Early Intervention
Student Internship Workbook

URI Early Intervention
Recruitment & Retention Grant
Transition Center, Room 205
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Kingston, RI 02881
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http://www.uri.edu/frp/ei.htm
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Section I: About Early Intervention
Early Intervention (EI) Recruitment and Retention activities are conducted through the Human Development and Family Studies Department at the University of Rhode Island. This project offers internship opportunities to students interested in pursuing a career in Early Intervention. The URI project is contracted by the Paul V. Sherlock Center on Disabilities.

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THE UNIVERSITY OF RHODE ISLAND
What are the purposes of Early Intervention?

- To enhance the development of infants and toddlers with disabilities

- To enhance the capacity of families to meet the special needs of infants and toddlers with disabilities
What is Early Intervention?
Early Intervention is a voluntary program that provides early identification, services, and supports to eligible children (from birth to three years old) and their families. The purpose of Early Intervention is to enable young children to be active and successful participants during their early childhood years and in the future. Interventions take place in a variety of settings, including a child’s home with their families, in child care, in preschool programs, and in the community.

The overall vision that we hope children and their families achieve as a result of Early Intervention is:

- Children have positive social relationships
- Children acquire and use knowledge and skills
- Children take appropriate actions to meet their needs
- Families understand their children’s strengths, abilities, and special needs
- Families understand their rights within the law and effectively communicate their children’s needs
- Families help their children develop and learn
- Families have adequate social support
- Families access services and activities that are available to all families in their community

Who is Eligible for EI?
Infants and toddlers from birth to age three
- Experiencing developmental delays,
- With certain diagnosed conditions, or
- Whose circumstances are likely to result in significant developmental problems.

A ‘developmental delay’ is when a child does not develop skills at the expected age. All children grow and learn at different rates, but most kids develop a basic set of skills by a certain age. Children who have developmental delays may have special challenges or conditions that need attention. The Early Intervention Program can help families learn how to best help their child.

For more information, contact:
RI Parent Information Network (RIPIN)
1210 Pontiac Avenue
Cranston, RI 02920
Web: http://www.ripin.org/
Phone: 1.800.464.3399
Family

We all come from families. Families are big, small, extended, nuclear, multi-generational, one parent, two parents, and grandparents. We live under one roof or many. A family can be as temporary as a few weeks, or as permanent as forever. We become part of a family by birth, adoption, marriage, or from a desire for mutual support. As family members, we nurture, protect, and influence one another. Families are dynamic and are cultures unto themselves, with different values and unique ways of realizing dreams. Together, our families become the source of our rich cultural heritage and spiritual diversity. Each family has strengths and qualities that flow from individual members and from the family as a unit. Our families create neighborhoods, communities, states, and nations.

Developed and adapted by New Mexico’s House Memorial 5 Task Force on Children and Families and the Coalition for Children, 1990.
Assumptions needed when working with families:

✓ All people are basically good.
✓ All people have strengths.
✓ All people need support and encouragement.
✓ All people have different but equally important skills, abilities and knowledge.
✓ All families have hopes, dreams and wishes for their children.
✓ Families are resourceful, but all families do not have equal access to resources.
✓ Families should be assisted in ways that help them maintain their dignity and hope.
✓ Families should be equal partners in the relationship with service providers.
✓ Providers work for families.

Taken from: Iowa “Early Access Project”
Glossary of Early Intervention Terms (1)

**Assessment:** ongoing procedures used by qualified professionals throughout the period of a child's eligibility to identify his or her unique needs; the family's resources, priorities and concerns related to his or her development; and the nature and extent of early intervention services required to meet these needs.

**Assistive technology devices:** any item, piece of equipment or product system used to increase, maintain or improve the child's ability to do things.

**Caregiver:** all persons responsible for caring for infants and toddlers regardless of the care setting.

**Child advocate:** a parent, legal guardian, surrogate parent or professional, paid or unpaid, who acts on behalf of a child and family to protect their rights and interests and ensures their access to services for which they are eligible.

**Developmental delay:** 1.5 standard deviations at or below the mean, or at or below the 7th percentile in one or more areas of development.

**Due process:** the rights afforded parents/legal guardians/surrogate parents in ensuring that children and families receive the early intervention services to which they are entitled under Part C.

**Early Intervention (EI):** a collection of services provided by public and private agencies designed by law to support eligible children and their families in enhancing a child's potential growth and development from birth to age three.

**Early Intervention record:** any personally identifiable information about a child and or family generated by the early intervention system that pertains to evaluation and assessment, development of the IFSP and delivery of early intervention services.

**Evaluation:** procedures used by qualified professionals to determine a child's initial and continuing eligibility which focus on determining the status of the infant or toddler in all developmental areas: cognitive, social/emotional, physical (including vision and hearing), communication, and adaptive.

**Families:** includes all primary caregivers for the infant/toddler in the child's home setting (may include parents, grandparents, foster parents, and other extended family, for example).

**Family centered care:** a principle that promotes parents as the decision makers and builds parent/professional partnerships.

**Family statement:** a family directed statement of a family's concerns, priorities, and resources included on the Individualized Family Service Plan.
Fine motor: the ability to use the small muscles such as fingers and hands to manipulate materials in the environment. Examples of fine motor skills include grasping a rattle, picking up small objects and eating with utensils.

Gross motor: the ability to use the large muscles of the body, the arms, legs and torso, to control body movements such as lifting the head, rolling over, climbing, walking and running.

Guardian: the natural or adopted parents, surrogate parents or other persons or relatives who have legal custody of children.

IDEA: the federal government legislation entitled the Individuals with Disabilities Education Act.

Individualized Family Service Plan (IFSP): the written plan for providing early intervention and other services to eligible children and families that: 1) is developed jointly by the family and appropriate professionals, 2) is based on a multidisciplinary evaluation and assessment of the child and family, 3) has a family directed statement of resources, priorities and concerns if the family wishes, and 4) includes necessary services to enhance the development of the child and the capacity of the family to meet the child's developmental needs.

Infants and toddlers with disabilities: children from birth through their third birthday who are eligible for early intervention services because they have a developmental delay in one or more of the following areas: cognitive, physical, communication, social/emotional, or adaptive; or has a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay.

Interagency Coordinating Council (ICC): the council that each state and jurisdiction participating in Part C must establish to assure coordination and cooperation of all participating agencies in implementing the early intervention program.

Multidisciplinary: the involvement of two or more disciplines or professions in the provision of integrated and coordinated services including evaluation and assessment activities, and the development of the IFSP.

Native language: the language or mode of communication normally used by the parent of an eligible child.

Natural environment: home or community settings which are natural or typical for a child of the same age without disabilities. This may include the home, neighborhood, or community settings.

Outcomes: statements of changes as a result of early intervention services. These statements are part of the Individualized Family Service Plan.

Parent: a parent, guardian, a person acting as a parent of a child, or a surrogate parent. The term does not refer to the State if the child is a ward of the State.
**Part B**: Part B of the Individuals with Disabilities Education Act provides free appropriate public education and education-related services to all school-age children with disabilities (ages 3-21 in most states).

**Part C**: Part C of the Individuals with Disabilities Education Act establishes the early intervention program for eligible infants and toddlers birth through their third birthday and their families.

**Periodic reviews**: a review of the IFSP conducted every six months, more frequently as conditions warrant or at a family's request.

**Primary caregiver**: the person who has the primary responsibility for the care of a child.

**Procedural safeguards**: standards and procedures to protect the rights of children, their parents, and surrogate parents under Part C of the Individuals with Disabilities Education Act.

**Screening**: a quick checklist or survey about a child's development to see if further evaluation is needed.

**Service coordination**: activities carried out by a service coordinator to assist and enable an eligible child and his or her family to receive the rights, safeguards, and services that are authorized to be provided under the state's delivery system.

**Service coordinator**: the individual selected by an early intervention team, and designated in an IFSP, to coordinate and facilitate early intervention services and integrate the family into the process. The service coordinator must demonstrate understanding of the laws and nature of the EI process.

**Service provider**: a public or private agency designated to provide early intervention services for an eligible child and the child's family in accordance with an approved IFSP.

**Surrogate parent**: an individual appointed by the local or state agency to act in place of a parent or legal guardian in safeguarding a child's rights in the decision making process.

**Transition**: occurs at the age of three when a child and family are no longer eligible for services under Part C of the Individuals with Disabilities Education Act (IDEA). This is a collaborative process involving families, Part C and Part B programs, and as appropriate, other community-based preschool programs to ensure uninterrupted provision of appropriate services. Planning and decision making must occur well in advance of the child's third birthday.

