

# the spotlight

## Infant Toddler Services of Riley County Quarterly

### EARLY INTERVENTION IN THE COVID WORLD INFANT TODDLER SERVICES CONTINUE WITH MORE CHOICES

In March, Infant Toddler Services of Riley County was thrust into finding alternate and effective ways to serve young children with developmental delays and disabilities at home with their families during stay at home mandates from the state and local government. Traditionally, face-to-face home visits have been the standard. However, during the time of crisis we have quickly adapted to the virtual platform. We started virtual early intervention services within two weeks of the stay at home order.

Moving from a face-to-face platform to a virtual platform began as a challenge. However, our focus on parent mediated practices and our extensive training in high quality early intervention made it easy to transition to this new way of service application.

We began easing into in-person visits the middle of June. We continue to offer both virtual and in-person platforms to families. We have had very positive feedback from families about our virtual platform. Our data has shown positive results using tele-visits as an early intervention option. We anticipate that both early intervention platforms will continue to be offered to families even when the COVID-19 pandemic has passed..

If you have developmental concerns for a child who is under the age of three, make a referral to Infant Toddler Services of Riley County through fax, phone or through our website. We provide **FREE** assessments/evaluations, intervention and transition to preschool at **NO COST**.

Riley County Infant Toddler will not turn away any child who is in need of early intervention services.

MAKE A REFERRAL AT  
785-776-7676 OFFICE  
785-371-9003 FAX  
[WWW.INFANT-TODDLER.ORG](http://WWW.INFANT-TODDLER.ORG)



### MEET OUR NEW PROVIDER

**Macie Frey-Bussey, M.S.**  
Early Childhood Special Education



Infant Toddler Services of Riley County is excited to introduce our new team member. Macie received her undergraduate degree in Elementary Education from

Newman University in 2008. She graduated in 2014 from Emporia State University with a Masters in Early Childhood Unified birth to 3rd grade. Macie has been teaching special education for over 12 years. She has been working as an Early Childhood Special Education Teacher for USD383 Early Learning 3-5 year old program for 9 years. She has extensive knowledge and experience working with children who need special instruction and support. She has expertise in behavior supports and interventions.



## THE ROLE OF SERVICE COORDINATOR IN EARLY INTERVENTION

Many families referred to early intervention often ask, “What is a service coordinator? What do they do?” The role of the service coordinator is unique, multifaceted, and complex. Service coordination is the only mandated service under Part C of the Individuals With Disabilities Education Act, and it is provided for every family in early intervention at NO COST. A service coordinator works in partnership with the family—from initial referral through transition out of early intervention—to help the family gain access to the early intervention system, identify supports and services that meet the family’s needs, and understand the family’s rights and procedural safeguards.

Service coordinators collaborate with families by exchanging information with families throughout the process. They gather information from families regarding their family and child, including their priorities, strengths, and needs, and share information with families about the early intervention system, such as its rules, regulations, specific timelines, and services. This exchange of information helps the family make informed decisions.

A service coordinator brings expertise about the early intervention system, including knowledge about rules, regulations, and processes; knowledge about resources, supports, and services available; and knowledge and skills in teaming and collaboration. Each family is linked with a service coordinator who will partner with and support the family.

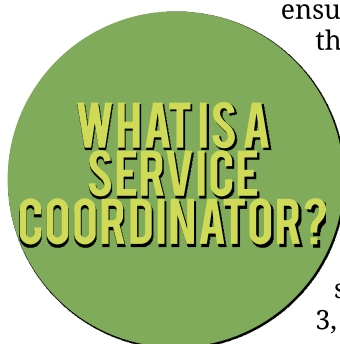
Some responsibilities include:

- Coordinating and scheduling the intake, screenings, and evaluations/assessments, which includes working with the family to jointly determine how and where they will be done and who will do them. This marks the beginning of a partnership with the family that will continue to grow over time.
- Informing families of their rights and providing examples to support understanding.
- Coordinating and supporting the family in the development of the Individualized Family Service Plan (IFSP) and ensuring that the

family’s priorities and strengths are reflected in the IFSP.



- Informing the family of available services and how to access them. This entails supporting the family in provider selection and providing referrals to selected providers.
- Coordinating the delivery of services and supports in a timely manner.
- Checking in with the family routinely and ensuring that the family receives the services outlined in the IFSP.



- Coordinating with medical, health, and community providers.
- Developing a transition plan together with the family to ensure a smooth transition to 3 year old services after their child turns 3, if appropriate.

■ Informing families of advocacy services and supporting families in advocating for their child.

The key to a service coordinator’s work is building a trusting relationship with the family. A service coordinator will take a family-centered approach at all times, acknowledging the family as full and equal team members, recognizing family strengths, and respecting family beliefs and values. This enables families to have access to support and information about their child’s needs, a deeper understanding of their child’s strengths and needs, and access to quality supports that are effective, coordinated, and individualized to their needs. *(taken from <http://eiclearinghouse.org>)*



## RESEARCH IN EARLY INTERVENTION

The landmark Hart and Risley study in 1995 helped pave the way to understanding the significance on how parent and the environment play on the child's development and learning. In Hart & Risley, 1995, the researchers conducted a longitudinal study of parent-child talk in 42 families living in Kansas City, Kansas. Over the 10 years, they concluded that variation in children's IQ and language abilities is partially predicted by the amount parents speak to their children. They also found that a child's academic success at age nine can be attributed to the amount of talk they heard from birth to age three and parents of advanced children talk significantly more to their children than parents of children who are not as advanced.



