## Credential AREA: Infant-Toddler Credential (Level 4) TOPIC: IRE-PPD-HSW Custom Assessment Example Family Involvement & Communication Artifact

### I. Assessment Competency & Standards Alignment

Gateways Competencies Assessed	Competency Alignment by citation
	Zero to Three (2016)
ITC IRE1: Identifies the importance of healthy practitioner-parent interactions and	
relationships in nurturing the development, learning, mental-health, and well-being	
of young children, birth to age three	
ITC IRE2: Describes interactions and strategies that support healthy infant/toddler	SE-5a, C-4a
development, learning, mental health, and well-being and how these can be	
integrated into daily routines	
ITC IRE3: Engages in interactions, embedded in daily routines and activities,	SE-1a, SE-1b, SE-1c, SE-1d, SE-1e, SE-1f, SE-1g,
supportive of developing and maintaining nurturing relationships with infants and	SE-1h, SE-1i, SE-2a, SE-3d, SE-3g, SE-5d, SE-5e,
toddlers	SE-5i, SE-6g, C-3f, L&L-2d
ITC PPD2: Uses relationship-based strategies to develop and maintain positive,	
responsive, respectful relationships with families	
ITC IRE4: Integrates family experience, cultural practices and perspectives, and	C-1a
knowledge of childrearing beliefs and practices into the infant/toddler setting	
ITC HSW5: Identifies, utilizes, and supports family access to and engagement with	
health, nutrition, and safety information to support the healthy development and	
learning of young children, prenatal to age three	

## **II. Assessment Task Description/ Directions**

In this assignment, you will develop a newsletter, podcast or newscast for your infant/ toddler families that highlights the importance of healthy practitioner-parent interactions and relationships in nurturing the development, learning, mental-health, and well-being of young children, birth to age three. You will also provide a description of three to four interaction strategies that support healthy infant/ toddler development, learning, mental health, and well-being and how these can be integrated into daily routines.



The following content should be covered within your newsletter, podcast, or newscast:

a. A description of how positive practitioner-parent interactions and relationships support growth-promoting, positive parent-child interactions and relationships from birth-3

- b. A description of how individual differences in cultural, familial, and linguistic heritage influence perceptions of infancy, and thereby influence communication and interactions with infants and toddlers in the context of families and communities
- c. Examples of approaches for maintaining and strengthening caregiver/child relationships as the primary focus of all activities with infants and toddlers
- d. Examples of how interactions support learning early development (e.g., those that foster attachment, self-regulation, and self-concept) can be integrated into daily caregiving and play routines
- e. Research strategies (e.g., using non-verbal signals, such as eye contact and gestures, using verbal language) to support early communication and language in infants and toddlers with consideration given for individual differences and multilingual learners and families



- f. Characteristics of interactions (e.g., those that are responsive) that promote and support mental health development of infant/ toddlers' emotional security and expression, self-regulation, and self-confidence to explore and learn
- g. A description of why it is important for infant/toddler practitioners to understand parents' views of their child (e.g., the child's strengths and needs, their parental, familial, and cultural goals for their child's development) and examples to support this
- h. Examples that demonstrate how cultural ideas about infants/toddlers and about parenting have implications for working with individual children and their families
- i. Recommendations of relationship-based strategies to develop and maintain positive, responsive, respectful relationships with families
- j. Include the importance of health, safety and nutrition to support the young child's development
- k. Identify a resource in the community that would meet the needs of an infant or toddler with varying abilities, mental health needs and or other health-related needs

#### Assignment requirements also include the following:

- Product format you may elect to develop a newsletter, podcast, or newscast
- Coverage of the age span across the birth to three continue
- Citations provided from research on a separate document
- An engaging overall product

## III. Assessment Rubric

ITC Level 4 ITC Family Involvement & Communication Artifact Custom Rubric							
Competency	Distinguished	Competent	Developing	Unsatisfactory	Unable to Assess		
IRE1: Identifies the importance of healthy practitioner- parent interactions and relationships in nurturing the development, learning, mental- health, and well- being of young children, birth to age three  Zero to Three: N/A	Explains how positive practitioner-parent interactions and relationships are essential in supporting the development, learning, mental-health, and well-being of young children, birth to age three  Uses research to as a rationale to support explanation	Explains how positive practitioner-parent interactions and relationships are essential in supporting the development, learning, mental-health, and wellbeing of young children, birth to age three	Identifies the relationship between positive practitioner-parent interactions and relationships and supporting the development, learning, mental-health, and wellbeing of young children, birth to age three	Inaccurate or incomplete identification of the relationship between positive practitioner-parent interactions and relationships and supporting the development, learning, mental-health, and wellbeing of young children, birth to age three			
Competency	Competent						
	Checklist Criteria						
IRE2: Describes interactions and strategies that support healthy infant/toddler development,	how interactions that support learning core tasks of early development (e.g., those that foster attachment, self-regulation, and self-concept) can be integrated into daily care giving and play routines						