**Transition plan**: the plan developed for a child when leaving early intervention services at age three.
## Early Intervention and Early Childhood Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ABA</td>
<td>Applied Behavioral Analysis</td>
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<tr>
<td>ACB</td>
<td>American Council for the Blind</td>
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<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
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<tr>
<td>ADD</td>
<td>Attention Deficit Disorder</td>
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<td>ADHD</td>
<td>Attention Deficit Hyperactivity Disorder</td>
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<tr>
<td>ADL</td>
<td>Activities for Daily Living</td>
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<tr>
<td>ASD</td>
<td>Autism Spectrum Disorder</td>
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<tr>
<td>CDC</td>
<td>Child Development Center (Hasbro)</td>
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<td>CDC</td>
<td>Centers for Disease Control and Prevention</td>
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<td>CAPTA</td>
<td>Child Abuse Prevention &amp; Treatment Act</td>
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<tr>
<td>CEDARR</td>
<td>Comprehensive Evaluation Diagnosis Assessment Referral and Reevaluation</td>
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<td>CHADD</td>
<td>Children and Adults with Attention Deficit Disorder</td>
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<tr>
<td>CNDC</td>
<td>Children’s Neurodevelopment Center</td>
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<tr>
<td>CRC</td>
<td>Community Resource Center</td>
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<tr>
<td>CSHCN</td>
<td>Children with Special Health Care Needs</td>
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<tr>
<td>DCYF</td>
<td>Department of Children Youth &amp; Families</td>
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<tr>
<td>DD</td>
<td>Developmental Delay</td>
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<tr>
<td>DHS</td>
<td>U.S. Department of Human Services</td>
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<tr>
<td>DOE</td>
<td>U.S. Department of Education</td>
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<tr>
<td>DOH</td>
<td>U.S. Department of Health</td>
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<tr>
<td>DOL</td>
<td>U.S. Department of Labor</td>
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<tr>
<td>DSI</td>
<td>Dual Sensory Impairment (Blind/Deaf)</td>
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<tr>
<td>ECSE</td>
<td>Early Childhood Special Education</td>
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<tr>
<td>ED</td>
<td>Emotional Disturbance</td>
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<tr>
<td>EI</td>
<td>Early Intervention (birth-3)</td>
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<tr>
<td>ELL</td>
<td>English Language Learners</td>
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<td>EPSDT</td>
<td>Early Periodic Screening Diagnosis and Treatment</td>
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<tr>
<td>ERIC</td>
<td>Educational Resource Information Center Clearinghouse on Disabilities and Gifted Education</td>
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<tr>
<td>ESL</td>
<td>English as a Second Language</td>
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<td>FAPE</td>
<td>Free Appropriate Education</td>
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<td>FCCP</td>
<td>Family Child Care Partnerships</td>
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<td>FEAT</td>
<td>Families for Effective Autism Treatment</td>
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<tr>
<td>GCD</td>
<td>Global Communication Disorder</td>
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<tr>
<td>HIPPA</td>
<td>Health Insurance Portability and Accountability Act</td>
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<td>HIPPY</td>
<td>Home Instruction for Parents of Preschool Youngsters</td>
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<td>HTBS</td>
<td>Home Treatment Based Services</td>
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<tr>
<td>IDEA</td>
<td>Individuals with Disabilities Educational Act</td>
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<tr>
<td>IEP</td>
<td>Individualized Education Plan</td>
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<tr>
<td>IFSP</td>
<td>Individualized Family Service Plan (EI equivalent of IEP)</td>
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<tr>
<td>ISP</td>
<td>Individual Service Plan</td>
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<tr>
<td>LD</td>
<td>Learning Disabled</td>
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<tr>
<td>LEA</td>
<td>Local Educational Agency</td>
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<tr>
<td>LRE</td>
<td>Least Restrictive Environment</td>
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<tr>
<td>MHRH</td>
<td>Mental Health Retardation Hospitals</td>
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<tr>
<td>NICHCY</td>
<td>National Information Center for Children and Youth with Disabilities</td>
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<td>NICU</td>
<td>Neonatal Intensive Care Unit</td>
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<td>OCD</td>
<td>Obsessive Compulsive Disorder</td>
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<tr>
<td>Abbreviation</td>
<td>Description</td>
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<tr>
<td>OT</td>
<td>Occupational Therapist</td>
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<td>Part C</td>
<td>Medical Services for Children Birth-3</td>
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<tr>
<td>PAT</td>
<td>Parents as Teachers</td>
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<td>PBIS</td>
<td>Positive Behavior Interventions</td>
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<tr>
<td>PICU</td>
<td>Pediatric Intensive Care Unit</td>
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<td>PSN</td>
<td>Parent Support Network</td>
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<tr>
<td>PT</td>
<td>Physical Therapist</td>
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<td>PTI</td>
<td>Parent Training Information Project</td>
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<tr>
<td>RIC</td>
<td>Rhode Island College</td>
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<tr>
<td>RIDE</td>
<td>RI Department of Education</td>
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<tr>
<td>RIPIN</td>
<td>Rhode Island Parent Information Network</td>
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<tr>
<td>RITE CARE</td>
<td>Rhode Island Medicaid Managed Care Program</td>
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<tr>
<td>RITAP</td>
<td>RI Technical Assistance Program</td>
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<tr>
<td>SORICO</td>
<td>Southern Rhode Island Collaborative Education and Training Center</td>
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<tr>
<td>SLP</td>
<td>Speech/Language Pathologist</td>
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<tr>
<td>SPED</td>
<td>Special Education</td>
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<tr>
<td>TA</td>
<td>Teacher Assistant</td>
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<tr>
<td>TBI</td>
<td>Traumatic Brain Injury</td>
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<tr>
<td>UCEDD</td>
<td>University Center for Excellence in Developmental Disabilities</td>
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<td>WIC</td>
<td>Women Infants &amp; Children</td>
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The Early Intervention System
Step by Step

REFERRAL
► Local Early Intervention agency contacted by parent or with parent’s informed consent

SERVICE COORDINATOR
► Assigned by local lead agency
► Meets with family
► Advises family of overall procedures, rights & safeguards
► Explains family’s role
► Explores family resources, priorities and concerns
► Assists in obtaining evaluation and services

EVALUATION AND ASSESSMENT
► Evaluation purpose and procedures explained to family
► Informed written consent obtained prior to evaluation
► Parent interview to ascertain strengths, need and concerns
► Multidisciplinary evaluation by at least two qualified professionals
► Evaluation results reviewed with family

ELIGIBLE FOR SERVICES
► Child meets state criteria for eligibility
► Service Coordinator assists family in identifying goals
► Service Coordinator reviews EI services available
► IFSP meeting scheduled

IFSP
► Written plan for developmental and support services
► Goals and outcomes identified by family and evaluation
► Services determined by team including parent
► Services authorized
► Reviewed every 6 months, evaluated annually

EARLY INTERVENTION SERVICES
► Developmental and support services to address concerns and achieve goals
► Services available to both eligible child and family

TRANSITION
► Service Coordinator assists family in planning for when child ages out or is no longer eligible for EI services
► Parent advised of their options including special preschool, day care with related services, or other community-based services system

INELIGIBLE
► Evaluation reveals child does not meet state’s eligibility criteria
► Service Coordinator explains procedures for resolving complaint if parent not in agreement
► Service Coordinator refers family to other community-based resources

From: University of Rhode Island HDF 298 – Introduction to Early Intervention Course Packet Spring 2005
Early Intervention Outcomes

Child Outcomes:

1. Children have positive social relationships.
2. Children acquire and use knowledge and skills.
3. Children take appropriate action to meet their needs.

Family Outcomes:

1. Families understand their children’s strengths, abilities, and special needs.
2. Families know their rights and effectively communicate their children’s needs.
3. Families help their children develop and learn.
4. Families feel they have adequate social support.
5. Families are able to access services and activities that are available to all families in their communities.

From: James L. Maher Center EI Program
Guiding Principles for Quality
Early Intervention Supports and Services

“A family’s diversity might be expressed in many forms, including ethnicity, race, religion, linguistics, and economics, as well as by their values and beliefs. Early Intervention programs and individual service providers need to provide their services in ways that honor the diversity of families.”

“It is the nature of children to learn throughout the day, wherever they are and whatever they are doing. Everyday experiences, events, and situations provide children with continuous learning opportunities that promote and enhance their development… ‘Therapy’ can be joyful when it is embedded in typical play routines.”

“Young children live in the context of their families and depend on their parents and other family members for care, support, and teaching. In addition, it is essential to consider the needs of other family members. The needs and abilities of each family member are part of a child’s context and influence the child’s development.”