Most notably, the researchers found that the child's rate of vocabulary growth, vocabulary use and IQ score was more strongly related to the number of words a parent said per hour than any other variable including parent's education or socioeconomic status. With these results, Hart & Risley, 1995 concluded that "the more parents talked to their children, the faster the children's vocabularies were growing and the higher the children's IQ test scores were at age three and later".

### HOW DO THESE FINDINGS RELATE TO THE EARLY INTERVENTION PARENT DIRECTED MODEL

The caregiver in a child's early life are responsible for most of the social stimulation that a child receives. Thus, language development is directly correlated to the caregiver-child interaction and relationship. As a result, how parents interact with their children lays a critical foundation impacting the way the children process future information many years down the road. This study displays a clear correlation between the conversation styles of parents and the resulting speech of their children.

Children who are exposed to fewer words during the first three years of life results in a 30 million word difference by the time they are four which has a significant implication to their future success. The established connection between what a parent says and what a child learns has more severe implications than previously anticipated. Though Hart and Risley are quick to indicate that each child received no shortage of love and care, the difference in communication styles are of far greater consequence than any parent could imagine. *The resulting disparities in vocabulary growth and language development are the great concern and prove the home does truly hold the key to early childhood success.*



taken from:

Hart, B. & Risley, T.R. "The Early Catastrophe: The 30 Million Word Gap by Age 3" (2003, spring). American Educator, pp.4-9.

Hart, B., & Risley, T. R. (1995). Meaningful differences in the everyday experiences of young American children. Baltimore, MD: Paul H. Brookes Publishing Co.

### LYRA'S STORY

"We were fortunate that Lyra was diagnosed so early. She has had regular visits to her pediatric ophthalmologist since birth. At 3 months, her nystagmus, strabismus and photophobia were the primary issues. We were told she would eventually need strabismus surgery, but how soon, we did not know. Dr. Grin said Lyra was beginning to show a little bit of farsightedness, but not enough to warrant glasses.

Lyra had her functional vision evaluation through Early Intervention Services when she was 10 weeks old. By 4 months we had completed her IFSP and Lyra began receiving services at home with a teacher of the visually impaired and an occupational therapist once a week. Through her EI, we were able to find out about a lot of great toys and books that would help promote her vision development. It's all about high contrast, lights, and textures. In addition to working on her vision and motor skills, we also began prebraille activities. We read books, encouraging tactile exploration of the various textures of touch & feel books. Troy and I have started learning the basics of Braille, but we haven't moved any further than our ABC's. This is definitely something we plan to continue with Lyra and for us.

## EARLY INTERVENTION SUCCESS STORY

# RESEARCH CONTINUED...

## "A CHILD'S EARLY EXPERIENCE IS THE KEY DRIVER FOR LANGUAGE AND COGNITIVE DEVELOPMENT"

Based on the Hart & Risley landmark study, the LENA Foundation has continued this research. To date the LENA Foundation has found the following Key talking points:

- Parents of advanced children spoke substantially more to those children than did parents of children who were not as advanced
- Parents estimated that they talked more with their children than they actually did.
- Most language training for children came from mothers, with mothers accounting for 75 percent of total talk in the child's environment.
- Mothers talked roughly 9 percent more to their daughters than to their sons.
- Parents talked more to their first-born than to their other children, particularly first-born males.
- Most adult talk in the child's environment occurred in the late afternoon and early evening compared to other times of day.
- Children of talkative parents were also talkative.
- Although the average daily talk for parents who graduated from college was higher than for all other parents, the average daily talk for the upper 50 percent of parents who did not complete high school was significantly higher than that of the lower 50 percent of parents who graduated from college.
- The more television time in a child's day, the lower his or her language ability scores tended to be.
- Monolingual Spanish-speaking families were similar to English-speaking families with respect to patterns of adult talk.
- Parents of children with autism tended to talk less the more severe their child's symptoms were. Conversely, the stronger their child's language abilities, the more they talked.
- Parents are quite variable in the day to day amount they talk to their children, but given the opportunity to receive feedback they are able to increase the amount of talk consistently.

Hart, B. & Risley, T.R. "The Early Catastrophe: The 30 Million Word Gap by Age 3" (2003, spring). American Educator, pp.4-9.



P.O. Box 471 Manhattan, KS 66505  
Office: 785-776-6363 Fax: 785-371-9003  
[www.infant-toddler.org](http://www.infant-toddler.org)

# CALENDAR

## OCTOBER 1-31

Lazy T Ranch Corn Maze Open weekly Wed-Sunday 10 am-6 pm

## OCTOBER 4, 2020

Downtown Art & Architectural Scavenger Hunt from 10 am-7 pm

6th Annual Little Apple Duck Dash from 1-4 pm at Cico Park

## OCTOBER 14-18, 2020

Dino Dig Craft Giveaway from 10 am-7 pm at the library

## OCTOBER 15, 2020

Early Learning Community Screening from 4 pm-6 pm at Theodore Roosevelt Elementary

## OCTOBER 24, 2020

SPOOKtacular at Sunset Zoo from 12:00 pm-4:30 pm

## OCTOBER 24, 2020

Kids Studio: Trunk or Treat at Midwest Dream Car Collection from 5:00 pm-7:00 pm



# DID YOU KNOW...

Children enrolled in early intervention programs by 6 months of age did better on measures of language (signed or spoken) and social-emotional development than later-identified peers regardless of their gender, ethnicity, socioeconomic status, communication modality, hearing levels, and/or presence of multiple disabilities.