COUNTY OF SAN BERNARDINO PRESCHOOL SERVICES DEPARTMENT

PREVENTION AND EARLY INTERVENTION DEVELOPMENT OF SELF REGULATION SKILLS CHILDREN AGES 2-5 YEARS IN PRESCHOOL

2013-2014

Acknowledgments

Message to the Reader

For too long many in and out of the education system have cried "our educational system is broken and needs fixed. The educational system is not graduating a reasonable number of High School students. The High School drop-out rate is too high."

All of these statements are to various degrees correct. During April of 2014 San Bernardino County Superintendent of Schools Gary Thomas is quoted as saying in a press release that 78.3 percent of the students who started high school in 2009-10 school year graduated with their peers in 2013, up 1.1 percent over the previous year. Mr. Thomas states "the trends are certainly positive, but there remains "plenty of work to do" in the classroom and at our schools to make County students college and career ready". California State Superintendent of Public Instruction Tom Torlakson announced High School graduation rates for the 2013 class State-wide to be 80.2 percent. Mr. Torlakson states "for the first time in our State's history, more than 80 of our students are graduating- a clear sign of their hard work and the support they receive from their teachers, families, and communities".

"Plenty of work yet to do". When I attended high school in San Bernardino County 78.3 percent was a "C" grade. In the United States, California was quoted on December 27, 2012 by "The Business Journals On Numbers" as ranking 49th amongst all States in the United States. The Journal comparisons involved the graduation rates for high schools and colleges encompassing all adults who were currently 25 years of age or older. California was quoted at 80.8% based on adults 25 years of age or older as having graduated from high school. Wyoming ranked first with 91.9% of their adults 25 years or older having graduated from high school.

I believe and suggest that our States education system within our classroom walls is NOT BROKEN but in fact very effective as a teaching environment for those students that are ready to receive an education. The part of our State and County education system that is not functioning effectively is the student and family educational support systems outside of the formal classroom walls. Doug McIntyre at KABC recently stated while discussing poverty that "People end up in poverty for many reasons, low paying jobs are the symptom. The big three

reasons for poverty include number one - dropping out of high school. Avoid this blunder and you have an excellent chance of doing well in life". We are generally not providing our students and families the social-emotional developmental skill sets needed to be prepared and ready to focus and receive educational instruction. Any K-6 teacher I have ever spoken with says and knows the students that are not successful in their classrooms are "distracted" students.

If learning to read by third grade is a key educational goal leading to a high school diploma then I believe our formal classroom environment is and has been for a long time proven to be successful with students that are "prepared and ready" to learn. The challenge is with the students that enter the classroom environment and are NOT prepared ready to learn. Most of our classrooms today are meant to deal with formal educational instruction, not school readiness is the non-traditional sense.

Our communities and education system cannot continue to first and primarily focus on math, science, and literacy skills without formally teaching positive social-emotional skills that will enable students and adults to not only learn in our classrooms and graduate but more importantly function successfully in our social setting of our communities. When a young student learns constructive methods to use when dealing with strong emotional social environments this student functions in social environments in a positive manner not negative manner as they grow into adulthood. Currently too many of the Cities in our County are experiencing high crime rates in murder, assault, other crimes involving emotional stimulus as a result of safer public environments. If our students learn positive social-emotional skills not only will they enter classrooms ready to receive educational instruction and graduate but their quality of life and the Counties quality of life will greatly improve as a result of safer public environments. A great deal of this social-emotional education and teaching will happen outside of our formal classroom walls and within the students' family via educational support services. 78.3% of our students receiving a high school diploma ranks us 49th in our Nation. Now is the time to engage strong educational support systems that will complement our current strong classroom educational environment and bring San Bernardino County to our goal of at least 90% of our students earning a high school diploma.

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Introduction

The County of San Bernardino Preschool Services Department (PSD) was experiencing an increase in the number of "Type A" violations being issued by Community Care Licensing (CCL) related to activities in the Agency's classrooms during the late 1990's. The great majority of the violations cited children's behavior related to lack of self-regulation. PSD decided to implement a Department-wide social-emotional curriculum. PSD applied and recieved a grant funded through the County Department of Behavioral Health being funded through the Mental Health Act and proposition 63 for Prevention and Early Intervention (PEI).

Currently much research is being conducted regarding preschool aged children in preschool environments. Preschool providers need to understand not only what self-regulation is but also how to help preschool children develop effective self-regulation skills through every day experiences. Preschool providers also should understand how effective self-regulation will impact cognitive and social-emotional development and that effective development of these skills will impact their social and academic success later in life as adults.

 A child's ability to learn depends on how well the child masters the skill of self-regulation. Postner and Rothbart (2006), show that there is a sensitive period, when self-regulation can be enhanced, between the ages of three to five. During this time, the area of the brain that supports the development of self-regulation, experiences a major growth spurt. While self-regulation continues to develop into adulthood, having acquired age appropriate self-regulation by the time a child enters formal schooling, will benefit the child's trajectory. Following directions, staying on task, and managing motions and social situations will allow the child to focus on receiving educational instruction (Beststart Meilleur Depart "School Readiness Through Play" 2011).

