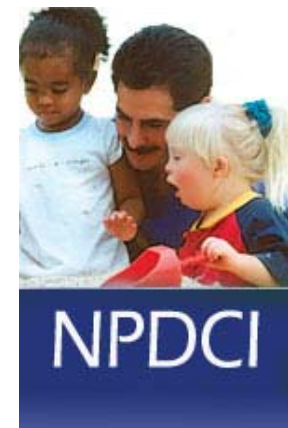# Quality Inclusion:
What does it look like and how can we measure it?

NPDCI

2013 National Smart Start Conference

Pam Winton & Tracey West

FPG Child Development Institute, UNC

May, 2 2013

**National Professional Development
Center on Inclusion (NPDCI)**

IDEAs that Work
U.S. Office of Special
Education Programs

Welcome

Who's in the Room?

Early Childhood Teachers

Local Administrators

Researchers

Professional Development Providers
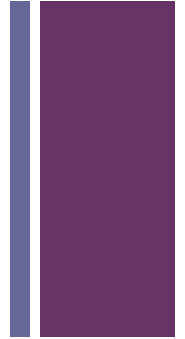
Policy Makers

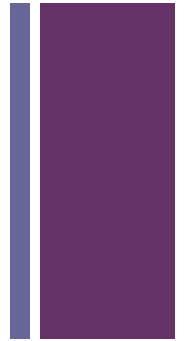STATE ADMIN

Center Directors

Advocates

+ Objectives

- Provide context & need for ICP

- Describe findings from the first US demonstration study

- Describe training materials for users

- Consider possible uses of ICP in your community

Why is it Important to Assess the Quality of Inclusion?

National Professional Development Center on Inclusion

+ CONTEXT: Emphasis on Quality & Accountability

+ Quality Movement = Multiple Quality Initiatives

Head Start Performance Framework

OSEP Monitoring and Accountability

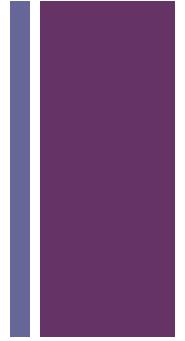licensing

ELG

program standards

QRIS

personnel standards

How Do States Address Inclusion within QRIS?

- Several states with statewide QRIS have included standards for the care of children with special needs but there is no guidance nor standard approach (NPDCI, 2008; NCCIC, 2010)

- QRIS standards related to inclusion vary across states by category, QRIS level, type of program, and documentation and monitoring

- A report on how the 35 state applications for RTT-ELC addressed QRIS indicated that children with special needs were overlooked (Stoney, L., 2012)

Grassroots Perspectives on QRIS & Inclusion

Survey of child care directors (n=48) in 8 states about benefits and challenges of participating in QRIS indicated concern about this issue

(Schulman, Matthews, Blank, & Ewen, 2012)

# Grassroots Perspectives: Findings from Survey (continued)

- Childcare directors discussed "the importance not only of standards appropriate for children with special needs, but also of assessors with knowledge in special education who could recognize appropriate practices for children with special needs"

- Example: for children with autism, room set-up to reduce distractions is not in accordance with requirements for specific number of materials of certain types in the classroom

(Schulman, Matthews, Blank, & Ewen, 2012, p.27)
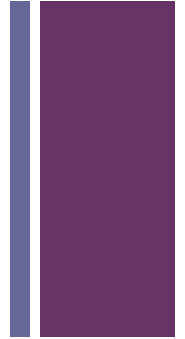
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Young children with disabilities can experience low quality in classes that are otherwise rated as being of high quality

