. Defines words by telling how they are used (e.g., an apple is to eat, a coat is to wear)		
<b>Speaking and Communicating</b>		
10. Understands and uses language to communicate information, experiences, ideas, feelings, opinions, needs, questions, and for other varied purposes		
11. Initiates and responds appropriately in conversations with adults		
12. Initiates and responds appropriately in conversations with peers		
13. Consistently uses a complex and varied vocabulary		
14. Pronounces words clearly		

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# HS MAP:0-5 DRR Assessment Data

## Individual Child Level

- Teachers Use DRR's to Summarize Progress at Individual Child Level
- Regular Involvement with Family (3x/year)

## Classroom Level

- Feedback Provided to Teachers about their classrooms as a whole 3x/yr

## Program Level

- Feedback Provided to Administrators at Program – Level (classrooms averaged together)
  - Links to Instructional Practice Needs, Professional Development, etc
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**Developmental Readiness Review**  1  2  3 (Review Date: 4/21/07)

**Head Start-PreK**

Name: Taylor A. DOB: 11/02/02 Date of Enrollment: 9/1/06

Class: Classroom A  HB or  CB Review Location:  Home or  EHS/HS

Missed Contact Reason: n/a

Total Days In Attendance this Review Period: 54/60 IEP?  Yes (Include Details Below) or  No

Is Child's Primary Language English?  Yes or  No Does Child Receive ESL?  Yes (Details Below) or  No

	Goal Level	REFLECTIONS
<b>01. Language</b> Listening and Understanding Speaking and Communicating	3	Generally demonstrates good understanding of language in the classroom but still has trouble using words to express her needs.
<b>02. Literacy</b> Phonological Awareness Book Knowledge/Appreciation Print Awareness and Concepts Early Writing/Alphabet Knowledge	4	Taylor enjoys being read to and is gaining confidence with writing her name. Enjoys alphabet activities and games.
<b>03. Mathematics</b> Number and Operations Geometry and Spatial Sense Patterns and Measurement	4	Enjoys counting, putting puzzles together, and measuring.
<b>04. Science</b> Scientific Skills and Methods Scientific Knowledge	4	Very interested in sand/water table, likes to pour and play with water wheel. Enjoying our unit on Spring, plants, and growth.
<b>05. Creative Arts</b> Music, Art, Movement Dramatic Play	5	Taylor loves to dance, sing, and listen to music. She also loves to play in the house corner, and do dress up activities.
<b>06. Social and Emotional</b> Self-Concept/Self-Control Cooperation/Social Relationships Knowledge of Family	2	Taylor seeks out social interaction, and plays with a variety of peers in the classroom, but she continues to have trouble sharing and resolving conflicts, and can get frustrated easily. Her outbursts take quite a while to resolve.
<b>07. Approaches to Learning</b> Initiative and Curiosity Engagement and Persistence Reasoning and Problem Solving	5	Taylor persists at tasks she enjoys (for example, puzzles), and seems interested to have new experiences.
<b>08. Physical Development</b> Fine Motor/Gross Motor Skills Adaptive Status and Practices	5	Taylor is very active and loves to run and climb. Her fine motor skills are quite good; she uses utensils and pours from a pitcher with ease; enjoys cutting and pasting and playing with lacing toys.
<b>09. Classroom Adjustment</b>	4	Taylor is doing well, she knows and follows all of the classroom routines well.
<b>10. Other Readiness</b>	3	Still has occasional toileting accidents (mostly on the playground when absorbed in activity and forgets to alert teacher)

**Developmental Readiness Review Summary**

Taylor continues to be a charming little girl who actively engages in classroom experiences. She particularly enjoys science, reading, and music activities, and likes to take the lead in organizing social games (for example, "being the mommy" when playing house).

Although Taylor plays with many friends in the classroom, she continues to have difficulty controlling her emotions and behaviors when she comes in conflict with peers. She feels things intensely and we are working on ways for her to use words instead of actions to express these feelings so that her play with peers goes more smoothly. However, when she becomes upset, she seems to "lose her words" and her tantrums can last up to 15 minutes at a time. Taylor has a caring personality and shows concern when others become upset.

Taylor greatly enjoys outdoor activities, and is a leader in climbing on the play structure. She often gets absorbed in her play to the point that she has had a few toileting accidents recently; we are working on having her remember to "go" even if she doesn't feel the need, and prompting her when other children go.