“Interventions are designed to increase participation by removing barriers and promoting conditions that result in increased participation. Strategies used to increase participation are very diverse, including use of low and high tech assistive technology, adaptation of activities and environments, changing or reframing attitudes that limit child participation, and increasing the child’s skill level. Early intervention should promote child participation in all areas of daily life, including play, self care and social activities.”

“Practitioners and families need to look broadly at the full range of community settings in which the child and family currently spend time or would like to spend time in the future.”

“Although all transdisciplinary team members share responsibility for service plan development, the plan is carried out by the family and one other team member who is designated as the primary service provider... Use of a primary service provider can enhance rapport between the family and the staff and avoid the interference with parent-child bonding that may be caused by excessive handling of the child in the clinical setting.”

Providing Services in Natural Environments

Part C of the Individuals with Disabilities Education Act Amendments of 1997 says that to the maximum extent appropriate, early intervention services must be provided in natural environments, including home and community settings in which children without disabilities participate. Services can only be provided in a setting other than a natural environment when early intervention cannot be achieved satisfactorily in a natural environment. Providing services in natural environments is not just the law. It reflects the core mission of early intervention, which is to provide support to families to help their children develop to their fullest potential. The basic premise of natural environments intervention is the involvement of caregivers in the teaching and learning process for the child. It is about the process of working in a relationship where family members and caregivers are doing actual “hands on” throughout the day, as opportunities arise, with the service provider as a consultant.

Natural environments are the day-to-day settings, routines and activities that promote learning for children. Children learn about “water” while playing in the bathtub, washing hands in the sink, getting a drink, splashing in a puddle or swimming in a pool. In addition to understanding what water is, children are learning self-help skills like drinking from a cup, hand and face washing, or motor skills like walking or jumping. Children and families have many routines that occur in different places including the bathroom, kitchen sink, backyard, mailbox, car, pool and the grocery store. The family identifies these as they talk about the activities of their life. They may go to grandpa’s, walk to the store, make the bed, feed the dog, and do the laundry. Routine based intervention is portable and adaptable to the family’s interests, needs, and responsibilities. Embedded intervention implemented by caregivers can occur at home, at childcare, in the car, at the soccer game, in the laundromat, in the yard, in the doctor’s office, at play group, at the park, at grandma’s, while visiting the neighbors, or anywhere kids and families go.
Development of the Individualized Family Service Plan

1. Conversations with Families
   EI learns about the child and family, what are the questions or concerns the family may have about the child’s development.

2. Individualized Assessment
   EI gathers more information through an assessment to learn more about the child’s development and determines if the child is eligible for EI services.

3. Discuss Concerns & Select Priorities
   EI shares with the family what they have learned from all the information gathered. Together the family and EI discuss and select what the priority is for the child and family.

4. Develop Outcomes
   EI develops outcomes with the family. Outcomes are what the family wants the child to be able to do. These outcomes are a result of the priority the family has identified is important to them.

5. Strategies
   EI will give the family ideas on how they can support the child to meet the outcomes developed. Strategies can be play activities, exercises, ideas that are incorporated into what the child already does during the day.

6. Identify Supports that the Caregivers Need
   EI will help the family identify what are the supports that the child’s caregivers (mom, dad, foster parents, grandparents, daycare provider, relative, person that spends time with the child etc.) need to carry out the strategies and support the child’s development.

7. Services
   EI determines what services a child will need to help them meet the outcomes developed and how often will they need them.
Section II:

Student Information
Frequently Asked Questions

When can I do an internship?
Internships can be completed during fall, spring and summer semesters.

When should I apply for an internship?
At least 3 months prior to the semester you wish to do your internship.

How many hours do I work at my internship site during the semester?
Hours are determined by the student’s program of study as defined in his/her course requirements. Most interns work between 8-32 hours per week. Credits accompanying these hours are to be determined by your institution’s internship program.

What are the steps in planning an internship?
- Site selection: Internship opportunities are available at various Early Intervention sites throughout the state. Sites and contact information can be found at http://www.uri.edu/frp/ei.
- Resume development: Not all sites require a resume; however, developing a resume helps you to determine your objectives and summarize accomplishments. It is recommended that you prepare a brief resume that reflects your education, work and volunteer experience, and special skills.
- Interviews: Contact the URI internship coordinator to apply for an internship at eigrant@etal.uri.edu or 874-4036. The intern coordinator will find a placement for you and give you the contact information for the site. You will set up an interview with the site supervisor. The supervisor will assess whether or not you have the necessary background, experience and overall maturity to successfully complete an internship in their agency. It may be helpful to research the agency prior to your interview.
- Interview follow up: schedule an appointment to meet with your college supervisor to discuss which agency best fits your goals. Contact all of the agencies to inform them of your decision (even if you are not choosing the agency) and thank them for their time. It is important to maintain a good relationship with agencies since you may have contact with them again further in your career.

What should I consider when choosing a site?
Research EI sites, including browsing websites and reading promotional materials, and contact site supervisors. Use what you learn to decide the following:
- Is this an opportunity that will help me further my career goals?
- Is this a supervisor I could learn from and work well with?
- Does this environment suit my personality and will I enhance my skills?
- Do I feel safe in the environment?
- Will I have an adequate amount of work to do and will I enjoy the work?
- Do I agree with the goals and mission of the agency?
- Am I accepting this internship because it was the first offer?
- Am I selecting this internship for the right reasons?
What steps do I take to apply for an internship?

- After meeting with URI intern coordinator you will receive contact information for one of the site supervisors.
- Call or email site supervisor to set up an interview.
- Specify the internship area you are most interested in.
- Specify the semester you would like to intern and list corresponding start and end dates.
- Know the number of hours per week you will need to intern to earn credit.
- Ask what you should bring to the interview and if there are any application deadlines.
- Be sure to collect all appropriate contact information from those who you speak with.
- Ask how long the application process will take.
- Be sure to thank everyone for their time.

What documents will I need to begin an internship with EI?

- BCI (Bureau of Criminal Identification) background check
- CANTS Check (Child Abuse and Neglect Tracking System)- through DCYF
- TB test
- Immunization records
- Car Insurance records - this is because you will likely be driving to/from home visits while interning

Please note: while these are the general requirements, some sites require additional paperwork that will be administered/discussed during an interview with the site.

How are responsibilities divided between the student, site supervisor, and college supervisor?

- **Student Intern:**
  - Maintains confidentiality: As an Early Intervention intern, you will be expected to respect the confidentiality of the families that you work with and at no time should a child or their family be discussed once you have left an EI visit. You are not to discuss a child with any parent (even their own). If there is a concern it needs to be addressed with the internship site staff and they will handle the situation with the family. Your professionalism in maintaining confidentiality of children with medical conditions/special needs is both expected and appreciated.
  - Maintains regular contact with the college supervisor to ensure that the necessary steps are being followed to secure the internship placement.
  - Creates a Learning Contract and job description, if applicable. This acts as a road map for the intern’s learning experience and serves as the outline for his/her portfolio. The Learning Contract will determine:
    1. What the intern wants to learn in the internship experience (goals).
    2. How the intern plans to meet each learning objective.
    3. How the intern will prove in his/her portfolio the objectives have been met.
  - Creates a professional portfolio: this is the compilation of the student’s learning. In the portfolio, the intern will provide evidence of meeting his/her learning goals.
• Attends scheduled meetings: past student interns have indicated that regularly scheduled meetings with the site supervisor to discuss work assignments and performance greatly enhances the student’s experience. Also, willingness to provide more autonomy and responsibility as the intern demonstrates competence is a supervisory quality highly valued by students.

• Attendance: During your time at an Early Intervention site, you will become a valued member of the EI team. Your time scheduled with your site is important, so it is important that you come when scheduled, or notify your site supervisor in the event that you will be absent. You may be required to complete a specific number of hours, as determined by your program requirements, so missed hours may need to be made up.

• Fulfills field work and academic components of the internship as outlined in learning objectives.

• Completes an end of the internship evaluation survey.

College supervisor:
• Contacts Early Intervention Recruitment and Retention office with any questions or concerns
• Assists students in clarifying goals and offers guidance through the internship process.
• Approves potential internship sites.
• Grants final approval of the learning contract, if applicable.
• Provides a clear description of his/her assigned responsibilities during internship term.
• Meets with student’s site supervisor (if possible) in order to maintain open lines of communication throughout the internship.
• Monitor and supervise progress toward learning objectives.
• Assign the student’s letter grade.