Wolery, et al., 2000
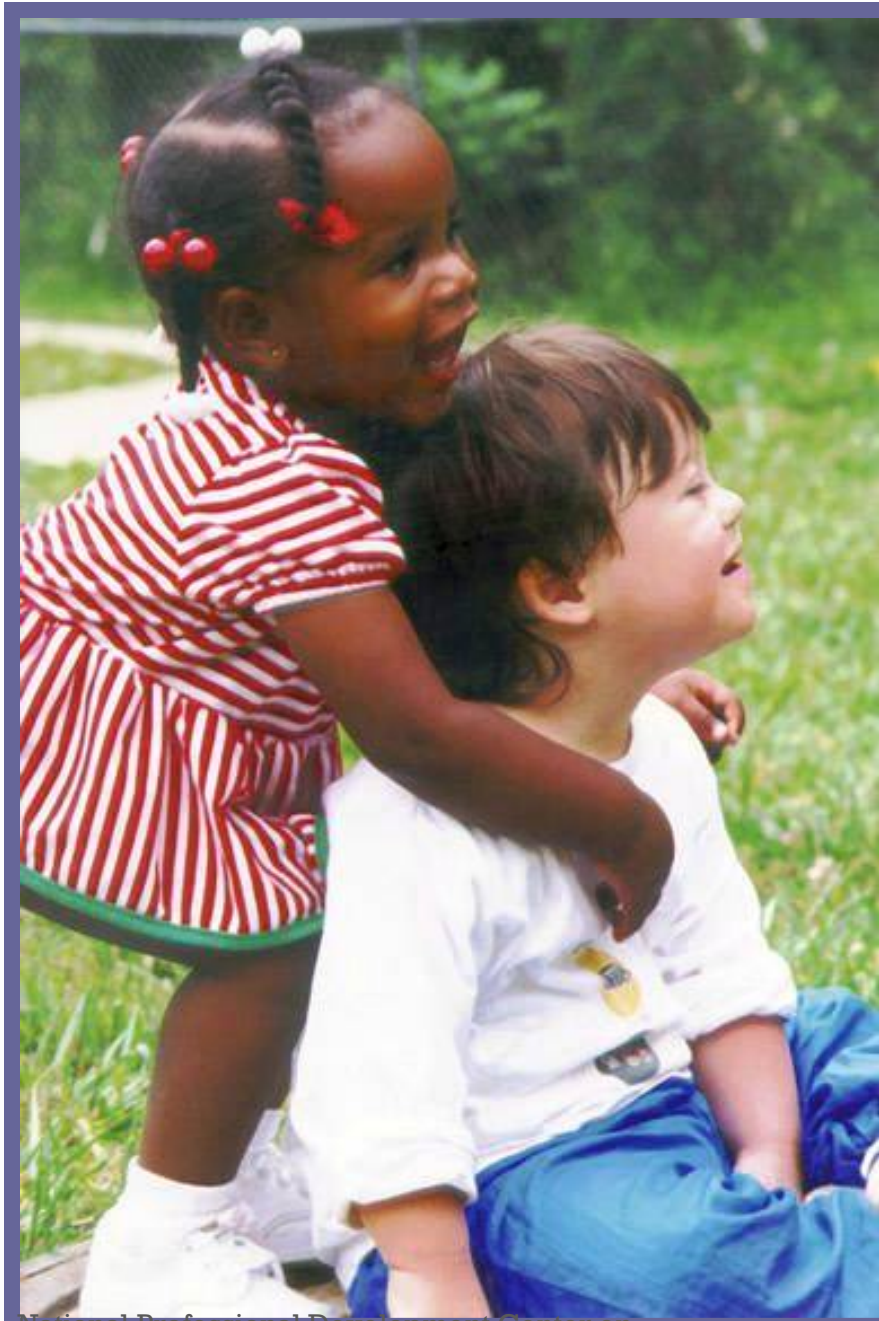
National Professional Development Center on Inclusion

+ What are Research-Based Inclusion Practices?

National Professional Development Center on Inclusion
Helping states achieve an integrated professional development system that supports high quality inclusion

Research Synthesis Points on Quality Inclusive Practices

In April, 2009, two national organizations working on behalf of young children—the Division for Early Childhood of the Council for Exceptional Children (DEC) and the National Association for the Education of Young Children (NAEYC)—completed two years of historic and collaborative work with the release of a joint position statement on inclusion[1]. This document provides brief descriptions and supporting references for the evidence-based and promising practices that support early childhood inclusion. These practices are organized into three major sections corresponding to the defining features of high quality early childhood inclusion as described in the joint position statement:

Access—removing physical barriers, providing a wide range of activities and environments, and making necessary adaptations to create optimal development and learning for individual children;

Participation—using a range of instructional and intervention approaches to promote engagement in play and learning activities, and a sense of belonging for every child; and

Supports—creating an infrastructure of systems-level supports for implementing high-quality inclusion.

Citations for each practice include best available research in the form of research reviews or syntheses or, when a summary of the research does not exist, the most recent and relevant individual studies evaluating specific practices. It should be noted that this document does not include an exhaustive list of existing research studies on every practice, nor do all promising practices have a supporting body of rigorous research evidence. This document may be used in a variety of contexts, including professional development, policy development, planning, advocacy, and grant writing.

1 DEC/NAEYC. (2009). *Early childhood inclusion: A joint position statement of the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC).* Chapel Hill: The University of North Carolina, FPG Child Development Institute.