**Developmental Action Plan**

<p><b>Classroom Activities (Parent and Teacher Input):</b> Encourage Taylor to use her words in the classroom; monitor for other areas of language difficulty</p> <p>Model peer conflict-resolution skills and ask Taylor to generate solutions to a problem</p> <p>Build empathy by encouraging her to think about how her actions make her friends feel</p> <p>Continue to prompt to use bathroom</p>	<p><b>Home Activities (Parent and Teacher Input):</b> Talk with maternal grandmother about Taylor's need for a consistent (early!) bedtime.</p> <p>Encourage Taylor to verbalize when indicating that she wants something at home; make sure to repeat the correct word for her</p> <p>Encourage Taylor to use "emotion words" to state how she is feeling; prompt her to say whether she is sad or angry, for example</p> <p>Provide opportunities for Taylor to practice her fine motor and measuring skills (have her help with cooking or baking)</p>
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Signature: Ms. A Relation to Child mother

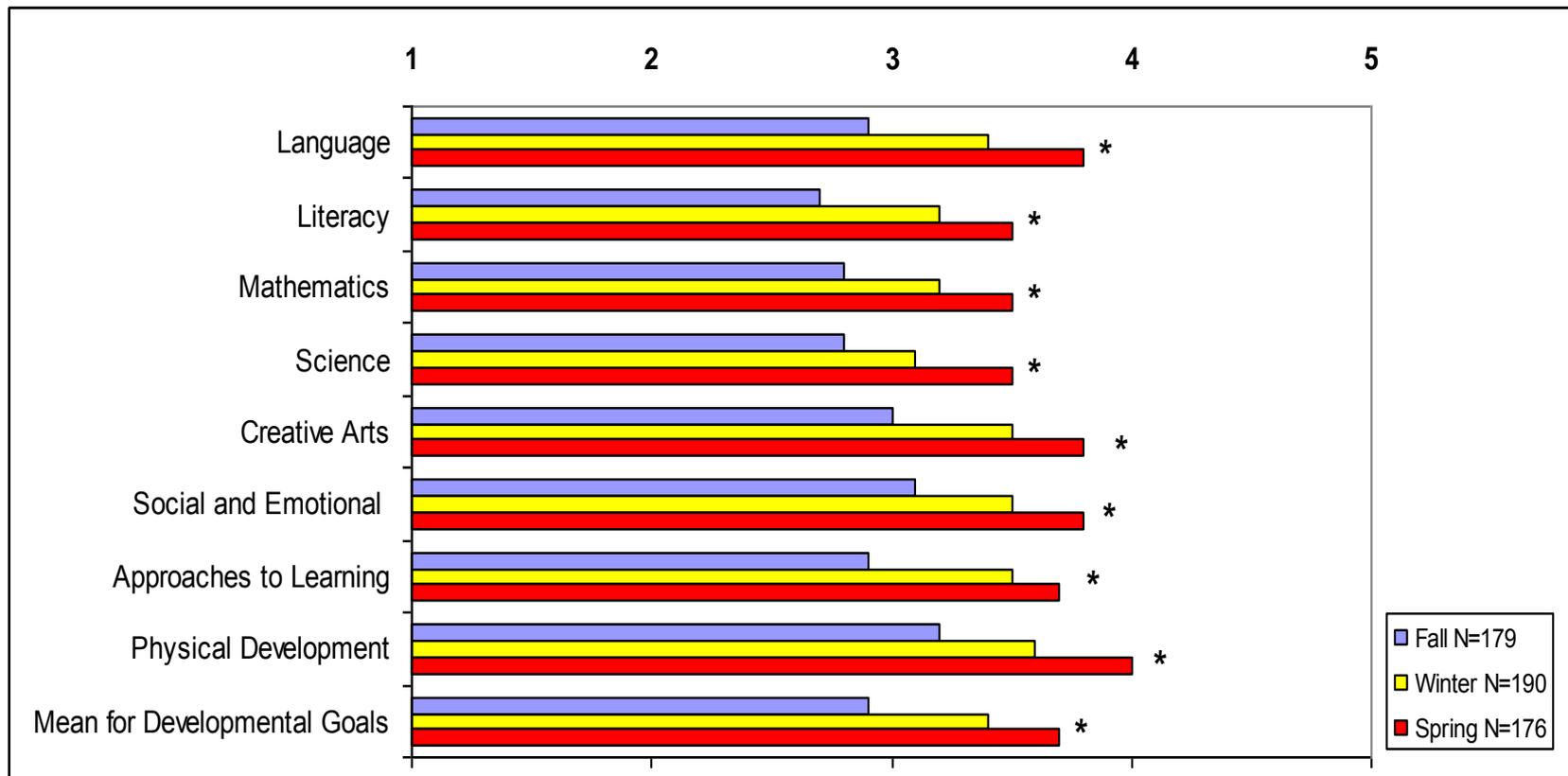
Signature: \_\_\_\_\_ Relation to Child \_\_\_\_\_

Staff Signature: Teacher A Position Lead Teacher

# Do Children Make Progress Over Time?

Susan Dickstein, Ronald Seifer, Christine Low, & Alison Miller.