Site Supervisor
• Contacts EI Recruitment and Retention office with any questions or concerns.
• Interview potential interns to determine if the student meets necessary qualifications.
• Assists students with the agency description section of the learning contract, if applicable.
• Provides intern with a clear description assigned responsibilities during the internship term.
• Designates a qualified agency staff member to serve as a student supervisor.
• Provides the intern with a meaningful orientation to the internship site’s services, organizational and operating practices.
• Provides the intern with opportunities to become significantly involved in agency activities consistent with the objectives outlined in the learning contract. These opportunities should include but are not limited to: hands on learning through completion of work tasks, professional opportunities (e.g. staff meetings and trainings), time to observe and shadow agency professionals.
• Provide a reasonably safe environment to work in, as well as adequate supervision and the necessary tools to perform their internship duties.
• Provides periodic work planning and review sessions for the intern and the site supervisor to assess progress and plan for the continued learning.
• Completes written evaluation of intern’s performance to be returned to college supervisor.
• Completes an evaluations survey at the end of the internship.

Goals and Objectives of an Early Intervention Internship:

- To provide the opportunity for students to test theory learned in the classroom in an actual working situation.
- To provide a system of accountability and encourage professionalism.
- To provide an opportunity for students to develop positive work habits.
- To provide an opportunity to gain professional attitude, growth, maturity, and judgment.
- Facilitate networking with professionals.
- To provide an opportunity to test aptitude for or interest in Early Intervention.
- To help students strengthen their understanding of Early Intervention.
- To gain understanding of the impact of Early Intervention on the emotional and developmental needs of infants and toddlers.
- To have the opportunity to interact with families on a one-to-one basis and in group situations.
- To become acquainted with the needs of children with developmental delays and to recognize creative and flexible programming in meeting these needs.
- To gain a basic and practical working knowledge of Early Intervention procedures, terminology, and the roles of multidisciplinary professionals within the EI setting.
- To strengthen ability to interact and relate to the multidisciplinary team to promote positive experiences for children and families serviced by EI.
What will I learn during my time as an EI intern?

✓ The purpose of EI as defined in Part C of IDEA and the structure of Rhode Island’s Early Intervention system.

✓ The key components of family-centered practice.

✓ The impact of culture on the relationship between professionals and families and on the delivery of appropriate EI supports and services.

✓ Issues, challenges, requirements and recommended practices in the evaluation and assessment of infants and toddlers.

✓ The required components of a quality Individual Family Service Plan, including the development of outcomes that are family-owned, functional and measurable.

✓ The elements of a quality service delivery model which supports a family’s capacity to enhance their child’s development.

✓ The Rhode Island Transition process and the EI service provider’s role in this process.
Professionalism

Students are expected to demonstrate the following characteristics, both in their academic and personal pursuits.

**Integrity**: display honesty in all situations and interactions. You should be familiar with your site’s HIPAA guidelines and be able to identify information that is confidential.

**Dependability**: arrive on time and actively participate in activities. Tasks should be completed promptly and well.

**Courtesy**: if you will be late or absent, a call to the site/supervisor is expected. You should take initiative to follow through and complete missed hours.

**Attitude**: be hands-on! Interns should maintain a positive outlook toward others and toward assigned tasks. Children are perceptive of your emotions. The best internship experience comes from you taking initiative.

**Professionalism**: recognize and admit mistakes—use and accept feedback to improve your performance. Ensure emails to supervisors are professional and polite.

**Language**: no swearing or slang is permitted. Be aware that you are modeling for children who are learning to speak.

**Tolerance**: you will encounter many types of families and children—work at accepting all people and situations. Acknowledge biases and do not allow them to affect care. If you have concerns/issues, discuss these with supervisors, not parents.

**Appearance**: display appropriate professional appearance and be appropriately groomed. Revealing tops, tank tops, short shorts, and facial piercings are unacceptable.

**Smoking**: is not permitted on any premises, even in your car during commutes. Second hand smoke, even the scent, may be damaging to children’s lungs.

**Phones**: the use of cell phones, including texting, is prohibited. Also, if your supervisors will be calling your cell phone, make sure your voice message is respectful.

**Extra!!!** Sending thank you notes after interviews and at the conclusion of your internship are always appreciated by sites supervisors and set you apart from other interns.
College Contacts for Students

University of Rhode Island

Experiential Learning and Community Engagement

Roosevelt Hall
90 Lower College Road
Kingston, RI 02881
Tel: 401-874-2160
intern@etal.uri.edu

Community College of Rhode Island

Career and Internship Office

Anne Marie Marge
Director
Knight Campus
Room 1034
Tel: 401-825-2322
Fax: 401-825-1035
amarge@ccri.edu

Tonia B. Fay
Coordinator
Liston Campus
Room 2221
Tel: 401 455-6151
tbfay@ccri.edu

Jonathan Steele
Coordinator
Flanagan Campus
Room 2321
Tel: 401 333-7326
jsteele@ccri.edu

Rhode Island College

Career Development Center

Craig-Lee Hall (CL)
Room 054, Mall Area
600 Mt. Pleasant Avenue
Providence, RI 02908
Tel: 401-456-8031
careerdevelopment@ric.edu
Rhode Island Early Intervention Providers

Children's Friend & Service
621 Doster Street
Central Falls, RI 02863-2603
Ph. 721-9200
Fax. 729-0010
Director: Alexandra Arnold, Ph. 721-9255
Supervisor: Natalie Redfern, Ph. 721-9294
Supervisor: Christine Crohan, Ph. 721-9229
Supervisor: Deborah Newell, Ph. 721-9211
Parent Consultant: Delemy Castillo, Ph. 721-9292

Easter Seals, RI
213 Robinson Street
Waxfield, RI 02879
Ph. 294-1000, Fax. 294-1008
Director: Sue Hawkes x11
Supervisor: Tara McCarty x12
Parent Consultant: Carol Manglass x18

Family Resource Community Action
245 Main Street
Woonsocket, RI 02895-3123
Ph. 766-9000, Fax. 766-9737
Director: Darlene Magaw, Ph. 235-6015
Program Manager: Marcia Card, Ph. 235-6007
Supervisor: Susan Feely, Ph. 235-6028
Parent Consultant: Denise Bouley, Ph. 235-6012

Family Service of RI
134 Thurbee Avenue
Providence, RI 02905-4754
Ph. 331-1350, Fax. 277-3388
Director: Jenn Kaufman x3358
Supervisor: Monique DeRoche x3343
Supervisor: Rebecca Collins x3353
Parent Consultant: Julie Lambert x3325

The Groden Center
30 Livingston Street
Providence, RI 02904
Ph. 523-2830, Fax: 523-2380
Director: Leslie Weidenman Ph. 274-6310 x1006
Supervisor: Carol Hazard, Ph. 523-2380
Parent Consultant: Jennifer Francetti

Hasbro Children's Hospital
765 Allens Ave Suite 110
Providence, RI 02905
Ph. 444-3201, Fax. 444-8507
Referral line: 444-3201
Administrator: Maura Taylor
Director: Mary Fournier, Ph. 444-5251
Clinical Supervisor: Judith Dixon, Ph. 623-0115
Parent Consultant: Abby Marino, Ph. 444-9066

James L. Maher Center
120 Hillside Avenue
Newport, RI 02840-1227
Ph. 431-2860, Fax. 847-9458
Director: Deborah Shears x123

Seven Hills Rhode Island
178 Norwood Ave.
Cranston, RI 02920
Ph. 921-1470, Fax: 921-1415
Director: Laurie Farrell x2206
Supervisor: Lynn Glikstock x7213
Parent Consultant: Liz Killian Ph. 309-4426

J. Arthur Trudeau Memorial Center
290 Commonwealth Avenue
Warwick, RI 02880-2752
Ph. 823-1731, Fax 823-1849
Director: Ernest Van Deusen x361
Supervisor: Susan Quinn x364
Supervisor: Marie Prenota x 370
Supervisor: Pat Maris x366
Parent Consultant: Elizabeth Hindley x365

25 West Independence Way
Kingston, RI 02881
Ph. 264-1800, Fax: 264-1979

Looking Upwards, Inc.
2974 East Main Road
Portsmouth, RI 02871
Mailing Address: PO Box 538
Portsmouth, RI 02871
Ph. 293-5790, Fax. 293-5796
Director: A. Valory McHugh x330
Supervisor: Carolyn Souza x310
Parent Consultant: Betsy Friedman x319

Meeting Street
1000 Eddy Street
Providence, RI 02905
Ph. 533-9100, Fax. 533-9102
Referral line: 533-9104
Director: Casey Ferrara, Ph. 533-9252
Supervisor: Antonio Martins, Ph. 533-9261
Supervisor: Amanda Silva Ph. 533-9172
Supervisor: Kristine Redige Ph. 533-9172
Parent Consultant: Cris Faxon, Ph. 533-9244
Parent Consultant: Margaret Greene-Bronn, Ph. 533-9243

RI Early Intervention, Lead Agency

Executive Office of Health and Human Services
Center for Child and Family Health
Hazard Building #74
74 West Road
Cranston, RI 02920
Part C Coordinator and Chief, Family Health Systems:
Brenda DuHamel, Ph. 482-0318
Children’s Friend and Service (CFS)

Mission: The mission of Children’s Friend is to promote the well-being and healthy development of Rhode Island’s most vulnerable children by providing flexible, effective and culturally-relevant services that support and strengthen families and communities.