NPDCI

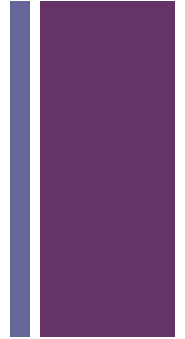Research Synthesis Points on Quality Inclusive Practices

+ How Do We know If We Are Practicing High Quality Inclusion?

+

Moving Beyond Global Quality:
The Inclusive Classroom Profile (ICP)

- Designed to complement existing classroom quality measures & standards

- Focus on classroom-level, evidence-based inclusive practices that support the individual needs of children with disabilities
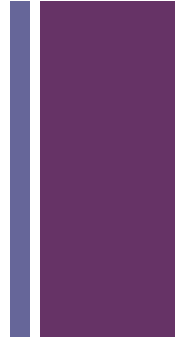
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The Inclusive Classroom Profile (ICP)

- Structured Observation

- 1-7 point Rating Scale

- 12 Inclusive Practices

ICP Items

1. Adaptation of space and materials
2. Adult involvement in peer interactions
3. Adult guidance of children's play
4. Conflict resolution
5. Membership
6. Relationships between adults and children
7. Support for social communication
8. Adaptation of group activities
9. Transitions between activities
10. Feedback
11. Family-professional partnerships
12. Monitoring children's learning

+ Item 3: Adult Guidance of Children's Play
## (Indicator 5.4)

Rating Scale

1. Adaptations of space and materials/equipment (O)

1	2	3	4	5	6	7
Inadequate		Minimal		Good		Excellent

| 1	3	5	7
1.1 Most classroom areas are not accessible (e.g., stairs, various ground levels, toys covering large floor space preclude access) **and children are not helped** to access classroom's areas. **(O)**	**3.1 Some classroom areas are accessible** by children and, when needed, adults usually help children access the classroom space (e.g., a ramp is available for child with physical disability; walker provided etc.). **(O)**	**5.1 Most classroom areas can be independently accessed** by children (e.g., children move around most areas independently; classroom areas are well defined; activity centers are labelled with pictures, words or signs depending on children's individual needs). **(O)** *NA Permitted*	7.1 Adults **intentionally organize the physical space and materials throughout the day to accommodate individual needs and/or to encourage peer interaction** (e.g., adult repositions child on wheelchair so that she can face her peers; adult moves art materials placed on activity table closer to child to promote independent work; adult clears floor space from too many toys to support easy access for a particular child). **(O)**
1.2 Materials/equipment are not accessible by children (e.g., most materials placed in areas that children cannot reach; equipment/materials not adapted to enable access) **and children are not helped** to access them. **(O)**	**3.2 Some materials/equipment are accessible** by children and, when needed, adults usually help children access the materials they need to use (e.g., adult helps child reach a toy from shelf; adult places adaptive scissors on table close to where child is working). **(O)**	5.2 Adults **monitor how children use materials/equipment and help** children who have difficulty **using materials purposefully** (e.g., adult helps child use scissors to cut on paper; adult offers hand-over-hand assistance to child doing a puzzle; adult models for child how to hold pencil; adult guides child how to use glue for an art project). **(O)**	7.2 Children have **access to a variety of toys, materials and equipment carefully selected to accommodate individual needs and to promote independent use.** Throughout the day, adults encourage children to use many different materials in purposeful and creative ways.**(O)**
	3.3 There are at least **a few materials/equipment** that children **use independently**. **(O)** *NA Permitted*	5.3 In most classroom areas, there are **many materials/equipment** that children **use independently**. **(O)** *NA Permitted*	

Who Is Being Observed?
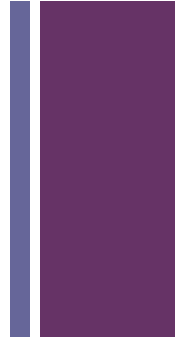
- Children with identified disabilities in the context of classroom activities and social interactions with adults and peers