Self-regulation should not be confused with obedience or compliance. Self-regulation is the ability to manage emotions, control behaviors, and focus attention (University of Virginia "Children's Engagement Self-Regulation", 2013). Self-regulation is not a skill that develops in isolation and requires intentional planning on the part of preschool teachers and care providers (Bodrova & Leong 2007).   Self-regulation skills develop gradually, so it is important that adults hold developmentally appropriate expectations for children's behavior (John-Steiner & Mahn, 1996). Children learn to regulate thoughts, feelings, behavior, and emotion by watching and responding to adult's self-regulation. Children's inability to adequately self-regulate in a classroom environment has been shown to be impacting as much as 70% of teacher's time in K-6 classrooms. Children that do not learn effective self-regulation skills are more likely to drop out of school prior to completing high school. A growing number of studies are showing that

self-regulation skills are highly teachable when appropriate intervention teaching strategies are used amongst preschoolers (Pino-Pastermak & Whitebread 2010).)

In a recent article, Paul C. Granillo, President and CEO of the Inland Empire Economic Partnership, talked about the issue of poverty in San Bernardino County. He talks about "two Californias" were lingering hardship exists down the street from prosperity(Inland Valley Daily Bulletin, Commentary 7/14). He states that in 1990 the population in the Inland Empire was 2.5 million and the poverty rate was 11.8% or 306,417 people. In 2012, the population increased to 4.3 million and the poverty rate increased dramatically to 19% or 809,000 people.

San Bernardino City had a poverty rate of 34.6% in 2012 making this city the second poorest city in the state of California. Just down the road is Rancho Cucamonga with a poverty rate of 5.8% and Chino Hills with a poverty rate of 6.3%. Gregory Bradbard, CEO of Inland Empire United Way, states that one out of every four children in the Inland Empire live in poverty. The issues that lead to high levels of poverty are low education attainment levels and the related limited job market for marginally educated workers in often minimum wage jobs. The beginnings of a low level of education are at the ages of 0-5 years when the child does not acquire effective self-regulation skills and thus does not effectively learn to manage their emotional and cognitive development. Figure 1 indicates a correlation between educational achievement, API scores, family income, crimes commonly associated with personal self-regulation, and poverty. This data demonstrates that poverty and prosperity exists side-by-side in San Bernardino County. The data demonstrates that the difference exists in the strong correlation between poverty and the lack of personal self-regulation skills that most likely were not developed early in life (as young as 0-5 years of age). Without the ability to self-regulate, a child is not attentive to educational instruction, acquires marginal education levels, and results in marginal employment skills that lead to poverty.

Figure 1

	API Scores	High School Grad	B.A. Degree or above	Median Family Income	Murder Per 100,000	Assault Per 100,000	Rape Per 100,000	Poverty Rate
Rancho Cucamonga	890	90.2%	29.7%	$77,329	1.8	111.2	14.63	5.8%
Chino Hills	820	92.3%	43.0%	$97,065	1.3	121.7	9.16	6.3%
San Bernardino City	729	67.9%	11.8%	$39,097	23	507.6	24.96	34.6%

(2008-2012 US Department of Census Quickfacts / Area Connect Crime Comparisons)

Background

During the 2013-2014 program year, San Bernardino Country Preschool Services Department (PSD), Fontana Unified School District (FUSD), and San Bernardino County Superintendent of Schools State Preschool (SBCSPP) had 359 children ages 2-5 enrolled in their preschool classrooms that were experiencing severe lack of self-regulation behaviors. 95% of these children were in families living at or below the Federal poverty income levels. 52% were male and 48% were female. 62% were Hispanic and 48% were of Non-Hispanic/Latino ethnic origin (with 16% indicating Black or African American race, 2% Asian race, 26% White race. 49% single parent households, 47% were from two parent households. 4% were foster children, and 2% were with homeless families. 73% of families primary language at was English, 24% Spanish, 3% other languages including Middle Eastern and Asian languages. 49% of the families had no parent was employed. 42% of the parents did not graduate from high school, 25% had a high school diploma or GED, 29% had an associate degree or some college, and 4% had a Baccalaureate degree or above.

The teachers and/or care providers had requested additional support services for these children in addition to the regular teacher classroom interventions. Prior to requesting additional support services the teachers of these children often had already removed the child from the classroom on at least one occasion as a result of behavior that was deemed a danger to themselves or other children in the classroom. This "dangerous behavior" included hitting, kicking, biting other children and adults, spitting on other children and adults, screaming and throwing objects at other children and adults. All children had demonstrated in inability to interact with other children and/or adults in a positive manner. Some children would not speak in class and attempt to isolate themselves from others. Occasionally the referred child had attempted to injury siblings at home or hurt pets at home. Many of these children had experienced severe trauma or loss at home including witnessing family murders, assaults, and spousal abuse. Most referred cases involved parents and/or care providers that did not demonstrate effective parenting skills and were often "overwhelmed" by the challenges of living in poverty and toxic environments with violence and lack of healthy personal support systems. All referred children lacked significant age appropriate levels of self-emotional development.

Of the 359 children experiencing severe lack of social-emotional development skills including self-regulations skills a Desired Results Developmental Profile (DRDP-PS) was administered focusing on the Social-Emotional domain and the 12 Measures. Of the 303 children that completed the pre and post DRDP-PS Figure 2 shows percentage of these children scoring very low in each of the 12 social-emotions measures.

Figure 2

Desired Results Developmental Profile Social-Emotion Domain

Measures	% of children identified
1. Identity of Self	3%
2. Recognizes Skills and Accomplishments	2%
3. Expressions of Empathy	5%
4. Impulse Control	29%
5. Taking Turns	8%
6. Aware of Diversity in Self and Others	3%
7. Relationships with Adults	17%
8. Cooperative play with Peers	12%
9. Social-Dramatic Play	1%
10. Friendships with Peers	2%
11. Conflict Negotiation	16%
12. Shared use of Space and Materials	3 %

The above data shows a clear pattern of skill sets that are critical as an adult. The behaviors center around a child's emotion and cognitive development that will in an educational setting interfere with the child's ability to focus on classroom educational activities. If the child does not learn to cognitively control their emotions the child will not develop the ability to make positive and effective behavior choices as an adult.