ACF/ACYF Child Outcomes Research Support Grant #90YD0127



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# What more can we know?

- How are children doing? Despite group trends toward progress:
  - Are there some children being —left behind”?
  - Are there some children who need advanced/enhanced learning opportunities?
- How is the program doing in helping children to succeed in each of the developmental areas?

# Do Children Reach Adequate Developmental Levels by the End of the School Year?

Domain	Level 1-3 % Delay/Inconsistent	Level 4 % Adequate	Level 5 % Strength
Language	34	50	16
Literacy	<b>45</b>	48	7
Mathematics	<b>45</b>	49	6
Science	<b>47</b>	45	8
Creative Arts	31	54	15
Social-Emotional	37	49	14
Approaches Learning	38	47	15
Physical Health	21	60	<b>19</b>
Overall	37	50	13

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# What Did We Learn?

- Even though children as a group made significant progress in all developmental areas:
  - About 1/3 are still showing inconsistent or delayed developmental functioning at the end of the year
  - Main 3 areas of developmental lag at the end of the year are: Science, Math, and Literacy
  - About 10% are showing real strengths at the end of the year

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# Validation of HS MAP Ratings: Are Teachers Good at Assessing Child Development?

## ■ HS MAP:0-5

- ❑ 8 domains rated by teachers
- ❑ obtained during on-going observations (and integration of relevant material) of child functioning within the classroom

## ■ Standardized Ratings (DIAL, Bracken)

- ❑ rated by interviewers
- ❑ scores based on age-related developmental norms
- ❑ obtained during 1:1 child testing sessions
- ❑ Composites representing 8 domains

# Do HS MAP Ratings Relate to Standardized Child Assessments?

<u>Domain</u>	<u>r</u>
1. Language	.67*
2. Literacy	.50*
3. Math	.60*
4. Science	.35*
5. Social-Emotional	.29*
6. Approaches Learning	.49*
7. Physical Health	.30*
8. Overall (with Bracken)	.65*
9. Overall (with DIAL 3)	.65*

**Yes, teacher ratings on HS MAP: 0-5 are significantly associated with standardized (objective) measures**

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# Assessment of Family Development

- Family is important developmental context
- Interactions with families as part of dynamic (ongoing) relationship-building process
- Discussions about family strengths and needs
- Reflections about goals
- Regular meetings with families (reviews) to individualize and coordinate service delivery and monitor progress

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# HS MAP: 0-5 Monitoring Family Progress

- **Family Development Plan**
  - Individualization of Family Service Plan
  - Selection of Goals from 3 Domains
    - Parent Self-Reliance; Parent Promotion of Child Development; Health, Nutrition, Mental Health
  - Each Goal Rated on 5-point scale
- **Family Development Progress Notes**
  - Track and Summarize Progress
- **Family Development Reviews**
  - Regular Feedback to Family in all Domains

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# 3 Family Development Domains

## ■ Parent Self Reliance

Income, Employment, Food, Housing, Clothing, Utilities, Health Insurance, Transportation, Credit, Child Care, Registration, Education

## ■ Parent Promotion of Child Development

Parenting Skill, Family Violence Prevention, Adult Relationships, Parent-Child Relationships, Neighborhood Safety, Home Safety, Parent Involvement in Program, Community Involvement

## ■ Health, Nutrition, Mental Health

Nutrition, Prenatal Health, Family Planning, Well Child Checks, Health Screens, Immunizations, Chronic/Acute Illness, Mental Health Wellness, Behavioral Health Care, Social Support, Special Services

**CF&S HEAD START FAMILY DEVELOPMENT REVIEW**  1  2  3

Name of Child: \_\_\_\_\_ DOB: \_\_\_\_\_ Date of Review: \_\_\_\_\_

Class Name: \_\_\_\_\_ OR  HB Review Location:  Home or  On-site

Missed Contact Reason/Plan: \_\_\_\_\_

**For all areas listed below, please RATE current level and CHECK each active area.**

Rating/Active?		1. Parent Self-Reliance
1. Income/Finances	<input type="checkbox"/>	
2. Employment	<input type="checkbox"/>	
3. Food	<input type="checkbox"/>	
4. Housing	<input type="checkbox"/>	
5. Clothing	<input type="checkbox"/>	
6. Utilities	<input type="checkbox"/>	
7. Health Insurance	<input type="checkbox"/>	
8. Transportation	<input type="checkbox"/>	
9. Credit	<input type="checkbox"/>	
10. Child Care	<input type="checkbox"/>	
11. Registration	<input type="checkbox"/>	
12. Education	<input type="checkbox"/>	
13. Other Self-Reliance	<input type="checkbox"/>	

