CASEtools
Instruments and Procedures for Implementing Early Childhood and Family Support Practices

Closing the Gap: Fidelity in Practice-Early Intervention Checklist

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This *CASE*tool includes a description of the *Fidelity-in-Practice—Early Intervention (FIP-EI)* practice checklists and guidance manual. The purpose of the *FIP-EI* is to provide an easy-to-use process for determining practitioner fidelity to three sets of early childhood intervention family-centered capacity-building practices, including natural learning environment practices, resource-based practices, and coaching practices. The *FIP-EI* observation checklist is a resource for administrators, supervisors, and practitioners to assess and reflect on adherence to the evidence-based practices that support positive outcomes for children and families.

INTRODUCTION

Despite the availability of research on evidence-based early childhood intervention (ECI) practices that can be used to achieve positive child and family outcomes, a widely recognized knowledge utilization gap of up to 20 years exists (Campbell & Halbert, 2002; Elmore, 2016; Metz & Bartley, 2012; Morris et al., 2011; Vanderlinde & van Braak, 2010). Since implementation fidelity is a moderator of an intervention's intended outcomes (Carroll et al., 2007; Fixsen et al., 2005), programs and practitioners who fall short of using early intervention practices the way they were intended as defined by research may be contributing to watered-down outcomes or negative impacts for children and families.

Once practitioners enter the field of early childhood intervention, states and programs are responsible for having a process or system to help practitioners operationalize cross-disciplinary expertise within the unique context of ECI. The Division for Early Childhood (DEC) of the Council for Exceptional Children established practice guidelines (see DEC Recommended Practices of 2014) for early intervention/early childhood special education that cross disciplines and provide guidance for how to implement early childhood interventions using the best available research, validated practices, and relevant laws and regulations. Others have proposed checklists and scales to measure adherence to the DEC Recommended Practices, (Dunst, 2017; Dunst et al., 2017) which cover the wide span of early childhood special education practices, birth through age eight. Although existing checklists are helpful in identifying general practices that apply to a range of early childhood special education settings and circumstances, they do not provide detailed guidance for operationalizing the cross-disciplinary family-centered

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practices (i.e., natural learning environment practices in home and community settings in early intervention contexts).

The purpose of this *CASE*tool is to advance the previous work focused on providing the early childhood field with performance checklists (see Roper & Dunst, 2006 and Wilson & Dunst, 2005) and introduce a resource for helping practitioners and administrators within the specialized field of ECI evaluate the use of capacity-building early intervention practices by providers during service delivery. The purpose of the *FIP-EI* is to provide an easy-to-use process for determining practitioner fidelity to three sets of early childhood intervention family-centered capacity-building practices, including natural learning environment practices, resource-based practices, and coaching practices.

THE NEED FOR EARLY INTERVENTION PRACTITIONER CHECKLISTS

The quality of services provided by the early intervention workforce directly impacts the outcomes experienced by children and families (Bellg et al., 2004; Dunst & Trivette, 2009b; Fixsen et al., 2005). Within the field of ECI in the United States, individual states and programs are charged with ensuring practitioners who work with infants and toddlers and their families (e.g., special educators, speech-language pathologists, physical therapists, occupational therapists, nurses, nutritionists, psychologists, and social workers) use evidence-based (i.e., research-based) early intervention practices and monitor practitioner proficiency (IDEA, 2004). One way to measure fidelity to evidence-based practices is the use of practice-based checklists. Sufficiently detailed and clear checklists can be a simple mechanism to gather information about a practitioner's operationalization of specific evidence-based practices or characteristics of a practice (Gawande, 2010). Checklists are widely used in ECI to promote procedures such as eligibility determination, outcome development, service provision, transitions, and practices (see Dunst et al., 2007; Dunst, 2017; Florida State University, 2003; Integrated Training Collaborative, 2016; Rush & Shelden, 2012; Younggren et al., 2017). Task-based checklists are exceptionally helpful for ensuring practitioners complete mandatory steps in the early intervention process, but do not assist with or support in the evaluation or ongoing monitoring of fidelity to practices. Existing practice checklists tend to focus on early childhood special education as a whole, spanning the delivery of services from birth to age eight within the many contexts in which those services can occur (i.e., home, childcare, and community locations). ECI is a small subset of early childhood special education and the context and pedagogy of ECI specific practices are often under-represented or over-generalized in broad checklists or guidance.