Contact Info:
621 Dexter Street        Director: Alexandra Arnold
Central Falls, RI 02863     aarnold@cfsri.org
Phone: 401-721-9200       Supervisor: Deborah Newell
www.cfsri.org

Internship opportunities: Internships may be available at Children’s Friend and Service for students studying Early Childhood Education, Social work, Nursing, and Nutrition. Opportunities are available for multilingual students in all majors as interpreters. Those students who speak Spanish, Portuguese, or Cape Verdean Creole are encouraged to apply. Interns will have the opportunity to learn how Early Intervention services are administered.

Depending on the goals and skill of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including reference checks, a criminal background check and any other required processes as needed.
- Learning EI eligibility criteria.
- Multilingual students may participate in interpreting on home visits and/or translating written information in order to complete required paperwork.
- Shadowing of CFS EI staff when they accompany staff on home visits.
- Participating in children’s groups and parent support groups.
- Providing office help including processing intake phone calls, clerical work, etc.
- Work with your internship supervisor to review internship contract, to ensure that required conditions are being met.
**Easter Seals**  
**Program Description:** Easter Seals has been helping individuals with disabilities and special needs, and their families, live better lives for more than 80 years. Teams of therapists, teachers and other health professionals offer a variety of services to help people with disabilities address life’s challenges and achieve personal goals. Easter Seals also includes families as active members of any therapy program, and offers the support families need.

**Contact Info:**  
213 Robinson Street  
Wakefield, RI 02879  
Phone: 401-284-1000  
Fax: 401-284-1006  
www.eastersealsri.com  
Director: Susan P. Hawkes  
shawkes@eastersealsri.com

**Internship Opportunities:** Internships may be available at Easter Seals for students in Psychology, Human Development and Family Studies, Speech and Language Pathology, Occupational Therapy, Physical Therapy, Early Childhood Education, and Social Work. Opportunities are available for multilingual students in all majors as interpreters. Interns will have the opportunity to learn how Early Intervention Services are administered.

Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including resume, interview process, reference checks, a criminal background check and any other required processes as needed.
- Work on Continued Quality Assurance (CQA) projects – assuring that the agency is meeting requirements for service delivery.
- Participate in children’s and parent’s groups (e.g. playground motor groups, language/socialization groups, parent support groups).
- Helping with evaluations, including observing evaluations as well as assisting with evaluation documentation.
- Attending staff meetings and trainings.
- Preparing parent information packets to be distributed to new clients.
- Some shadowing of EI providers on visits with clients, on a case by case basis, particularly in community settings rather than on home visits.
- Internships consisting of 16 hours per week or less would be ideal for this EI site.
- Students of junior status or higher are preferred.
Family Service of Rhode Island

**About Family Service:** Open since 1892, Family Service is one of the oldest and largest non-profit human service agencies in Rhode Island.

**Mission:** To respond creatively to the unmet needs of individuals, families and the community by building partnerships that help people help themselves.

**Contact Info:**

134 Thurbers Avenue  
Providence, RI 02905  
Phone: 401-331-1350  
www.familyserviceri.org

Director: Jenn Kaufman  
Supervisor: Monique DeRoche

**Internship opportunities:** Internships may be available at Family Service of Rhode Island for students studying Physical Therapy, Occupational Therapy, Speech and Language Pathology, Nursing, Psychology, Human Development, and Early Childhood Education. Interns will have the opportunity to learn how Early Intervention services are administered. Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including reference checks, a criminal background check and any other required processes as needed.
- Learning EI eligibility criteria.
- Shadowing of Family Service EI staff when they accompany staff on home visits.
- Providing appropriate play activities for children while meetings are held with parents during home visits.
- Participating with children’s groups (e.g. speech groups, swim groups, music classes)
- Assisting with parent support component of all children’s groups.
- Work with your internship supervisor to review internship contract, to ensure that required conditions are being met.
Family Resources Community Action

Program description: Established in 1892, Family Resources Community Action (FRCA) is one of the oldest child serving and family support organizations in the state of Rhode Island. Dedicated to serving low-income families in Woonsocket and throughout Northern Rhode Island, FRCA has been at the vanguard in the development of daycare, residential programming, foster care, mental health counseling and early childhood services to name a few.

Mission: To strengthen families and individuals through social services, education and economic opportunity while preserving the dignity of the people we serve.

Contact Info:
245 Main Street
Woonsocket, RI 02895
Phone: 401-766-0900
www.famresri.org

Director: Darlene Magaw
Program Manager: Marcia Card
mcard@famresri.org

Internship opportunities: Internships may be available for students studying Early Childhood Education, Nursing, Physical Therapy, Occupational Therapy, Speech and Language Pathology and Human Development. Opportunities are available for multilingual students in all majors as interpreters. Those students who speak Spanish, Portuguese, French, and Cape Verdean Creole are encouraged to apply. Interns will have the opportunity to learn how Early Intervention services are administered.

Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resource requirements including resume, interview, reference checks, a criminal background check and any other required processes as needed.
- Attendance at agency orientations as well as staff trainings.
- Learning EI eligibility criteria.
- Multilingual students may participate in interpreting on home visits and/or translating written words in order to complete required paperwork.
- Shadowing of EI staff when they accompany staff on home visits.
- Students are encouraged to attend home visits with a variety of practitioners, including those outside of the student’s field of study.
- Participating in children’s groups and parent support groups.
- Preparation of materials to use with families during home visits.
- Screening of referral calls.
The Groden Center

Program Description: Groden Center Early Intervention Program (EIP) is a specialty service provider within the Department of Human Service’s Early Intervention network of full-service EI programs. Since 1980, we have specialized in providing services to families with children under three years of age who have a diagnosis of autism spectrum disorder (ASD), pervasive developmental disorder (PDD), or other language, social-emotional, and/or behavioral disorders. A child need not have a specific diagnosis in order to receive services from the Groden Center EIP.

Contact Info:
30 Livingston Street
Providence, RI 02904
Phone: 401-525-2380
www.grodencenter.org

Internship opportunities: Internships may be available at the Groden Center for students studying Psychology, Human Development and Family Studies, Speech and Language Pathology, Occupational Therapy, Physical Therapy, Early Childhood Education, Social Work or others with a strong background and interest in working in a family centered environment with children affected by Autism and other pervasive developmental disorders. Interns will have the opportunity to learn how Early Intervention services are administered.

Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence with all human resources requirements including reference checks, a criminal background check and any other required processes as needed.
- Shadowing of Groden Center EI staff on home visits.
- Participation in children’s groups and parent support groups, which occur 5 mornings and 2 afternoons per week.
- Internships usually are 6-8 hours per week. More hours may be available by combining EI related tasks with The Livingston Center pre-school activities.
- Groden Center EI is a specialty service provider. Therefore, evaluations and assessments are not performed by Groden Center staff. Interns at this center will not have to opportunity to observe these aspects of EI. All children receiving services are involved with a full service provider who performs these activities.
Hasbro Children’s Hospital

Program Description: Hasbro Children’s Hospital has long committed itself to the philosophy that close involvement of the family is central to a child’s health and healing. Recognizing parents as essential partners in their children’s care is integral to devising an individualized plan for each child and each family. A multidisciplinary staff supplies family-centered evaluations, parent training and support, treatment options, and community-based services to augment the family’s capacity to enhance the child’s growth and development.

Contact Info:
765 Allens Ave, Suite 110
Providence, RI 02905
Phone: 401-444-3201
Fax: 401-444-8507
www.hasbrochildrenshospital.org

Internship Opportunities: Internships may be available at Hasbro Children’s Hospital for students in Psychology, Human Development and Family Studies, Speech and Language Pathology, Occupational Therapy, Physical Therapy, Early Childhood Education, and Nursing. Interns will have the opportunity to learn how Early Intervention Services are administered.

Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including resume, interview, reference checks, a criminal background check and any other required processes as needed.
- Attending agency orientation including safety and confidentiality procedures.
- Participation in children’s and parents’ groups (e.g. toddler language motor groups, pool groups, therapeutic horseback riding groups, parent support groups).
- Observing a case throughout the entire EI process including: Intake, evaluation, Individual Family Service Plan, and intervention services.
- Attending staff meetings and training.
- Shadowing of Hasbro EI staff on home visits with families.
- Participation in weekly supervisor meetings, including reviewing future internship goals and plans.
Seven Hills Rhode Island

Program Description: Seven Hills Rhode Island is a not-for-profit human service agency providing supports and services for people with developmental disabilities. The agency has a long and rich history, formed more than fifty years ago by volunteer parents seeking support and services for their children with disabilities. Today, Seven Hills Rhode Island operates Adult Services, Residential, Independent Living, and Child & Family Services programs, including an Early Intervention program for children from 0 to 3 years old.