Rating/Active?		2. Parent Promotion of Child Development
1. Parenting Skill	<input type="checkbox"/>	
2. Violence Prevention	<input type="checkbox"/>	
3. Adult Relationships	<input type="checkbox"/>	
4. Parent-Child Relationship	<input type="checkbox"/>	
5. Neighborhood Safety	<input type="checkbox"/>	
6. Home Safety	<input type="checkbox"/>	
7. Parent Involvement	<input type="checkbox"/>	
8. Community	<input type="checkbox"/>	
9. Other Parent Promotion	<input type="checkbox"/>	

Rating/Active?		3. Health/Nutrition/Mental Health/Special Services
1. Nutrition	<input type="checkbox"/>	
2. Prenatal Health	<input type="checkbox"/>	
3. Family Planning	<input type="checkbox"/>	
4. Well-Child Checks	<input type="checkbox"/>	
5. Health Screens	<input type="checkbox"/>	
6. Immunizations	<input type="checkbox"/>	
7. Chronic/Acute Illness	<input type="checkbox"/>	
8. Mental Health	<input type="checkbox"/>	
9. Behavioral Health	<input type="checkbox"/>	
10. Social Support	<input type="checkbox"/>	
11. Special Services	<input type="checkbox"/>	
12. Other Wellness	<input type="checkbox"/>	

**Goal Rating: 1=Strong need; 2=Need; 3=Inconsistent; 4=Adequate; 5=Strength**

**Family Development Review Summary**

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**Family Development Action Plan**

<b>Parent will:</b>	<b>HS Staff will:</b>

Signature: _____	Relation to Child _____
Signature: _____	Relation to Child _____
Staff Signature: _____	Position _____

Dickstein, Miller, Eguia, & Seifer(2003; 2009 revision)

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# Do Families Make Progress Over Time?

Susan Dickstein, Ronald Seifer, Christine Low, & Alison L. Miller. Sponsored by ACF/ACYF Child Outcomes Research Support Grant #90YD0127

- Selecting “Active” Goals
- Families may choose more than 1 goal

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# What Areas are Most Often Selected by Families to be “Active” (example)

- Parent Self-Reliance (58% of families)
  - -Education (22%)
  - -Employment (12%)
- Parent Promotion of Child Development (53%)
  - -Parent Involvement (39%)
  - -Parenting Skill (9%)
- Health, Nutrition, Mental Health Wellness (24%)
  - -Mental Health (6%)

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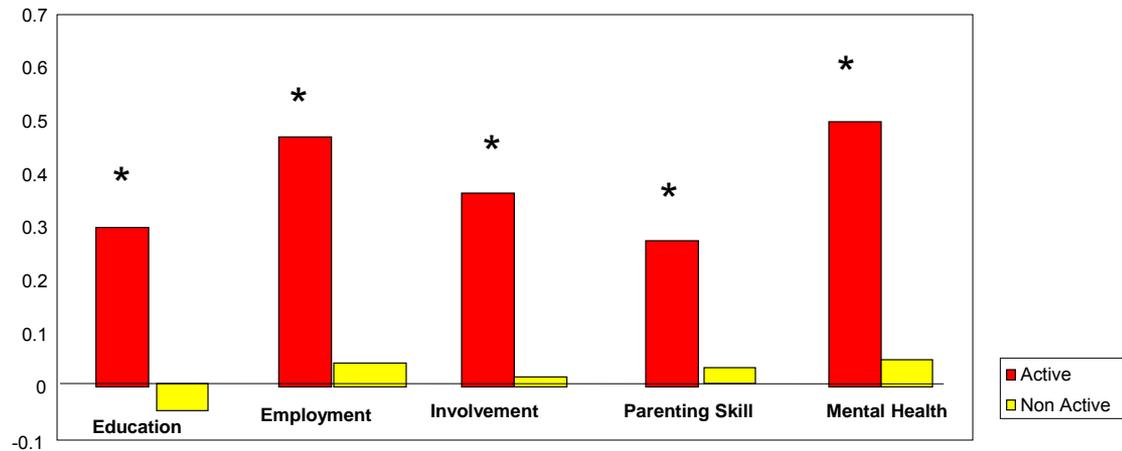
# HS MAP: 0-5 FDR Questions...