- Teachers, teacher assistants, specialists

Administration
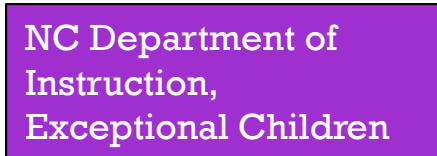
- Observation

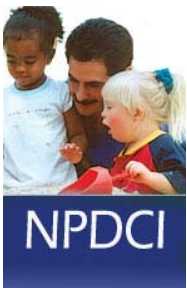- Teacher interview

- Document review
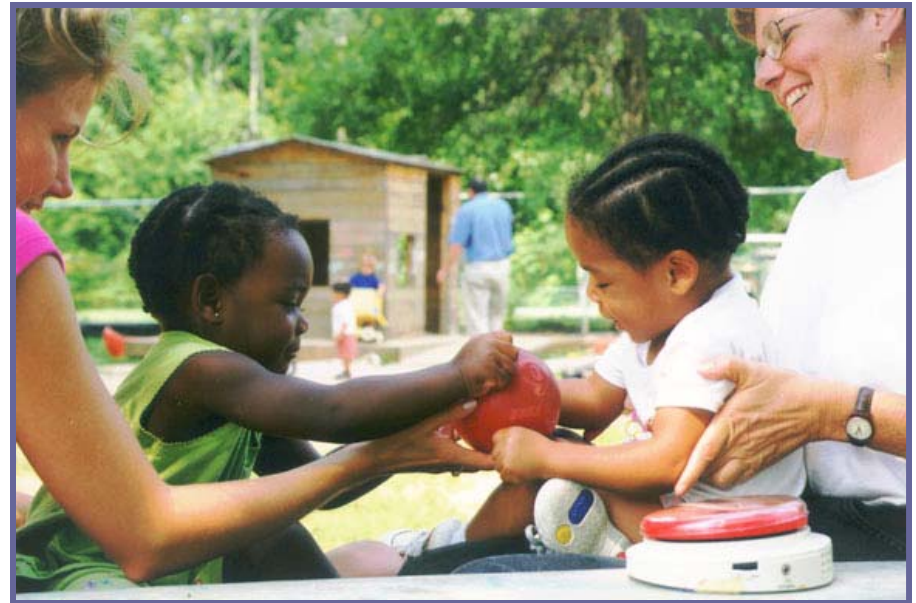
How Can the ICP Be Used?
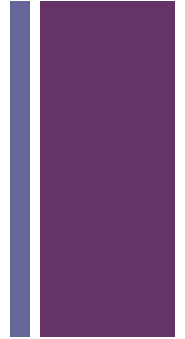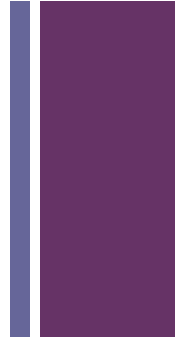
- As a research tool.

- As a program evaluation tool.

- As a self-assessment tool.

- As a professional development tool.

+

Pilot Studies on the ICP

- 1st pilot study in the UK showed promising results on reliability & validity (Soukakou, 2012)
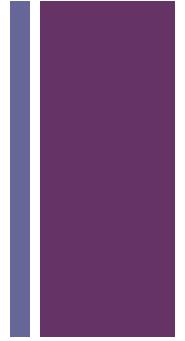
- 2nd pilot study in the US in collaboration with:

NPDCI

North Carolina Rated License Assessment Project

NORTH CAROLINA DCDEE
Division of Child Development and Early Education

NC Department of Instruction, Exceptional Children

ICP Pilot Study (US): Research Questions

- Did assessors learn to use the ICP with accuracy?

- What is the evidence for reliability and validity?

- Did assessors find the ICP useful and acceptable for program evaluation?
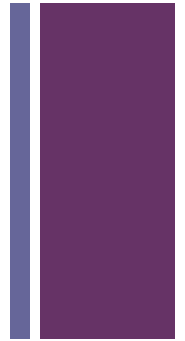
Sample: classrooms

- 51 inclusive classrooms in one state

- Public Pre-K (5), Head Start (13), Developmental Day programs (13), Other child care centers (20)

- 150 children with disabilities

- Mean age of children= 4.43 years
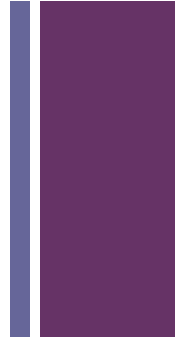
+ Sample: children

- Mean number of children w/ a disability per class = 2.94 (range =1-8).

- Most prevalent area of need: intentional communication (90%).

- 88% of classrooms had at least one child with a moderate or severe level of disability in at least one area.