Goals and Objectives

Program Goals

1. Teach classroom staff and parents/care providers to understand and support effective social-emotion development of children in preschool environments.
2. Address bereavement and loss
3. Recognizing potential mental health issues
4. Utilizing preschool centered interventions with mental health professionals and education professionals when appropriate
5. Demonstrate measurable improvement in social-emotional development of preschool aged children

Program Objectives

1. Provide teachers management training via Incredible Years Curriculum

2. Provide families parent training via Incredible Years Curriculum

3. Identify children in classrooms with aggressive behavior and utilize Incredible

    Years intervention techniques

4. Provide children and families with bereavement support

5. Provide families with free or low cost services to the child and/ or family

PROGRAM METHODOLOGY

Currently PSD implements a systematic data collection process using the following nationally standardized and recognized evaluation tools:

1) Early Childhood Environmental Rating Scales (ECERS):   Used to evaluate the classroom environment and potential effect on the child's ability a self-regulate (Figure 4)
2) Classroom Assessment Scoring System (CLASS):   Used to evaluate the teacher/child interactions and the potential impact this has on the child's ability to self-regulate (Figure 5).
3) Ages & Stages Questionaire – Social Emotional (ASQ):   Used to involve and assist in helping the parent understand the needs of the child (Figure 6)*.*
4) Desired Results Developmental Profile (DRDP):   Used to objectively identify areas of need for intervention (Figure 7).
5) Individual Child/Family Plan: Used to formally establish an intervention plan that is agreed upon by the PSD Behavioral Specialist or MFT Intern, child's parent, and classroom teaching staff (Figure 8).

PSD PEI services focus on social-emotional development. Therefore, PSD identified "Incredible Years" as the curriculum and training program to be implemented.

A team of PSD staff and community partners formed an Interdisciplinary team (IDT) that meets weekly to case manage direct services to children and families of preschool children with identified challenging classroom behaviors. This team consists of: Licensed Psychologists, MFT Interns, Behavioral Health Specialists, Education Specialists, Speech Therapist, Registered Nurses, Disability Coordinator, Registered Dietician, Management/Supervisor Staff, and community State Preschool Partners (Fontana USD, San Bernardino County State Preschool, Volunteers of America). This team receives all social-emotion related referrals submitted by staff and families for children enrolled in participating team members Agencies.

The first steps involve Education Specialists completing classroom observations using the ECERS and CLASS to evaluate any potential environmental or adult/child classroom interactions that are contributing to a child's social-emotional challenges. If any classroom environmental or negative adult initiated child interactions are occurring training is provided. Once the above areas have been addressed and the child's social-emotional challenge continues the DRDP is completed for thee child. The Social-Emotional Domain is used to identify any of the specific 12 measures that show low levels of development. Using this data a child-family intervention plan is developed with specific goals (DRDP

Measures specific) and strategies (implementing Incredible Years techniques). These goals and strategies are reached by parent/teacher/IDT consensus. Implementation involves active participation by teacher and parent with mentoring from the appropriate IDT Specialist.

Trauma, Loss, and Compassion

Children experiencing significant trauma or loss events are provided with a ten week program involving 60 minute weekly sessions. Each session is centered around a specific subject (Figure 3) and this group of 5-7 children have an opportunity to learn to express themselves in positive manners. Two facilitators provide the Trauma, Loss, and Compassion (TLC) sessions and a separate set of sessions are offered to the parents/ guardians of these children.

Families participating in this TLC program were offered additional support services provided by MaDA (Making a Difference Association). See results below:

To ensure that MaDA has an accurate portrait of the behaviors, attitudes and skills of both parents and children, MaDA chooses to use two key evaluation tools: The Life Skill Progression - LSP (scored by the Family Support Partner) and FRIENDS (scored by the parent), Family Support Program Outcome evaluation tool. Each tool was chosen for its effectiveness and reliability in measuring outcomes for home visiting programs like MaDA's Family Support Partners (FSP) Program.

During the 2013-2014 contract year, MADA's TLC FSP program has offered to provide services for 21 clients. Preliminary Findings for the 2013-2014 year are as follows:

- *21 families referred*
- *5 never opened/refused services*
- *19 families received services (this includes families that continued to receive services from the 2012-2013 year)*
- *Aggregate data:*

This year's (2013-2014) Pre LSP average: 72.39 *Post LSP average: 92.55   Difference: 20.16*
Last year's (2012-2013) Pre LSP average: 63.31 *Post LSP average: 81.88   Difference: 18.57*

This year's (2013-2014) PreFRIENDS average: 24.78
Last year's (2012-2013) PreFRIENDS average: 21.29

PostFRIENDS average: 44   Difference: 19.22
PostFRIENDS average: 36.24   Difference: 14.95

LSP results:
- *Most improved scores (highest ranking first) were found in the following areas:*
    - o *Discipline*
    - o *Use of resources*
    - o *Self-esteem*
    - o *Nurturing of their child*
    - o *Relationship with home visitor* o
        Transportation

- *Least improved scores were found in the following areas:*
    - o *Relationships (with friends/peers)*
    - o *Employment*
    - o *Financial (children's dental care, medical insurance, food/nutrition)*