Contact Info:
Seven Hills Rhode Island Early Intervention Director: Laurie Farrell
178 Norwood Ave.
Cranston, RI 02905
Phone: 401-921-1470
www.sevenhills.org/affiliates/sevenhills-rhode-island/

Internship Opportunities: Internships may be available at Seven Hills RI for students in Psychology, Human Development and Family Studies, Speech and Language Pathology, Nursing and Early Childhood Education. Interns will have the opportunity to learn how Early Intervention services are administered.

Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including resume, interview process, reference checks, a criminal background check and any other required processes as needed.
- Attendance at staff trainings and meetings.
- Observe a case throughout the entire EI process including: Intake, Evaluation, Individual Family Service Plan, and Services.
- Learn the role that a service coordinator serves within the agency.
- Learn EI eligibility criteria.
- Shadow EI staff on home visits with families.
- Assist in a variety of community and/or center based groups.
- Learn about diversity among families including differing socio-economic status and learning styles.
- Experience working in a trans-disciplinary team environment.
Looking Upwards, Inc.

Program Description: Founded in 1978, Looking Upwards is a private, nonprofit agency offering a wide array of services to adults with developmental disabilities and children with diverse needs. Looking Upwards programs have one overall goal, to support people in leading rich and satisfying lives. The organization partners with the individual and family members to develop a personalized plan. With the resources of a caring team of professionals, they assist the person in realizing dreams such as success at school, gratifying work, enjoyment of relationships and participation in the wider community.

Contact Info:
Looking Upwards
2974 East Main Road
Portsmouth, RI 02871
Phone: 401-293-5790
www.lookingupwards.org

Director: A. Valory McHugh
amchugh918@aol.com

Internship Opportunities: Internships may be available at Looking Upwards for students studying human services, including Psychology, Human Development and Family Studies, and Social work. Students majoring in Early Childhood Education, Nutrition and Nursing would also be a good fit with this agency. Interns will have the opportunity to learn how Early Intervention Services are administered.

Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including reference checks, a criminal background check and any other required processes as needed.
- Learning EI eligibility criteria.
- Learning the role that a service coordinator serves within the agency.
- Shadowing of Looking Upwards EI staff on home visits to ensure that services are being provided appropriately and are still necessary. Students are encouraged to attend home visits with a variety of practitioners, including those outside of the student's field of study.
- Providing appropriate play activities for children while meetings are held with parents during home visits.
- Assisting with evaluations, under the supervision of an EI practitioner.
- Providing office help including processing intake phone calls, clerical work, etc.
- Preparation of materials to use with families during home visits.
- Attendance at agency orientations as well as staff trainings and staff meetings.
- Learn about and demonstrate professional conduct, work etiquette, and respect for co-workers.
- Work with your internship supervisor to review internship contract, to ensure that required conditions are being met.
James L. Maher Center

Mission and Philosophy: The purpose of this center is to promote the general welfare of individuals with disabilities, both mental and physical; to provide and/or refer cases for diagnosis and treatment; to counsel and assist parents and to develop, coordinate and advocate for programs on behalf of individuals with disabilities. The center is committed to the principles of normalization, least restrictive environment, and integration. We believe and our programs are based on the premise that everyone can be helped regardless of his or her disabilities. If this help cannot be provided by the center, referrals are made to help the individual find the appropriate agency.

Contact Info:
120 Hillside Avenue
Newport, RI 02840
Phone: 401-848-2660
www.mahercenter.org

Director: Deborah Shears
deborahs@mahercenter.org

Internship Opportunities: Internships may be available at the Maher center for students in Psychology, Human Development and Family Studies, Communication, Early Childhood Education, Marriage and Family Therapy and Social Work. Interns will have the opportunity to learn how Early Intervention services are administered.

Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including resume, interview process, reference checks, a criminal background check and any other required processes as needed.
- Attendance at agency staff trainings and meetings.
- Observe a case throughout the entire EI process including: Intake, evaluation, Individual Family Service Plan, and intervention services.
- Learn the role that a service coordinator serves within the agency.
- Identify and complete a project that will be helpful for the center (e.g. making a family activity calendar to be sent home with clients). Projects will vary based on the student’s discipline and interests.
- Learn about and demonstrate professional conduct, work etiquette, and respect for co-workers.
- Create materials for children’s groups and parent’s groups.
- Learn about diversity among families including differing socio-economic status and learning styles.
Meeting Street

Our Mission: At Meeting Street, our mission to empower all children to reach their full potential begins as early as the first days of their lives. Meeting Street Early Intervention (EI) provides evaluations, therapeutic services and support for children from birth to age 3 and for their families. A child may need services for a variety of reasons - from complications associated with low birth weight to diagnosed medical conditions to developmental delays. Regardless of the need, Meeting Street is ready to help.

Our Philosophy: We believe in creating an environment that fosters true inclusion - a world where all children can laugh together, play together, and learn together. Our caring and dedicated professionals partner with children, young adults, families, educators, clinicians, businesses and community members throughout Rhode Island to help all children and young adults broaden their horizons and achieve their goals. Our challenge is to create a world where individuals of all abilities truly belong - a world free of stigmas or preconceived notions that hinder anyone’s ability to enjoy a full and meaningful life.

Contact Info:
1000 Eddy Street
Providence, RI 02905
Phone: 401-533-9100
www.meetingstreet.org

Internship opportunities: Internships may be available at Meeting Street for students studying Early Childhood Education, Special Education, Nursing, Social Work, Therapy, Physical Therapy, Occupational Therapy, Speech and Language Pathology and Nutrition. Interns will have the opportunity to learn how Early Intervention services are administered.

Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including reference checks, a criminal background check and any other required processes as needed.
- Shadowing of Family Service EI staff when they accompany staff on home visits.
- Assisting with evaluations, under the supervision of an EI practitioner.
- Help with scoring of evaluations and sometimes help administer services under the supervision of the EI practitioner.
- Facilitating center based groups including helping with curriculum writing and leading of children’s groups.
- Assisting with parent support groups.
- Learning EI eligibility criteria.
- Work with your internship supervisor to review internship contract, to ensure that required conditions are being met.
J. Arthur Trudeau Memorial Center

Mission: To promote an enhanced quality of life for individuals with developmental disabilities.

Vision: We envision a diverse community where all people are valued, safe, and treated with dignity, respect, and equality. In this community, all people have access to resources to enable them to lead productive lives; have opportunities to learn, grow, and achieve; and have opportunities for self-expression. In this community, there is mutual responsibility between the community and the individual; all contribute to the common good and each individual’s potential is realized.

Contact Info:

250 Commonwealth Avenue
Warwick, RI 02886
Phone: 401-823-1731
Supervisor: Patricia Maris

www.trudeaucenter.org

25 West Independence Way, Suite N
Kingston, RI 02881
Phone: 401-284-1980
Supervisor: Karen Ostrowsky
kostrowsky@trudeaucenter.org

Internship opportunities: Internships may be available at the Trudeau Center for students in Psychology, Human Development and Family Studies, Speech and Language Pathology, Occupational Therapy, Physical Therapy, Early Childhood Education, Social Work or others with a strong background and interest in working with children in a family centered environment. Interns will have the opportunity to learn how Early Intervention services are administered. Depending on the goals and skill level of an individual EI intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including reference checks, a criminal background check and any other required processes as needed.
- Learning EI eligibility criteria.
- Observe a case through the entire EI process, including: the intake process, evaluation, Individual Family Service Plan, and intervention services.
- Interviewing families to determine eligibility and services required.
- Scheduling appointments for the family with specialists.
- Coordinating and facilitating service provider update meetings.
- Visiting with families in their home to ensure that services are being provided appropriately and are still necessary.
- Work with your internship supervisor to review internship contract, to ensure that required conditions are being met.
- The Kingston site has requested that interns be available a minimum of 30 hours per week, while the Warwick site can accommodate varying schedules.
Children with Special Health Care Needs (CSHCN)

The U.S. Maternal and Child Health Bureau defines Children with Special Health Care Needs (CSHCN) as “those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.”