Procedures

- 51 ICP assessments

- 50 ECERS-R assessments

- Assessor survey for gathering data on ICP acceptability

Results: Inter-Rater Reliability

ITEM	ICC
ICP 1 Adaptation of Space, Materials and Equipment	.62
ICP 2 Adult Involvement in Peer Interactions	.78
ICP 3 Adult Guidance of Children's Play	.11
ICP 4 Conflict Resolution	.70
ICP 5 Membership	.84
ICP 6 Relationships between Adults and Children	.75
ICP 7 Support for Communication	.51
ICP 8 Adaptations of Group Activities	.72
ICP 9 Transitions between Activities	.95
ICP 10 Feedback	.60
ICP 11 Family-Professional Partnerships	.99
ICP 12 Monitoring Children's Learning	.99

Results: Rank-Order Correlations Between ICP and ECERS

ECERS-R Scale	ICP Total Score
Space and Furnishings	0.48***
Personal Care	0.21**
Language and Reasoning	0.47***
Program Structure	0.29*
Activities	0.30*
Interactions	0.38**
Parent and Staff	0.38**
ECERS Total Score	0.48***

Note: *p<.05, **p<.01, ***p<.001

Results: Discriminant Validity

|	Mean(SE)/B(SE)
Child Care	3.67 (0.15)[a]
Developmental Day	5.12 (0.19)[b]
Head Start	4.64 (0.19) [b]
Public Pre-K	4.76 (0.30) [b]

Note: Means not sharing superscripts are significantly different.

Results: Social Validity

On a 1-5 point scale, assessors:

- Rated the importance of the ICP constructs measured very highly (m= 5)

- Would highly recommend the ICP measure to others (m=5)

- Found the measure easy to administer (m= 4)

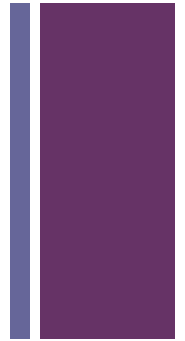- Felt well prepared after the reliability training observations (m=4)
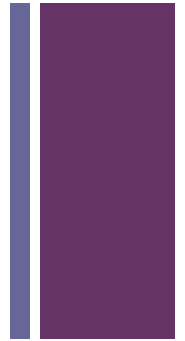
Summary of Findings

- Assessors established adequate administration and reliability proficiency upon training.

- Evidence for construct validity.

- Differences in quality across types of programs

- Assessors found the ICP easy to use and useful for program evaluation

Implications

- ICP possibilities: research, program evaluation, and professional development.

- Some next steps related to emerging interests
  - Training program for users. Online overview materials at http://npdci.fpg.unc.edu/measuring-quality-inclusion-inclusive-classroom-profile
  - Professional development curriculum for PD providers/consultants

+

Online Overview Training Modules

Elena P. Soukakou

Inclusive Classroom Profile

Module 1:

Introduction to the ICP

- ⊙ **The purpose of the ICP**
- ⊙ **Structure**
- ⊙ **Administration**
- ⊙ **12 practices that are assessed by the ICP**

Module 2:
Administration

⦿ **How to prepare for the visit**

⦿ **How to conduct the observation, interview, and document review**

⦿ **How to conclude the visit**

Under Construction…

- Reliability Training Options:
  - Face-to-Face Overview
  - Webinar Overview
  - Guided Observations and Debriefings

What are your Interests in the ICP? How might the ICP be used in your community?

IDEAs that Work
U.S. Office of Special
Education Programs

To find the resources talked about today go to:

- http://npdci.fpg.unc.edu/

- Thank you!

+ Resources and References

- DEC/NAEYC. (2009). *Definition of Inclusion.* http://npdci.fpg.unc.edu/sites/npdci.fpg.unc.edu/files/resources/Inclusion-Position-Statement-Summary-4-2009.pdf

- NPDCI. (2011). *Research synthesis points on quality inclusive practices* http://npdci.fpg.unc.edu/sites/npdci.fpg.unc.edu/files/resources/NPDCI-ResearchSynthesisPointsInclusivePractices-2011_0.pdf

- Soukakou E. P. (2012). *Measuring quality in inclusive preschool classrooms: Development and validation of the Inclusive Classroom Profile (ICP). Early Childhood Research Quarterly, 27(3), 478-488.*

National Professional Development Center on Inclusion

+ Sample: children

- Mean number of children with a disability per class = 2.94 (range =1-8).

- Children had special needs in the following areas: intentional communication (90%); behavior/social (67%); fine motor coordination (45%); gross motor (27%); and sensory integration (27%).

- 59% of the classrooms had a least one child with a disability at the "severe" level (4 on a scale of 1 - 4), while 88% of classrooms had at least one child with a moderate or severe level of disability in at least one area.