Friends results:

- *Highest score improved as determined by pre-post scores:*
    - o *Having relationships with people who provide me with support when I need it*
    - o *knowing how to meet family's needs with existing money/resources*
    - o *having someone to talk to when worried about child(ren).*

- *Parents strongly agreed with the following statements, highest ranking fust:*
    - o *I feel that the program staff respects me.*
    - o *My ideas and opinions are welcomed and included in the program.*
    - o *This program is helping me reach my goals for my family and me.*

- *The weakest area ranked in the Friends Survey suggested that parents need more opportunities to reduce the stress in their lives.*

Comments:
Note: All comments are written as recorded as they were written.
- *I like the support I received by my Family Support Partner.*
- *There is respect*
- *She alway keep me going until completed my goal.*
- *Any goals or idea I have wt:rt: lakt:n with much consideration.*

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- *If it wasend for Make A Difference/TLC I do not know where I been.*
- *Que siempre estan dispuestos a ayudarme se comunincan con migo cuando los nesesito y por ellos he encontrado amor, sinceridad, onestidad, y que dios siempre esta con rnis nenos y me familia en general. (That they are always willing to help me, they communicate with me when I need them, I have found in them love, sincerity, honesty and that God is always with my children and my family in general.)*

Additional Summary Information:
- *The average client case during the 2013-2014 year was open for 4.87 months compared to 3.3 months from last year (2012-2013). This year's increase in length of time spent serving each family is presumed to be due to the higher level of need. TLC's Family Support Partner's services provided more intensive services such as modeling, mentoring and skills building.*
- *Supportive listening and referrals to resources were offered to every family.*
- *Multiple resources were given per family. These resources were requested by the family to aid in the completion of their individual goals. Below is a list of the resources, ranked in order of the most commonly requested:*
    - *Children's behavioral services (SART/IRC/TBS)*
    - *Adult mental health services (Support groups & counseling)*
    - *Housing*
    - *Adult continuing education (GED, College, etc.)*
    - *Financial assistance (gas cards, children's fund and utility) legal services*
    - *Employment resources*

Figure 3

Session Number	Session Name
One	Introduction to TLC
Two	Building Self-Esteem in Your Child
Three	Building Friendships
Four	What Makes a Family
Five	What are Feelings
Six	Anger Management
Seven	Calming Anxiety & Stress
Eight	Imagination and Play
Nine	Handling Transitions
Ten	Saying Good-Bye

ECERS-R

ECERS-R is a rating system that incorporates physical space, provisions for indoor and outdoor activities, scheduling, hygiene, opportunities for professional development, and teacher-child interactions into a broad definition of effectiveness. PSD uses ECERS-R in the preschool setting and ITERS-R when working with infants and toddlers. PSD primarily uses ECERS-R as part of our data gathering and analysis process with referred children. Before child intervention can be established we need to establish "to what degree if any, the broad scoping physical environment is effecting the child's social-emotional development.

ECERS consists of 43 items organized into 7 subscales:

- Space and furnishings
- Personal care routines
- Language-reasoning
- Activities
- Interactions
- Program structure
- Parents and staff

In order to support constructive social-emotional development the environment must provide three basic needs for children:

- Protection of their health and safety
- Building positive relationships
- Opportunities for stimulation and learning from experience

The FPG Child Development Institute of the University of North Carolina at Chapel Hill states: "Process quality consists of the various interactions that go on in a classroom between staff and children, staff, parents, and other adults, among the children themselves, and the interactions children have with the many materials and activities in the environment, as well as those features, such as space, schedule and materials, that support these interactions. Process quality is assessed primarily through observation and has been found to be more predictive of child outcomes than structural indicators such as staff to child ratio, group size, cost of care, and even type of care, for example child care center or family child care center."

Below is an example of how PSD is using ECERS-R to assess and develop goals to improve the broad scoping classroom environment in order to increase the child's opportunity to better develop more effective social-emotional skills.

Figure 4

	Approaches to Learning M-31 Engagement and persistence: **Utilize DRDP-R, CLASS, High Scope and ECER's** train teaching staff how to use levels of materials in the classroom to support challenging or difficult activities, support children's ability to reason logically or use strategies to solve problems.	In-Service March 2012 On-going cluster trainings in Regions Education Teacher III's Managers	Completed March 16, 2012 On-going April 1 – June 30, 2012
Program Goal (What you want to accomplish.)	**Objectives** (How you will accomplish the goal.)	**Expected Completion Date and Persons Responsible**	**Follow-Up** (Changes made, date completed.)
ECER'S To bring the agency average score to a 5 or above in: **Subscale #6 for** Child related display	**Subscale #6 for** Child related display: **Utilize DRDP-R, CLASS, High Scope and ECER's** to train teaching staff the importance of child-related materials posted in the classroom, appropriate materials for age group represented, relationship to current classroom activities, and what two and three dimensional child created work definitions are	In-Service March 2012 On-going cluster trainings in Regions Education Teacher III's Managers Site Supervisors Lead Teachers	Completed March 16, 2012 On-going April 1 – June 30, 2012
Subscale #24 for Dramatic play	**Subscale #24 for Dramatic play: Utilize DRDP-R, CLASS, High Scope and ECER's** to train teaching staff the difference between some and many, dramatic play incorporates outdoors and indoors, use of different cultures, and space needed for dramatic play area that may be noisy and active.	In-Service March 2012 On-going cluster trainings in Regions Education Teacher III's Managers Site Supervisors Lead Teachers	Completed March 16, 2012 On-going April 1 – June 30, 2012
Subscale #25 for Nature/Science	**Subscale #25 for Nature/Science: Utilize DRDP-R, CLASS, High Scope and ECER's** to train teaching staff all the categories in nature and science, offering open-ended materials for different ages and abilities, length of accessibility, use of indoors and outdoors materials, and offering science and nature on the weekly lesson plan.	In-Service March 2012 On-going cluster trainings in Regions Education Teacher III's Managers Site Supervisors Lead Teachers	Completed March 16, 2012 On-going April 1 – June 30, 2012