The substantial research-to-practice gap would suggest that ECI providers could benefit from a set of practice checklists that operationalize research-based practices within the specific context of ECI. The *FIP-EI* provides a framework for observing and evaluating practitioner adherence to the evidence-based practices that are associated with positive ECI outcomes for children and families.

THEORETICAL FRAMEWORK FOR THE CHECKLISTS

Dunst and Trivette (2009b) describe evidence-based practices as "practices informed by research findings that demonstrate a statistical or functional relationship between the characteristics and consequences of a planned or naturally occurring experience…" (p. 41). Evidence-based ECI practices also include specialized, discipline-specific knowledge and skilled interventions as well as early intervention cross-discipline practices (Bruder et al., 2019). Current research supports the use of family-centered capacity-building practices across disciplines to promote the family's confidence and competence with ensuring child learning and child and family well-being (Dunst et al., 2014). Family-centered practices include two types of help-giving practices: relational and participatory. Relational practices involve what the practitioner does to build and maintain strong and respectful relationships with families (Dunst & Trivette, 2009a; Wilson & Dunst, 2005). Key characteristics of relational help-giving practices include treating families with dignity and respect; providing individual, flexible and responsive support; sharing information so families can make informed decisions; ensuring family choice regarding intervention options; and providing the necessary resources and supports for parents to care for their children in ways that produce optimal child and parent outcomes (Dunst & Espe-Sherwindt, 2016). Relational help-giving practices depend heavily on establishing a mutually respectful relationship between the practitioner and the family. Good clinical practices, such as active listening, compassion, empathy, trust, and caring are examples of relational help-giving practices (Dunst & Trivette, 2009a). Participatory help-giving practices include what a practitioner does to promote the parent or caregiver's active participation in the early intervention process (Dunst & Trivette, 2009a; Wilson & Dunst, 2005). Participatory help-giving practices include

behaviors like helping the parent practice and build a repertoire of responsive strategies, helping the parent identify and evaluate formal and informal resources for addressing a priority, and supporting the parent to identify their own typical family activities that could be used as opportunities to promote child learning.

Family-centered capacity-building practices have been described and operationalized in the ECI literature by three key practices including: (1) natural learning environment practices (sometimes referred to as naturalistic instruction, contextually mediated practices, and routines-based interventions) (Dunst, 2006; McWilliam, 2016); (2) resource-based intervention practices (Mott, 2005; Sexton & Rush, 2012); and (3) a coaching interaction style (Akamoglu & Dinnebeil, 2017; Douglas et al., 2019; Inbar-Furst et al., 2020; Rush & Shelden, 2020).

Natural Learning Environment Practices

Natural learning environment practices (NLEP) are those practices that support caregivers of children with disabilities in understanding the critical role of typical family routines and child interests as the foundation of children's learning opportunities (Dunst et al., 2001). Dunst and Trivette identify three characteristics associated with positive child learning outcomes: (1) child interest (Raab, 2005), (2) opportunity for engaging in everyday activities and routines (Dunst, 2006; Farver, 1999; McWilliam, 2000), and (3) parent/caregiver responsiveness (Dunst & Kassow, 2008; Nievar & Becker, 2008; Roberts & Kaiser, 2011; Trivette, 2003). The NLEP checklist of the *FIP-EI* is comprised of three practice characteristics: child interest, activity settings/routines, and caregiver responsiveness. These characteristics are described by ten indicators.

Resource-Based Practices

Resource-based intervention practices (RBIP) include a set of strategies used by early intervention providers that focus on the provision and mobilization of resources in order to achieve family outcomes (Dunst et al., 1994; Mott, 2005). Resource-based intervention is a capacity-building approach for supporting families to clarify priorities, identify existing and potential formal and informal resources, analyze and select the resources that best match families' priorities and values, empower families to mobilize the resources, and help families reflect on and evaluate the effectiveness of the resource. Although the characteristics of resource-based intervention practices can be applied to any ECI context (e.g., promoting child learning at home or in community-based contexts, supporting the provision of information and resources needed for family well-being), within the *FIP-EI*, the RBIP checklist focuses on the use of the indicators within the context of addressing family functioning and well-being priorities (e.g., reliable transportation, high-quality childcare, healthcare, food, financial needs). Strengthening family resources, support, and well-being provides families with the time, energy, and human resources to promote child learning in home and community settings (Dunst & Trivette, 2009a). The RBIP characteristics are described in ten indicators in the checklist.