Common Health Care Conditions:
- Autism
- Mental Retardation
- Health Impairment
- Learning Disability
- Speech Disorder
- Emotional Disturbance

Career opportunities with CSHCN:
- Home health care
- Mobility specialists
- Dental care professionals
- Genetic counseling
- Family therapy & counseling
- Developmental Delay

CSHCN Programs:
- Ocean State Community Resource (OSCR)
  25 West Independence Way
  Kingston, RI 02881
  Tel: 401-789-4614

- Children’s Intensive Services
  26 Valley Road
  Middletown, RI 02842
  Tel: 401-848-6363

Home Based Therapeutic Services: What is HBTS?
HBTS is available to children and young adults, through age 21, with autism, developmental disabilities, or mental health needs. To be referred for this program a child must meet eligibility requirements as determined by the Department of Human Services. HBTS succeeds in its mission by maintaining the highest possible expectations for each child, as well as for the staff who support them.
**Children’s Intensive Services (Newport County Community Mental Health Center-NCCMHC)**

**Mission:** The mission of NCCMHC is to provide quality, comprehensive, professional mental health services to individuals, families, and the community in accordance with regulatory, licensing and ethical standards and in a manner that is culturally sensitive and competent.

**Vision:** To be acknowledged as a vibrant organization that strives for excellence and as a vital part of the community, providing opportunity and services to people in need in a caring and official manner.

**Contact Info:**
Children’s Intensive Services
26 Valley Road
Middletown, RI 02842
Phone: 401-848-6363
www.nccmhc.org

Administrator: Gary P. Cournoyer
gcournoyer@nccmhc.org

**Internship Opportunities:** Internships may be available at Children’s Intensive Services for students studying Early Childhood Education, Special Education, Human Development, Psychology, Social Work, and Counseling. Interns will encounter a variety of settings, including a day program, home visits, holistic counseling with expressive arts, music therapy groups, and possibly pet-assisted therapy. Depending on the goals and skill of an individual intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resource requirements including reference checks, a criminal background check, tuberculosis check and other required processed as needed.
- Accompany professionals and licensed therapists to shadow on home visits.
- Assist in day treatment schedule that enhances children’s social skill development and proper behavioral functioning.
- Participate in children’s groups and parent support groups, including the Children’s Outpatient Therapy Program.
- Work with a diverse group of clients and families.
- Possibly viewing psychiatric assessments and medical procedures by a child psychiatrist and registered nurse.
**Mission:** Ocean State Community Resources' Mission is to empower people to improve the quality of their lives. We support each individual to make choices, to build community connections and relationships, and to improve their status and skills. We realize that people are the authorities of their own lives and our role is to listen and to work together as they achieve their dreams and desires.

**Contact Information:**

25 West Independence Way  
Suite G  
Kingston, RI 02881  
Tel: 401-789-4614  
www.oscr.org

Executive Director: David Reiss  
dreiss@oscr.org  
Assistant Director: Melissa Linicus:  
mlinicus@oscr.org

**Internship Opportunities:** Ocean State Community Resources, Inc. (OSCR) Children’s Services Program offers individualized home and community based services for children and young adults with developmental disabilities. All of our clients are between the ages of three to 21. Internships may be available at OSCR for students in Psychology, Human Development and Family Studies, Early Childhood Education, Social Work, Policy Development or for other students with a strong interest in enhancing the quality of lives for children and families in need. Interns placed within the OSCR Children’s Services Program will have the opportunity to learn the individualized delivery of services offered through Home-Based Therapeutic Services (HBTS), Personal Assistance Services and Supports (PASS) and Respite Services. Depending upon the goals and skill level of an individual intern, experiences and responsibilities may include, but are not limited to the following:

- Adherence to all human resources requirements including resume, interview process, reference checks, a criminal background check and DCYF clearance.
- Understand the differences between the three programs offered through OSCR (HBTS, PASS and Respite).
- Work with children between the ages of 3 – 21 and their families.
- Observation and collaboration with Family Service Coordinator for all steps of case process.
- Attendance and participation in Clinical Supervision meetings.
- Understanding of varying diagnoses and of how socioeconomic and familial support factors impact upon child’s development.
- Assist in a variety of community social groups for children in our HBTS program.
- Assist in recruitment efforts for OSCR Children’s Services Program.
- Assist in the creation of visual supports that will enhance effective communication for children.
Student Intern Survey

We value your feedback. By completing the following survey, you will allow us to better meet the needs of students interested in EI internships in the future. Your participation is greatly appreciated.

1. When did you complete your internship:       ________/___________ Semester/Year

2. At what program did you work: ____________________________________________

3. Were you placed in your internship by the URI Early Intervention Recruitment and Retention office? Yes/No
   3a. If no, how was your internship set up?

4. What is your major (circle one)?
   1. Early Childhood Education/HDF
   2. Elementary Education
   3. Physical Therapy
   4. Occupational Therapy
   5. Speech and Language
   6. Human Development
   7. Psychology
   8. Nursing
   Other (please list) _________________________________________________

Experience with EI office

Please rate the following statements on a scale of 1-5.
1 = Strongly Disagree   2 = Disagree   3 = Neutral   4 = Agree   5 = Strongly Agree

<table>
<thead>
<tr>
<th>Statement</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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<tr>
<td>5. I was matched with a site that reflected my professional interests.</td>
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<td>6. Upon starting the internship experience, I arrived having completed</td>
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<td>7. I felt heard and responded to when I raised issues about the internship</td>
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<td>8. I felt adequately informed about the definition and purpose of Early</td>
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<td>9. The quality of the information offered in the Early Intervention</td>
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<tr>
<td>10. The internship setup with the Early Intervention staff at URI</td>
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Please continue on the next page
Comments
11. What could have been done to make this experience more successful?

12. What information could be added to the internship information binder to make it more useful?

13. Did you visit our website at http://www.uri.edu/frp/ei.htm? Yes/No
   If yes, did you find it to be useful?

Internship Activities
Please rate the following statements on a scale of 1-5.
1 = Strongly Disagree   2 = Disagree   3 = Neutral   4 = Agree   5 = Strongly Agree

14. When I started my internship, I felt accepted and welcomed by my co-workers

15. My supervisor’s personality and expertise was a good match for me.

16. My major and career aspirations seemed to fit well with my site placement and the services they provide

17. I had the right amount of one-on-one time with my supervisor to review my progress

18. Overall, tasks that I was assigned were relevant to my understanding of the field and my goals for my internship

19. I had ample opportunities to fulfill my agreed-upon hours for the semester.

20. I felt that my presence at the organization made a positive contribution to families and other professionals at my site.

21. Overall, my experience as an intern met my expectations.

22. Based on my working experience, I would recommend the EI office at URI to other students seeking internships.

23. If an appropriate job were open at this program, I would apply for it

If you rated any item as 2 (disagree) or 1 (strongly disagree), please explain in the space below.

We appreciate your participation!
Section III:
Additional Resources & Information
GUIDING PRINCIPLES
For Early Intervention Supports and Services in Everyday Routines, Activities, and Places

The Colorado Department of Education serves as the lead agency in Colorado for Part C of the Individuals with Disabilities Education Act (Part C of IDEA) through its Part C initiative, Early Childhood Connections. Early Childhood Connections has articulated this set of six principles that should guide how early intervention supports and services are provided. Source: A Guidebook: Early Intervention Supports and Services In Everyday Routines, Activities And Places In Colorado. Denver, CO: Colorado Department of Education (1999).

1. All children are unique, with their individual strengths and talents. The presence of a disability or special need is not the defining characteristic of any child.

2. Children grow and develop in the context of relationships with their families and other caregivers.

3. All children have the right to belong, to be welcomed, and to participate fully in the typical places and activities of their communities.

4. Children with and without special needs learn important things from one another.

5. Everyday routines, activities, and places offer countless opportunities for children to learn and develop.

6. The lives of families are enhanced when they are successful in maintaining their everyday lives and relationships.


Key Features

Of Quality Early Intervention Supports and Services

This handout describes eight key features of quality early intervention supports and services. These key features have evolved from the rich body of theory, research, policy, and practice guidance that has been evolving over the past few decades related to the fields of early childhood and developmental disability. Together, these features form a set of interrelated values and assumptions that should guide the provision of services for infants and toddlers with special needs and their families.

Family-Centered Services

The term “family-centered” refers to a rich constellation of beliefs, philosophies, policies, and practices for providing supports and services for children with special needs and their families. At the core of family-centered practice is the recognition that the family is at the center of a young child’s life and it is the family that is child’s constant support, decision-maker, and advocate. Family-centered practice honors the premise that families offer unique perspectives and expertise about their children. Families need to be regarded as full team members and need to participate in shaping all aspects of service delivery, including specific services for an individual child, program development, and policy formulation.

Building on these assumptions, one of the primary purposes of early intervention is to support families in their task of enhancing their children’s learning and development. One of the primary roles of the service provider is to work closely with families in identifying meaningful goals. Intervention needs to provide families with information, opportunities to learn new skills, and feedback on how to meet their goals and support their children to participate fully in daily routines and activities at home and in the community.