CLASS (Classroom Assessment Scoring System)

CLASS (Classroom Assessment Scoring System) is the next tool PSD uses after assessing the impact the broad scoping environment may be having on a referred child's social-emotional development. Research has shown that the relationship between children and the teacher can be the single most important factor in a child's school experience. Thus, as part of PSD's assessment and data analysis, the effectiveness of child-teacher interaction is measured using CLASS. The CLASS measures teacher-child interactions in three domains: Emotional Support, Instructional Support, and Organizational Support. In the Pre-K environment the following dimensions of developmentally appropriate interactions are being evaluated:

- Positive climate

- Negative climate

- Teacher sensitivity

- Regard for student perspectives

- Behavior management

- Productivity

- Instructional learning formats

- Concept development

- Quality of feedback

- Language modeling

PSD recognizes that the classroom environment is complex and dynamic. Managing this environment requires providing teachers with a frame for working in the classroom. CLASS provides opportunities for the teacher impact child interactions and maximize learning opportunities for each child. Based on research from the University of Virgin's Curry School of Education and studies in thousands of classrooms the CLASS tool provides professional development for the teacher designed to:

- Focus on effective teaching

- Help teachers recognize and improve the power of their interaction

- Builds on the teachers strengths

Once the broad classroom environment (ERCERS-R) and teacher-child interactions (CLASS) have been assessed PSD has basic data to make a determination about how these issues are or are not part of the referred child's social-emotional developmental challenges. If either data from the ERCERS-R and/or CLASS identify the child is being negatively impacted by the general classroom environment including child-teacher interactions then appropriate training is provided to the teacher.

After the ECERS and CLASS assessments are gathered specific to a child referred for social-emotional development assistance and the Interdisciplinary Team (IDT) determines the basic classroom environment and teacher-child interactions are appropriate the Interdisciplinary Team will continue case management focusing on specific intervention strategies.

At this point in the data analysis if a determination has been reached that the child has social-emotional challenges that require additional intervention, the IDT assigns a lead case carrier that generally is the PSD Mental Health Specialist or MFT Intern that is also part of the IDT support staff.

This mental health professional will collect additional data. This data includes information obtained from discussions with the referred child's teacher, parent, as well as the mental health professional's own classroom observations.

Two additional assessments will be completed by the IDT staff.

Below is an example of the CLASS document.

Positive Climate

	Low (1,2)	Middle (3,4,5)	High (6,7)
Relationship - Physical proximity - Shared activities - Matched affect - Social conversation	There are few, if any indications that the teacher and students enjoy warm, supportive relationships with one another.	There are indications that the teacher and students enjoy warm, supportive relationships with one another	There are many indications that the teacher and students enjoy warm, supportive relationships with one another.
Positive Affect - Smiling - Laughter - Enthusiasm	There are no or few displays of positive affect by the teacher and/or students.	There are sometimes displays of positive affect by the teacher and/or students	There are frequent displays of positive affect by the teacher and/or students.
Positive Communication - Verbal affection - Physical affection - Positive expectations	There are rarely positive communications, verbal or physical, among teachers and students.	There are sometimes positive communications, verbal or physical, among teachers and students.	There are frequently positive communications, verbal or physical, among teachers and students.
Respect - Eye contact - Warm, calm voice - Respectful language - Cooperation and/or sharing	The teacher and students rarely, if ever, demonstrate respect for one another.	The teacher and students sometimes demonstrate respect for on another.	The teacher and students consistently demonstrate respect for one another.

Negative Climate

	Low (1,2)	Middle (3,4,5)	High (6,7)
Negative Affect - Irritability - Anger - Harsh voice - Peer aggression - Disconnected or escalating negativity	The teacher and students do not display strong negative affect and only rarely, if ever, display mild negativity.	The classroom is characterized by mild displays of irritability, anger, or other negative affect by the teacher and/or the students.	The classroom is characterized by consistent irritability, anger, or other negative affect by the teacher and/or the students.
Punitive Control - Yelling - Threats - Physical control - Harsh punishment	The teacher does not yell or make threats to establish control.	The teacher occasionally uses expressed negativity such as threats or yelling to establish control.	The teacher repeatedly yells at students or makes threats to establish control.
Sarcasm/Disrespect - Sarcastic voice/statement - Teasing - Humiliation	The teacher and students are not sarcastic or disrespectful	The teacher and/or students are occasionally sarcastic or disrespectful.	The teacher and/or students are repeatedly sarcastic or disrespectful.
Severe Negativity - Victimization - Bullying - Physical punishment	There are no instances of severe negativity between the teacher and students.	There are no instances of severe negativity between the teacher and students.	There are instances of severe negativity between the teacher and students or among the students.

ASQ-SE

The ASQ-SE is also administered by the parent and scored by IDT staff. The ASQ-SE is a very effective tool to use for parent engagement. A growing body of evidence suggests that habituated or ingrained social and emotional problems are highly resistant to change and indeed likely to intensify over time. Early indication of social-emotional developmental challenges in children is essential if we are to assist them in building their social-emotional competence and reduce the likelihood of placement in special education programs, residential treatment, or later incarceration.