Coaching Practices

Using a coaching interaction style has been identified as an effective means of promoting capacity-building outcomes for caregivers. It is particularly effective when the coaching framework used includes joint planning, active practice on the part of the caregiver while the practitioner observes and provides support, and opportunities for caregiver reflection and practitioner feedback (Akamoglu & Dinnebeil, 2017; Kemp & Turnbull, 2014; Pellecchia et al., 2020; Tomeny et al., 2020). The Coaching Practices Checklist operationalizes participatory and relational helpgiving practices and is organized according to five practice characteristics of evidence-based coaching: joint planning, reflection, observation, action/practice, and feedback (Rush & Shelden, 2020). These characteristics are described by ten indicators. When used with natural learning environment practices and resource-based intervention practices, a coaching interaction style builds family capacity by assisting families with strengthening their abilities and confidence to help their children learn and fully participate in family and community life.

DESCRIPTION AND USE OF THE FIP-EI

The *FIP-EI* checklists focus on a specific set of practices unique to the caregiver capacity-building focus of ECI. The *FIP-EI* provides a set of three checklists designed to help practitioners and administrators monitor practitioner use of evidence-based practices (implementation fidelity) and an accompanying set of resources to help administrators implement the observation checklists in an evidence-based manner (intervention fidelity). The *FIP-EI* also includes an orientation step-up guide for determining the recommended frequency of observations based on practitioner confidence and competence, instructions for facilitating a pre-observation joint planning conference, helpful hints for using the FIP-EI during a live or video recorded observation, support for facilitating post-observation reflections with space to document a continuous improvement plan,

and assistance with determining the presence or absence of each checklist indicator. The guidance material in the *FIP-EI* is intended to help with observer reliability and decrease practitioner frustration before, during, and after the observation. Clearly defined guidance describes each practice indicator and helps observers overcome potential observer bias (Lewis-Beck et al., 2003; Mahtani et al., 2018). The checklists include indicators that describe the characteristics of practices documented by research to have positive developmental outcomes for children and capacity-building outcomes for families.

An early intervention interaction is considered to have fidelity when each of the indicators is present (as described in the *Observed* guidance). An interaction lacks fidelity when the practitioner fails to align practices with the indicator or uses practices listed in the *Not Observed* guidance. Since early intervention interactions can last an hour or more, practitioners could demonstrate practices in both the Observed guidance and the Not Observed guidance within the same visit. In those circumstances, the observer must rely on the guidance in the manual to determine if the practice matched the indicator often enough to have been beneficial to the family or violated the indicator enough to have undermined the intended capacity-building outcomes of the visit.

When used regularly and systematically, the checklists are likely to help practitioners, observers, and program administrators interpret trends in a practitioner's (when analyzed across time) or team's (when analyzed across practitioners) implementation fidelity. The *FIP-EI* can be used to track a novice practitioner's journey through the orientation process and help determine when fidelity has been reached. It can help researchers measure the quality of early intervention, a notable shortcoming in early intervention research (Knoche et al., 2010; Lemire, et al., 2022). The checklists can also be used as a self-assessment for practitioners to monitor and adjust their own practices. Information gathered through the use of the *FIP-EI* can be used to determine where professional development efforts are needed or where provider coaching is needed.

CONCLUSION

Fidelity is a key ingredient of the systematic implementation of evidence-based early intervention practices. Tools that advance our understanding and use of key intervention indicators have the potential to improve the quality and effectiveness of service and enhance child and family outcomes. For programs to make gains in practitioner implementation fidelity, administrators and practitioners need to understand the characteristics that make up the target practices across disciplines and within the varied contexts in which they are delivered.

The *FIP-EI* provides the ECI field with a means to observe and evaluate practitioner adherence to evidence-based practices that are associated with positive ECI outcomes for children and families. The *FIP-EI* has the potential to fill a long-standing gap in data-based individualized professional development and to help programs monitor and promote evidence-based practices. With continued use and study, the *FIP-EI* serves to be a promising tool for measuring and promoting fidelity in the ECI field by providing a systematic means for observing, monitoring, and planning for evidence-based practices.

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