learning, mental health, and wellbeing and how these can be integrated into daily routines  Possible Codes: N = names, P = provides example of  Zero to Three: SE-5a, C-4a	early communication	strategies (e.g., using non-verbal signals such as eye contact and gestures; using verbal language) to support early communication and language in infants and toddlers of different ages  characteristics of interactions (e.g., responsive) that promote and support the healthy development of infant/toddlers' emotional security and expression, self-regulation, and self-confidence to explore and learn					
Competency	Distinguished	Competent	Developing	Unsatisfactory	Unable to Assess		
IRE3: Engages in interactions, embedded in daily routines and activities, supportive of developing and maintaining nurturing relationships with infants and toddlers  Zero to Three: SE-1a, SE-1b, SE-1c, SE-1d, SE-1e, SE-1f, SE-1g, SE-1h, SE-1i, SE-2a, SE-3d, SE-3g, SE-5d, SE-5e, SE-5i, SE-6g, C-3f, L&L-2d	Forms responsive, affectionate relationships with infants and toddlers  Responds to children's emotional expression in sensitive and ageappropriate ways  Demonstrates interaction and support techniques appropriate to infants and toddlers (e.g., responding, turn-taking, attunement, elaborating, redirecting, providing positive guidance)  Identifies strategies or directly supports families and colleagues in developing and maintaining nurturing relationships with infants	guidance)	Forms relationships with infants and toddlers  Responds to children's emotional expression	Forms challenging and/or negative relationships with infants and toddlers  Responds to children's emotional expression in insensitive and ageinappropriate ways  Demonstrates interaction and support techniques that lack appropriateness			

	and toddlers				
Competency	Distinguished	Competent	Developing	Unsatisfactory	Unable to Assess
PPD2: Uses relationship-based strategies to develop and maintain positive, responsive, respectful relationships with families  Zero to Three: N/A	Demonstrates that the primary role of an infant/toddler practitioner is to build positive, respectful, responsive relationships with families and with children  Identifies and uses relationship-based strategies to develop and maintain positive partnerships with families and nurturing relationships with children.  Identifies strategies to support others in adopting and using relationship-based strategies to develop and maintain positive partnerships with families and nurturing relationships with children	Demonstrates that the primary role of an infant/toddler practitioner is to build positive, respectful, responsive relationships with families and with children  Identifies and uses relationship-based strategies to develop and maintain positive partnerships with families and nurturing relationships with children	Demonstrates positive, respectful, responsive relationships with families and with children  Identifies and uses relationship-based strategies to develop and maintain positive relationships with families and children	Demonstrates negative, stressful relationships and interactions with families and children  Fails to apply relationship-based strategies to develop and maintain positive relationships with families and children	
Competency	Distinguished	Competent	Developing	Unsatisfactory	Unable to Assess
IRE4: Integrates family experience, cultural practices and perspectives, and knowledge of childrearing beliefs and practices into the infant/toddler setting	Provides examples of how families' experiences, knowledge, and childrearing beliefs and practices can be incorporated into practices in early care and education settings  Identifies ways in which individual differences in	Provides examples of how families' experiences, knowledge, and childrearing beliefs and practices can be incorporated into practices in early care and education settings  Identifies ways in which	Provides limited examples of how families' experiences, knowledge, and childrearing beliefs and practices can be incorporated into practices in early care and education settings  Identifies ways in which	Provides inaccurate or incomplete examples of how families' experiences, knowledge, and childrearing beliefs and practices can be incorporated into practices in early care and education settings	