The ASQ-SE was developed to provide information specifically addressing the social and behavioral behavior of children. This is a screening tool that identifies infants and young children whose social or emotional development requires further evaluation to determine if referral for intervention services is necessary. This tool's reading level is approximately fifth to sixth grade level. For parents who do not read English or Spanish the questionnaire can be used as an interview tool. The ASQ-SE questionnaire presents an opportunity to initiate a discussion with the parent about their child's social-emotional development, reflect back to the DRDP data, and begin to define social-emotional developmental goals. PSD's IDT staff has found that prevention and early intervention in the developmental area of a child's social-emotional skills are highly correlated to the parents understanding and skills.

The ASQ-SE can be used for children 6 months – 60 months of age. It is described as a "parent completed, child-monitoring system for social-emotional behaviors". This screening instrument screens:

- Self-regulation
- Compliance
- Communication
- Adaptive
- Functioning
- Autonomy
- Affect
- Interaction with people

See example of questionnaire and scoring interpretation below.

30 Month ASQ:SE Information Summary

CHECK IF THIS IS A CONCERN

Child's name: _____

Child's date of birth: _____

Person filling out the ASQ:SE: _____

Relationship to child: _____

Mailing address: _____

Telephone: _____

City: _____ State: _____ ZIP: _____

SCORING GUIDELINES

1. Make sure the parent has answered all questions and has checked the concern column as necessary. If all questions have been answered, go to Step 2. If not all questions have been answered, you should first try to contact the parent to obtain answers or, if necessary, calculate an average score (see pages 39 and 41 of *The ASQ:SE User's Guide*).

2. Review any parent comments. If there are no comments, go to Step 3. If a parent has written in a response, see the section titled "Parent Comments" on pages 39, 41, and 42 of *The ASQ:SE User's Guide* to determine if the response indicates a behavior that may be of concern.

3. Using the following point system:

Z (for zero) next to the checked box	= 0 points
V (for Roman numeral V) next to the checked box	= 5 points
X (for Roman numeral X) next to the checked box	= 10 points
Checked concern	= 5 points

Add together:

Total points on page 3	= _____
Total points on page 4	= _____
Total points on page 5	= _____
Total points on page 6	= _____
Child's total score =	_____

SCORE INTERPRETATION

1. *Review questionnaires*
   Review the parent's answers to questions. Give special consideration to any individual questions that score 10 or 15 points and any written or verbal comments that the parent shares. Offer guidance, support, and information to families, and refer if necessary, as indicated by score and referral considerations.

2. *Transfer child's total score*
   In the table below, enter the child's total score (transfer total score from above).

Questionnaire interval	Cutoff score	Child's ASQ:SE score
30 months	57	

3. *Referral criteria*
   Compare the child's total score with the cutoff in the table above. If the child's score falls above the cutoff and the factors in Step 4 have been considered, refer the child for a mental health evaluation.

4. *Referral considerations*
   It is always important to look at assessment information in the context of other factors influencing a child's life. Consider the following variables prior to making referrals for a mental health evaluation. Refer to pages 44–46 in *The ASQ:SE User's Guide* for additional guidance related to these factors and for suggestions for follow-up.

   - Setting/time factors
     (e.g., Is the child's behavior the same at home as at school?)
   - Development factors
     (e.g., Is the child's behavior related to a developmental stage or a developmental delay?)
   - Health factors
     (e.g., Is the child's behavior related to health or biological factors?)
   - Family/cultural factors
     (e.g., Is the child's behavior acceptable given cultural or family context?)

months

7

ASQ:SE **30 months**

DRDP-PS or IT

The DRDP-PS or IT tool will be administered and functions as baseline data. Based on the need for specific social-emotional intervention the Self and Social Development (SSD) Domain is used. The case carrier will determine specific child strengths and needs based on the 12 measures within the SSD.

The 12 SSD Measures include:

- Identity of self

- Recognition of own skills and accomplishments

- Expressions of empathy

- Impulse control

- Taking turns

- Awareness of diversity in self and others

- Relationships with adults

- Cooperative play with peers

- Socio-dramatic play

- Friendships with peers

- Conflict negotiation

- Shared use of space and materials

The DRDP is an assessment that documents the level of development on a continuum separately for each individual child. A teacher can use the DRDP to identify the level of development of each child and plan accordingly to support individual children's learning. Each of the above measures has four developmental levels:

- Exploring

- Developing

- Building

- Integrating

Each developmental level has a descriptor that describes observable child behaviors associated with that developmental level. Each descriptor is illustrated with several examples of behaviors that are consistent with that developmental level. Thus, parents and teachers can more readily identify where the child is functioning on the developmental continuum and jointly and objectively agree on the individual child's current social-emotional developmental level, the desired social-emotional related developmental goal based on the described continuum, and a strategies for reaching these goals. (See the "Measure 7: Relationships with Adults")

Figure 7

Individual Child/Family Plan

The **Individual Child/Family Plan** document is used to establish parent/teacher social-emotional goals, objectives, and strategies for helping the child reach these social-emotional developmental goals. The parent and child refer to the behavior(s) both agree are to be the most problematic area(s) of concern. The case carrier, parent, and teacher then refer to the measures within the DRDP Self and Social Development (SSD) and identify which measure(s) are most descriptive of the child's behavior. Next, the case carrier, parent, and teacher "match" the child's current behaviors within the agreed upon SSD measure to identify the child's current level of functioning (eg. exploring, developing, building, and integrating). The DRDP provides definitive behavior descriptions that can be understood and identified by the teacher and parent that clarify the current functioning level of the child as well as the next appropriate developmental step (DRDP Measure #7 Relationships with Adults). Using The Incredible Years Training strategies are set.