- Do families Make Progress Over Time on Goals?
- Do families Reach Adequate Levels by the End of the School Year?

## Do Families Make Progress Over Time on Active (vs Non-Active) Goals?

Goal Selected in Fall	Amount of change if Active	Amount of Change if Non-Active
Parent Self-Reliance-Education	0.28	-0.04*
Parent Self-Reliance-Employment	0.48	0.04*
Parent Promotion of Child Development-Parent Involvement	0.35	0.02*
Parent Promotion of Child Development-Parenting Skill	0.24	0.02*
Mental Health Wellness	0.50	0.03*

# Change in Active vs Non-Active Goals



Level: 1= Strong Need; 2= Need; 3= Inconsistent; 4= Adequate; 5= Strength

\* Indicates statistically significant difference between active vs non-active goal levels

Families demonstrated significant change in most areas that they selected as active;

there was little to no change in non-active goals.

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# What did we learn?

- When families work on selected goals with HS staff, they do in fact make significant progress in those areas
- For those areas that families do not identify to work on, they make virtually no progress
- That is, change in family functioning doesn't happen on it's own.

# How are Families Doing by the End of the School Year?

<b>Head Start-Fall</b>	<b>Level 1-3 %Need/Inconsistent</b>	<b>Level 4 %Adequate</b>	<b>Level 5 %Strength</b>
Parent Self Reliance	<b>89</b>	11	0
Promotion of Child Dev	67	32	1
Health, Nutrition, Mental Health	61	39	0
<b>Head Start-Spring</b>			
Parent Self Reliance	<b>85</b>	15	0
Promotion of Child Dev	59	40	1
Health, Nutrition, Mental Health	50	49	1

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# Families in HS make progress on goals they choose, yet....

- In Spring, most families continue to be rated as having significant needs in all areas
- Main area for which most parents continue to lag at the end of the year: Parent Self Reliance
- In Spring, nearly half of HS/EHS families have adequate levels in Health, Nutrition, and Mental Health; and about 40% have adequate levels in Promotion of Child Development –these are 2 areas where positive change was noted
  
- Does this matter for child development?

# Family Progress Matters for Child Outcomes...

	Correlation with Overall DRR Level
Parent Self-Reliance	.19*
Parent Promotion of Child Development	.26*
Health / Nutrition / Mental Health	.25*

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# Conclusions

- HS MAP: 0-5 assessment system:
  - Scaffolds teachers' knowledge of child development;
  - Structures teachers' observations and provides organization for valuable information (e.g., port
  - Empowers teachers to communicate with other HS staff and families based on accumulated assessment information
  - Highlights importance of HS practices for family development
  - Provides evidence that child developmental progress is related to improvement in family functioning

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# Assessment is Hard to Do...

- Important for HS teachers to see value in assessing child outcomes to justify the time needed to complete the assessments
- Mechanisms of Feedback are Critical:
  - Essential to provide regular, timely feedback
  - Clear visual presentation of results important
  - Need to frame/interpret presentation of individual child and/or classroom progress with regard to normative developmental standards
  - Feedback needs to be embedded within reflective coaching/mentoring relationship in order to be best integrated into instructional practice

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# Current Work....

- How to link standardized screening information with ongoing assessment to get a more complete understanding of child and family functioning?
- Assessment of individuals is complex enough –how to assess classroom level issues to promote optimal developmental outcomes for children? —“Classroom MAP” process to:
  - Assess quality of classroom functioning
  - Provide feedback and self-assessment mechanisms to support improved instructional practices
- Behavioral challenges take time and energy– how to support teachers to effectively manage issues; role of evidence based preventive intervention?!
- How to link HS assessment work to next steps for the child and family—transition to kindergarten?

# Project RI LAUNCH

- Linking Actions for Unmet Needs for Children's Health
- SAMHSA Grant 1H79SM058854-01
- Principal Investigators:  
Blythe Berger (RI Department of Health)  
Susan Dickstein (E. P. Bradley Hospital)  
Ronald Seifer (E. P. Bradley Hospital)
- Grant to RI Department of Health in partnership with Bradley Hospital (\$4.5 million)



# Goal: Mental Health Consultation in Child Care

- Implement research-based mental health consultation in child care; integrated with standardized child/family wellness screening
- HS MAP:0-5 child and family assessment
- Implement empirically validated classroom behavior management training for child care staff (Incredible Years)
- Conduct standardized classroom observations; self-assessment and coaching opportunities to link CR functioning with IY principles (—CRMAP” process)
- Implement empirically validated parent training for targeted families in transition to K



# Classroom MAP Process: Promoting High-Quality Early Learning Environments to Support Instructional Practice