<b>HSW5</b> : Identifies, utilizes, and	Identifies and utilizes health, nutrition, and safety	Identifies and utilizes health, nutrition, and safety	Identifies and utilizes health, nutrition, and safety	Health, nutrition, and safety information	
Competency	Distinguished	Competent	Developing	Unsatisfactory	Unable to Assess
Zero to Three: C-1a	cultural, familial, and linguistic heritage influence perceptions of infancy, and thereby influence communication and interactions with infants and toddlers  Provides examples that illustrate why it is important for early childhood practitioners to understand cultural nuances in family health practices and parents' views of their child  Explains how culture impacts families' perspectives about their infant toddler, parenting, and the services they value, and how cultural ideas about infants/toddlers and about parenting have implications for working with individual children and their families  Supports families as current and future advocates for integration of family experience, cultural practices and perspectives, and knowledge of childrearing beliefs and practices into future educational settings	individual differences in cultural, familial, and linguistic heritage influence perceptions of infancy, and thereby influence communication and interactions with infants and toddlers  Provides examples that illustrate why it is important for early childhood practitioners to understand cultural nuances in family health practices and parents' views of their child  Explains how culture impacts families' perspectives about their infant toddler, parenting, and the services they value, and how cultural ideas about infants/toddlers and about parenting have implications for working with individual children and their families	individual differences in cultural, familial, and linguistic heritage influence perceptions of infancy  Provides limited examples that illustrate why it is important for early childhood practitioners to understand cultural nuances in family health practices and parents' views of their child  Partially explains how culture impacts families' perspectives about their infant toddler, parenting, and the services they value, and include limited explanation of how cultural ideas about infants/toddlers and about parenting have implications for working with individual children and their families	Inaccurately identifies ways in which individual differences in cultural, familial, and linguistic heritage influence perceptions of infancy, and thereby influence communication and interactions with infants and toddlers  Provides inaccurate or incomplete examples that illustrate why it is important for early childhood practitioners to understand cultural nuances in family health practices and parents' views of their child  Provides an incorrect explanation of how culture impacts families' perspectives about their infant toddler, parenting, and the services they value, and how cultural ideas about infants/toddlers and about parenting have implications for working with individual children and their families	

supports family access to and	information with families	information, supportive of young children's	information with families	provided for families not supportive of young	
engagement with	Promotes family access to	development and learning	Promotes family access to	children's development	
health, nutrition,	and engagement with	with families	resources	and learning and/or	
and safety	resources			reflective of family needs	
information to		Promotes family access to			
support the	Information utilized includes	and engagement with			
healthy	adaptations and	resources			
development and	accommodations for infants	Information utilized			
learning of young	and toddlers with varying	includes adaptations and			
children, prenatal	abilities, mental health	accommodations for			
to age three	needs, and/or other health	infants and toddlers with			
	related needs	varying abilities, mental			
Zero to Three: N/A		health needs, and/or other			
	Partners with families to	health related needs			
	ensure resource selection,				
	distribution, and utilization				
	is culturally and linguistically				
	responsive				

Yellow = Level 2

Green = Level 3

Orange = Level 4

# IV. Data Collection & Analysis Tool

Competency & Standards	Competency & Standards Alignment		Cumulative Assessment Data			
Competency	Zero to Three (2016)	Distinguished	Proficient	Needs Improvement	Unsatisfactory	Unable to Assess
ITC IRE1: Identifies the importance of healthy practitioner-parent interactions and relationships in nurturing the development, learning, mental-health, and well-being of young children, birth to age three						
ITC IRE2: Describes interactions and strategies that support healthy infant/toddler development, learning, mental health, and well-being and how these can be integrated into daily routines	SE-5a, C-4a					

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ITC IRE3: Engages in interactions,	SE-1a, SE-1b, SE-1c, SE-1d,			
embedded in daily routines and	SE-1e, SE-1f, SE-1g, SE-1h,			
activities, supportive of developing and	SE-1i, SE-2a, SE-3d, SE-3g,			
maintaining nurturing relationships	SE-5d, SE-5e, SE-5i, SE-6g,			
with infants and toddlers	C-3f, L&L-2d			
ITC PPD2: Uses relationship-based				
strategies to develop and maintain				
positive, responsive, respectful				
relationships with families				
ITC IRE4: Integrates family experience,	C-1a			
cultural practices and perspectives, and				
knowledge of childrearing beliefs and				
practices into the infant/toddler setting				
ITC HSW5: Identifies, utilizes, and				
supports family access to and				
engagement with health, nutrition, and				
safety information to support the				
healthy development and learning of				
young children, prenatal to age three				