Fall, 2022

The Spotlight Infant Toddler Services of Riley County

CDC REVAMPED GUIDELINES A CLOSER LOOK AT THE NEW CDC GUIDELINES

Early this year, CDC rolled out new milestone surveillance checklists. The CDC Developmental Surveillance Milestones Checklists are designed to be used as a public health tool, not as a screening. The goal is to provide guidance to parents, childcare providers and doctors on when to seek a screening, evaluation or to make a referral to an appropriate developmental specialist.

Act Early and Refer to Infant Toddler Services

The CDC wanted to make these revisions in order to align milestones

WELCOME TO OUR TEAM! Alex Young, OT/L



How long have you worked as a pediatric Occupational Therapist?

I have been a pediatric occupational therapist for 9 years. I have always wanted to work with children in some capacity since I was a little girl.

What drew you to infant toddler services?

I am very drawn to and excited about the philosophy of Infant Toddler Services; which is to build partnerships with the families and the focus of services being on the priorities and needs of the family.

Where did you go to school?

I am a Jayhawk through and through, I got my undergraduate degree in 2012 and my graduate degree 2014 from University of Kansas? Rock Chalk!

What do you do in your spare time?

I enjoy spending time with my 2 daughters and watching them participate their activities. I adore going out to dinner with friends, Mexican food is my favorite! I love watching College basketball and football, of course I cheer for the Kansas Jayhawks and, Ohio State Buckeyes (because of my dad) with the recommended well-child visits, reduce the "wait & see" approach to referrals, and to make the milestones more parent friendly, eliminating vague terms.

The decision to adjust the milestones from 50% to 75% of



expected milestones within a certain age range helps to eliminate the "warning signs" at a given age. As a result, it reduces the use of the "wait & see" approach and increases early screening and evaluation referrals. The new checklists ensure screening and referrals are made immediately due to any missed milestone on the checklist. Listing the developmental expectations to the 25th percentile instead of the 50th percentile will help increase screenings and referrals to early intervention programs.

Despite that attempts to help identify delays sooner, experts and organizations are raising some concerns. The American Speech & Hearing Association (ASHA) recognizes that the checklists can be useful in conjunction with other clinical tools to facilitate early intervention. However, ASHA has concerns that some changes in the milestones will delay or inhibit early referrals to early intervention services. Some of these notable concerns include:

• Some of the milestones not lining up with what the 25th percentile looks like in the data.

• One third of the retained milestones were transferred to different ages, 67.7% of those transferred were moved to older ages.



• Some of the data used is outdated, limited and/or incorrectly cited from the sources.

The CDC Developmental Surveillance Guidelines should be used as a means to start conversations about developmental concerns. If parents express concerns, the recommended practice is to refer to early intervention services immediately.

Moving Connections

Infants and toddlers don't slow down. It is in their nature to move. They are continuously seeking out new experiences with their bodies, making important learning connections. They use their large movement skills to reach, crawl, scoot, cruise, walk, dance and run. They use their small movement skills to move their fingers and toes, grasp and hold objects, and move their lips and tongue.

A parent may feel that their child is not following the natural motor progression they think their child should follow. When this happens, they may contact early intervention services or their doctor will make a referral to early intervention. Every child follows their own developmental timeline in meeting specific milestones. But every child follows key motor development progress. These key motor progression included:

• Motor Development starts at the head and moves to the toes. Newborns do not have head control. They must first develop the ability to hold their heads up and look around. Trunk control comes next. As they build strength in their arms and trunk they will learn to roll and sit up. As their trunk strength increases, this helps build more control in their legs in order to help them pull to stand, cruise and walk. Motor development is first general and then becomes specific. Infants will start to move their body in no specific direction, accidentally swiping at the



mobile or object of interest. As they gain more control of their muscles and body movements, infants will take specific swiping movements at the toys and objects of interest. This learning demonstrates the connection between motor and cognitive development. With continued practice, their movements will become more and more controlled

and specific.

MOVING TO LEARN

You can support your baby's motor learning by understanding the natural progression of motor development and providing opportunities in your daily routines to support your baby's movement. Set up an activity

and watch what your child does. Infant Toddler Services Providers can partner with you to find creative fun ways to support your baby's motor growth.