Individual Child/Family Plan

Preschool Services Department   *Figure 8*

Child's Name:	Site:
DOB:	Date of Enrollment:
Age:	Teacher:
Parent:	Site Supervisor:
Phone:	Support Staff:
PSD Specialist:	IEP: Yes____ No____

Define Current Most Problematic Area of Concern	Intensity	Frequency	In site/Home

Antecedents to behavior:
_____
_____
_____

Consequences of behavior:
_____
_____
_____

DRDP Domain:

1. Identity of self	5. Taking turns	9. Socio-dramatic play
2. Recognition of own skills and accomplishments	6. Awareness of diversity in self and others	10. Friendships with peers
3. Expressions of empathy	7. Relationships with adults	11. Conflict negotiation
4. Impulse control	8. Cooperative play with peers	12. Shared use of space and materials

DRDP   Domain
Goal:_____

Objective:
Child's behavioral outbursts as evidenced by_____will be: ____ Increased ____ Decreased,
from____ per day/week to ___ per day/week by _____ (Date).

Strategies:
_____
_____
_____
_____
_____
_____

* Two week revisit scheduled with teacher and parent on: _____

Parent/Guardian: _____

Teacher: _____

MFT Intern: _____

Clinical Supervisor: _____
Family Referrals

Referral Reason	Total
Family Health	449
Community Resources	315
Clothing	229
Food	28
Education	182
Employment	14
Housing	6
Child Care	6
Financial	8
Emergency Interventions (i.e. Food, Clothing, Shelter, etc.)	32
Housing/Shelter (Homeless)	2
Children's Fund Assistance Referral	5
Transportation	1

Outcome Data

The overall goal of intervention is to teach the child the necessary social-emotion skills that will enable the child to appropriately self-regulate in social settings. As indicated in the beginning of this report self-regulation is a process of learning to cognitively understand and direct your emotions in a social setting. This is inclusive of developing increasingly socially appropriate responses in a social setting. Using the DRDP PSD set goals and strategies to help the child move through the following four stages of social-emotional development in the 12 measures of the DRDP Social-Emotional Domain These four stages are: exploring, developing, building, and integrating as shown in Figure 8 –DRDP above. The following chart indicated the areas of greatest challenge for the 303 children that completed a pre/post DRDP.

	Impulse Control	Identity to Self	Expression of Empathy	Friendship with Peers	Shared Use of Space and Materials	Taking Turns	Conflict Negotiation 16	Recognition of Own Self and Acomplishments	Relatioships with Adults	Socio-Dramatic Play	Coop Play	
■ Percentage	29	3	5	2	3	8	16	2	17	1	12	
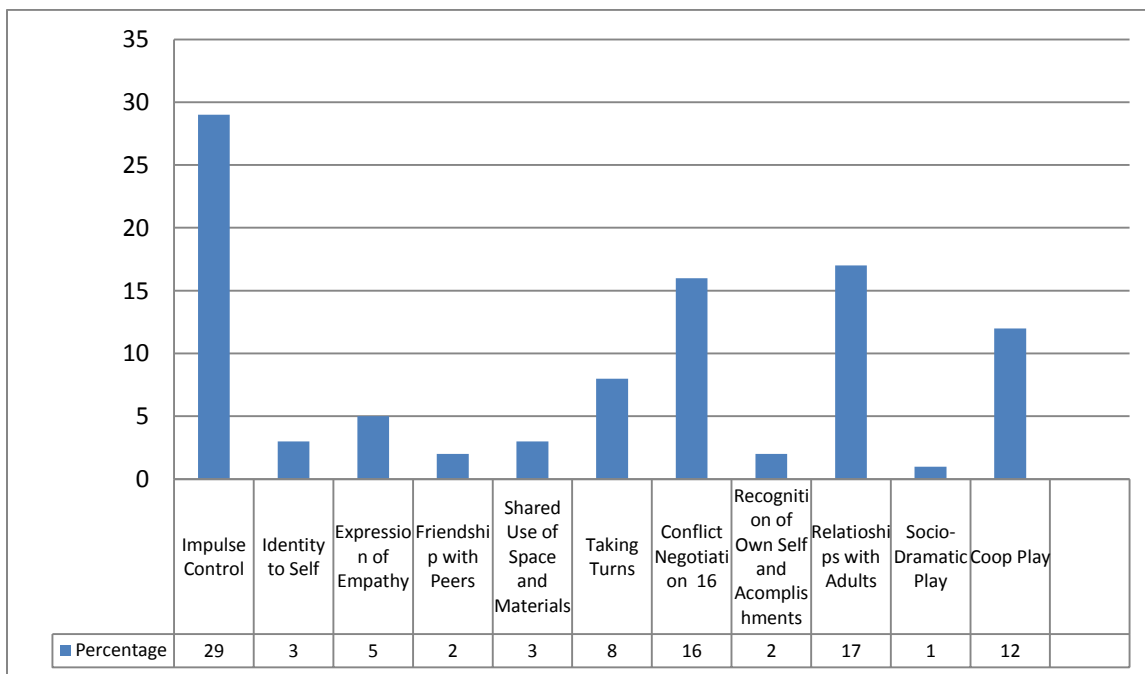
The following data represents the four DRDP Social-Emotional Measures that were most challenging for the children referred to the IDT members for intervention services via the PSD PEI program. PSD administers the DRDP on all enrolled children each program year (over 4000 children). Thus, this data shows pre and post scores for children enrolled in PSD via the blue color labeled "Agency Total" (over 4000 children) and the 303 children that were provided PEI services via the red color labeled "PEI Total". The 303 children that were provide PSD PEI services were children in the same classrooms with the same teachers as the "Agency Total" children. The 303 children provided intervention services by PSD PEI were children in the classrooms identified and referred to PSD PEI for services as a result of significant classroom behavior management challenges by the teaching staff.

