# **Credential AREA: Infant-Toddler Credential (Levels 2-4) TOPIC: IRE-PPD-HSW Stacked Custom Assessment Example Family Involvement & Communication Artifact**

## I. Assessment Competency & Standards Alignment

Gateways Competencies Assessed	Competency Alignment by citation
	Zero to Three (2016)
<b>ITC IRE1</b> : 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	
<b>ITC IRE2</b> : 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 a 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.

Assignment requirements 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 continua
- Citations provided from research on a separate document



• An engaging overall product

# To address Level 2 competencies, the following content should be covered within your newsletter, podcast, or newscast:

- a. A description of how positive practitioner-parent interactions and relationships support growthpromoting, positive parent-child interactions and relationships from birth-3
- b. Examples of approaches for maintaining and strengthening caregiver/child relationships as the primary focus of all activities with infants and toddlers
- c. 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
- d. 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
- e. 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
- f. Recommendations of relationship-based strategies to develop and maintain positive, responsive, respectful relationships with families

### To address Level 3 competencies, the following content should also be covered within your newsletter, podcast, or newscast:

- g. 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
- h. 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
- i. Examples that demonstrate how cultural ideas about infants/toddlers and about parenting have implications for working with individual children and their families

#### To address Level 4 competencies, the following content should also be covered within your newsletter, podcast, or newscast:

- 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



ITC Level 2-4 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 well- being 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 well- being 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 well- being of young children, birth to age three			
Competency	Competent						
	Checklist Criteria						
<b>IRE2</b> : 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 well- being and how these can be integrated into daily routines <b>Possible Codes:</b> N = names, P = provides example of	early communica	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					
<b>Zero to Three</b> : SE-5a, C-4a							
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 age- appropriate ways Demonstrates interaction and support techniques appropriate to infants and toddlers (e.g., responding, turn-taking, attunement, elaborating, redirecting, providing positive guidan Identifies strategies or directly supports families and colleagues in develop and maintaining nurturing relationships with infants	ng	Forms relationships with infants and toddlers Responds to children's emotional expression	<ul> <li>Forms challenging and/or negative relationships with infants and toddlers</li> <li>Responds to children's emotional expression in insensitive and age-inappropriate ways</li> <li>Demonstrates interaction and support techniques that lack appropriateness</li> </ul>			

	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
<b>IRE4</b> : 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	

	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	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	explanation of how cultural ideas about infants/toddlers and about parenting have implications for working with individual children and their families	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	
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	<ul> <li>individual differences in cultural, familial, and</li> <li>linguistic heritage</li> <li>influence perceptions of</li> <li>infancy, and thereby</li> <li>influence communication</li> <li>and interactions with</li> <li>infants and toddlers</li> <li>Provides examples that</li> <li>illustrate why it is</li> <li>important for early</li> <li>childhood practitioners to</li> <li>understand cultural</li> <li>nuances in family health</li> <li>practices and parents'</li> <li>views of their child</li> <li>Explains how culture</li> <li>impacts families'</li> </ul>	<ul> <li>individual differences in cultural, familial, and</li> <li>linguistic heritage influence perceptions of infancy</li> <li>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</li> <li>Partially explains how culture impacts families' perspectives about their infant toddler, parenting, and the services they value, and include limited</li> </ul>	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	

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# IV. Data Collection & Analysis Tool

Competency & Standards	Competency & Standards Alignment Cumulative Assessment Data			ent Data		
Competency	Zero to Three (2016)	Distinguished	Proficient	Needs Improvement	Unsatisfactory	Unable to Assess
<b>ITC IRE1</b> : 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						
<b>ITC IRE2</b> : 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					

<b>ITC IRE3</b> : Engages in interactions,	SE-1a, SE-1b, SE-1c, SE-1d,			
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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				