• Motor development starts from the center of the body and moves outward. Newborns start out unable to control their movements due to early reflexes. These reflexes disappear when kids begin to have more ability to move their arms and legs intentionally. Their arms and legs or large muscle movements will evolve first followed by their small muscles, hands, feet, and mouth.

INTERVENTION EVERYDAY WHY ROUTINES ARE IMPORTANT FOR INFANTS

Everyday routines provide rich opportunities for infants and toddlers to learn and practice key milestones that are needed for the progression of development. Every child experiences routines in different ways. However, all routines are a significant part of development and learning. Since infants and toddlers are contextual learners, using daily routines as a means for multiple practice opportunities is considered the most effective way for early intervention success.

Routines such as eating, bathing, free playing, reading books and dressing provide multiple practice opportunities for young children. Early

"MOST OF WHAT CHILDREN NEED TO LEARN DURING THEIR EARLY CHILDHOOD YEARS CANNOT BE TAUGHT: IT'S DISCOVERED THROUGH PLAY." RUTH WILSON

intervention services help support parents by facilitating skill development within the daily routines of the child. The Early intervention provider will partner with the parent and explore what routines are important to their family and coordinate with them to ensure the routines are supporting their goals for their child and



their child's strengths, needs and interest. Infants and toddlers need consistent and regular opportunities to practice newly learned skills, the 1 hour early intervention session does not give the child enough practice to fully learn the skills needed to progress to the next steps. Parents and other care providers who spend the most time with the child has opportunity to encourage practice while engaging in their every activities. The early intervention provider will support the parent by finding the strategies necessary to support the child in the unique routines to encourage the child to practice.

If a parent wants to help support their infant to roll so he can be more independent and access toys that are out of reach, the provider and parent will identify several routines that can be used for multiple practices throughout the day. In the early intervention session, the provider and parent will discuss techniques and strategies to help support the process of learning to roll.

The provider will model these support strategies and the parent will practice these strategies. The early intervention provider and parent will outline what strategies can be used during each of the identified routines. For example, Diaper changes and dressing allows for the infant have multiple opportunities to practice rolling within a fun meaningful context. With the strategies and techniques that were practiced during the session, the parent can embed the learned strategies and techniques to support their child's progression to the next motor steps. This approach not only supports the parent and child relationship that is needed for early learning but also helps to build the parents' competence and confidence in supporting their child.



EARLY INTERVENTION DAILY

Putting early intervention motor practice in your daily activities is simple. The early intervention provider and family will have discussions on why developmental steps are important and what strategies can be used to help with the progression of development. But what does it look like in the daily activities of the family. Let's walk through how to address grasping practice in your daily life.

BATH TIME: Provider sponges, washcloths, small plastic bottles and floating toys for your baby to reach and grasp.





Diapering & Dressing: While changing your baby's diaper or clothes, have him reach for your hands, a diaper or a toy.

Mealtimes/Snack Time: Help your baby hold your finger or hold the bottle when eating. If sitting in on your lap or in a highchair, place soft pieces of food on her tray.





Playtime: Provide a variety of lightweight rattles and rings and progress to heavier and more variety of shapes





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WEHAVEMOVED! TO 1700LEAVENWORTH...

It has been a very busy and exciting summer for Infant Toddler Services of Riley County. USD 383 has completed

the early learning building projects. As a result, we have a new home at Eugene Field Early Learning



Learning Center. The new location will allow us to work closely with the preschool staff, access more resources for our early intervention families, and give providers opportunity to be active members of the education community. We love our new location and have already had positive experiences.



In a meta-analysis by Roberts & Curtis et al. (2019) found that children whose parents/caregivers were coached to use language facilitation strategies made more progress than children whose parents/caregivers were not taught these strategies.

Roberts, M.Y., Curtis*, P.R., Sone*, B.J., Hampton, L.H. (2019). Association of parent training with child language development: A systematic review and meta-analysis. JAMA Pediatrics. https://doi.org/10.1001/jamapediatrics.2019.1197