In each of the Measures indicated below the PEI group pre assessments scores indicated the PEI group showing a greater percentage of the children at the initial Developing stage than the Agency group. This is expected because the children in the PEI group were referred for support service to the PSD IDT group as a result of classroom management challenges.

The post assessment scores shows the PEI group of children scoring higher scores or about equal in the Building stage than the Agency group.

Measure 4 - Impulse Control
Pre

	Not Yet At First Level	Exploring	Developing	Building	Integrating	Emerging	Unable To Rate	Yes	No
Agency Total	5.65%	57.46%	29.84%	4.74%	0.30%	0.30%	1.71%	0.00%	0.00%
PEI Total	9.44%	90.49%	7.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Measure 4 - Impulse Control
Post

	Not Yet At First Level	Exploring	Developing	Building	Integrating	Emerging	Unable To Rate	Yes	No
Agency Total	0.31%	13.79%	44.20%	34.17%	4.39%	2.51%	0.63%	0.00%	0.00%
PEI Total	0.00%	3.57%	52.57%	38.76%	5.10%	0.00%	0.00%	0.00%	0.00%

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Measure 7 - Relationships with Adults
Pre

	Not Yet At First Level	Exploring	Developing	Building	Integrating	Emerging	Unable To Rate	Yes	No
Agency Total	2.43%	51.51%	37.80%	6.35%	0.50%	0.40%	1.01%	0.00%	0.00%
PEI Total	6.34%	83.33%	5.41%	4.92%	0.00%	0.00%	0.00%	0.00%	0.00%

Measure 7 - Relationship with Adults
Post

	Not Yet At First Level	Exploring	Developing	Building	Integrating	Emerging	Unable To Rate	Yes	No
Agency Total	0.00%	8.15%	36.67%	41.07%	11.29%	2.51%	0.31%	0.00%	0.00%
PEI Total	0.00%	0.00%	44.43%	49.86%	5.71%	0.00%	0.00%	0.00%	0.00%

Measure 11 - Conflict Negotiation
Pre

	Not Yet At First Level	Exploring	Developing	Building	Integrating	Emerging	Unable To Rate	Yes	No
Agency Total	6.45%	64.82%	25.19%	1.92%	0.00%	0.21%	1.41%	0.00%	0.00%
PEI Total	5.88%	69.37%	24.75%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Measure 11 - Conflict Negotiation
Post

	Not Yet At First Level	Exploring	Developing	Building	Integrating	Emerging	Unable to Rate	Yes	No
Agency Total	0.31%	15.99%	50.47%	26.65%	3.13%	2.82%	0.63%	0.00%	0.00%
PEI Total	0.00%	0.00%	41.17%	55.62%	3.21%	0.00%	0.00%	0.00%	0.00%

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Measure 8 - Cooperative Play with Peers
Pre

	Not Yet At First Level	Exploring	Developing	Building	Integrating	Emerging	Unable To Rate	Yes	No
Agency Total	2.02%	50.91%	38.10%	6.96%	0.30%	0.40%	1.31%	0.02%	0.00%
PEI Total	0.00%	84.62%	10.17%	5.21%	0.00%	0.00%	0.00%	0.00%	3.23%

Measure 8 - Cooperative Play with Peers
Post

	Not Yet At First Level	Exploring	Developing	Building	Integrating	Emerging	Unable To Rate	Yes	No
Agency Total	0.00%	9.73%	36.36%	41.69%	9.09%	2.82%	0.31%	0.02%	0.00%
PEI Total	0.00%	0.00%	38.46%	53.85%	7.69%	0.00%	0.00%	0.00%	6.45%

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Next Steps

The above outcome data clearly shows that children 2-5 years of age that have not acquired the social-emotional skill sets needed to function successfully in a classroom environment can develop those needed skill sets. Poverty is often only a symptom of minimal job skills. Minimal job skills are often the results of students dropping out of school prior to completing high school or are not attending to educational instruction within the classroom environment. Students often are not actively participating in educational instruction within the classroom environment because the student has not yet acquired the social-emotional skills needed to successfully function in a classroom environment where social interaction skills are needed.

Many of the children involved in this PEI service delivery system were in fact children ages 2-5 that were already being sent home because they could not successfully function in a classroom environment. These children, without appropriate intervention, were at significant risk of not completing high school. Thus, not achieving job skills that would pay more than minimum wage. This path often results in families living in poverty. In addition, if an adult does not learn how to negotiate in a social setting, interact with peers in a positive manner, cooperate with peers, and control impulsive behavior the result often ends in behavior that involves law enforcement actions.

PSD has demonstrated that children ages 2-5 that are being sent home from classroom s because they are acting dangerously to themselves or others can learn appropriate social-emotional skill sets. These children will have a greatly improved chance to stay in classroom setting and complete their education.

Next steps is to increase the number of children being provided with this type of service by offering this information and technical support to other preschool providers.