Cultural Competency

Complementing family-centered services is the concept of cultural competence. Families are unique. A family’s diversity might be expressed in many forms, including ethnicity, race, religion, linguistics, and economics, as well as by their values and beliefs. Early intervention programs and individual service providers need to provide their services in ways that honor the diversity of families.

Service providers need to continually increase their knowledge and skills for understanding and respecting the wide diversity of families that make up the community that they serve. Among the many skills one needs in order to practice in a

culturally competent manner are the abilities to: understand the impact of culture on how one views and acts in the world; use self-examination and self-awareness to accept and value one's own culture; request and use information from others to best understand who they are and how they would like to be treated; locate resources in the community to support their work with families; and, to work with and collaborate effectively with others across cultures.

Services Provided In Everyday Routines, Activities, And Places*

Early intervention supports and services should be delivered as much as possible in the context of everyday routines, activities, and places. Everyday routines, activities, and places are the day-to-day settings and activities that promote children's learning. Family routines are the usual events that are customarily a part of families' schedules. These routines might include meal time, bath time, play time, car rides, and nap time. Everyday activities that a family does with their infant or toddler might include such things as having fun at the playground, going for a walk, spending time with friends at a playgroup, shopping, and going to the library. Everyday places are those that families and typically developing children frequent, day-in and day-out, including the home, the neighborhood, and community programs such as a recreation center, library, park, or store.

The term "natural environment" is sometimes misinterpreted so that people think only about the place where supports and services are provided. Although location is important, it is only one element of quality supports and services. The elements of why the service is being provided, what the service is, who is providing it, when it is being provided, and how it is being provided are other essential characteristics. Rather than focusing only on place, if we carefully plan for the "why, what, who, when, and how," of services, we are much more likely to provide meaningful input to the child and family, and in this way, best support the child's learning and development. We believe this more elaborate interpretation is the fundamental intent of the call for services in "natural environments".

Why are everyday routines, activities, and places important? It is the nature of children to learn throughout the day, wherever they are, and whatever they are doing. Everyday experiences, events, and situations provide children with continuous learning opportunities that promote and enhance their development. Everyday routines, activities, and places are unique to each child and family and are identified by the family as they talk about their typical daily events, such as visiting grandpa, walking to the store, getting the mail, feeding the dog, and doing the laundry. Sometimes children learn through planned activities, but at other times children learn spontaneously by participating in daily activities and routines. For example, children learn about "water" while playing in the bathtub, washing hands in the sink, getting a drink, splashing in a puddle, or swimming in a pool. The location of these everyday routines and activities include such places as the bathroom, kitchen sink, backyard, and community playground. These typical activities are children's opportunities for learning and adults' opportunities for encouraging the child's development.

Children learn best when they practice skills in the settings and within the activities and routines in which they would typically use those same skills. Children are provided an opportunity to acquire skills within the context of daily life rather than in contrived learning situations that may not represent real life challenges. The use of everyday routines, activities, and places as a context for early intervention services provides numerous ways to incorporate these skills into a child's and family's life. Many naturally occurring routines and activities can serve as development-enhancing opportunities, increase the number of learning opportunities, and support learning.

**Participation**

One of the greatest heartaches for a family – any family – is when their child is excluded. One of the greatest gifts that service providers can offer is helping children participate in every day life. In addition to supporting learning and development, early intervention supports and services should promote equity and belonging. When services are delivered in everyday routines, activities, and places, children are supported to participate fully in community and family life and are much less likely to find themselves segregated from their peers. In this sense, early intervention supports and services honor the rights of persons with disabilities to participate in all of society.

Each child’s level of participation is the result of a complex relationship between the child’s abilities, other personal characteristics, and the circumstances in which the child lives. Society can facilitate or hinder participation. An environment with barriers (physical or social) can restrict participation, while environments that are accessible and involve people who promote positive interactions and have appropriate expectations can increase the child’s opportunities for more active participation. To maximize each child’s participation we need to assess the child’s ability to take part in various life domains and to identify conditions that impede and support participation. The standard for assessing a child’s participation is how a child of similar age without a disability will participate in that particular activity, in that particular community. We must observe the child to see if a discrepancy exists between the observed participation and the expected participation of a child without a disability. Interventions are then designed to increase participation by removing barriers and promoting conditions that result in increased participation. Strategies used to increase participation are very diverse, including use of low and high tech assistive technology, adaptation of activities and environments, changing or reframing attitudes that limit child participation, and increasing the child’s skill level. Early intervention should promote child participation in all areas of daily life, including play, self-care, and social activities.

**Developmentally Appropriate Practice**

For the past fifty years, the most widely accepted child development theories have recognized that opportunities for children to play are essential components for early cognitive, social, and language development. Building on this recognition, pre-eminent early childhood professional organizations have advanced an approach to educating


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and caring for young children known as developmentally appropriate practice. Developmentally appropriate practices are age appropriate and individually appropriate. Developmentally appropriate practice incorporates enjoyable play activities, thereby encouraging full participation in play activities as well as the acquisition and retention of skills gained in play. By being appropriate to the age and unique character of a given child, developmentally appropriate practices are responsive to, and respectful of, individual children.

Functional, Meaningful Outcomes

Supports and services should directly help young children function as independently as possible in their everyday lives. Functional outcomes are derived by listening to and working with families to identify the skills that children need to master, and/or the accommodations in tasks and the environment that will support the child to participate in family and community life. By focusing on functional outcomes, families and other caregivers recognize how to use the many learning opportunities that naturally occur in children's daily lives. In order to attain functional outcomes, skill development, accommodations, and adaptations must be addressed within the context of children's daily activities.

In addition to being functional to the child, outcomes need to be meaningful to the family. Early intervention services need to address families' concerns, priorities, and resources and “fit” the context of their culture, life-style, and schedules. Service providers can keep focused on meaningful outcomes by listening to and planning with families. Through conversations focused on the perspectives of the entire family, practitioners can learn who family members currently do and want to do in the future, who the key individuals are in their lives, and how best to blend early intervention services and supports so that children participate fully and families can reach their goals.

Transdisciplinary Team

The transdisciplinary team approach is based on the assumption that a child's development should be regarded as an integrated and interactive whole, rather than as a collection of separate domains. Likewise, supports and services are most successful when the team works as an integrated, interactive whole, rather than as a collection of separate disciplines. A hallmark of this team approach is the sharing of assessment, program planning, and implementation information and skills across disciplinary boundaries in the interest of providing an integrated program for children and their families. Information, skills, and knowledge is continually shared during team meetings and other interactions.

In the early intervention transdisciplinary team one person assumes the role of primary service provider with a family while other team members serve as consultants to this primary provider. There may be times when a specific need of a particular child

and family is so complex that the primary service provider is not able to meet that need, even with consultative support from other team members. In such cases, the team member from the most appropriate discipline might provide intervention together with the primary service provider.

The team includes professionals from a variety of disciplines and the child's parent(s), recognizing that the family is the primary decision-maker for the child and that the parent(s) choose their level of team participation. The team's performance relies on effective interaction skills including clear and open communication, effective problem solving, group decision making, and conflict resolution. These skills allow team members to transcend the scope of their own discipline, teach and learn across disciplines, and develop unified individualized plans.

Coordination

Every family with a child enrolled in Part C of the Individuals with Disabilities Education Act (IDEA) should be offered the support of a service coordinator who works in partnership with the family to assure that they receive the services to which they are entitled and to facilitate the development of the Individualized Family Services Plan (IFSP). Participating in the development of the IFSP is an integral part of service delivery for all providers.

The "officially" designated service coordinator may be a separate and distinct role from the early intervention service providing team. However, all service providers have inherent responsibilities to participate fully in the entire IFSP process and to coordinate closely with the family, service coordinator, and other supports and services effectively throughout their involvement with the family.

[* Portions of this section of this document are adapted with permission from: "Frequently Asked Questions About Natural Environments," published by the Georgia State Interagency Coordinating Council and Babies Can't Wait, Georgia's Part C Lead Agency.*]
Consider using some of these comments or questions to open a dialog about the child’s and family’s activities, environments, and routines.

★ We’d like to learn about some of your child’s daily routines and activities for teaching and learning. By sharing your daily activities and routines, you are identifying potential times and places for your child’s intervention.

★ Tell me about your day. What are the routines/activities or places that you go that most often occur for you and your child?

★ What types of things happen on most:
  Mornings?  Afternoons?  Nights?  Weekends?

★ Life with children usually makes us be pretty flexible. Can you give me some ideas about what usually happens before or after___________? (Use some event the careprovider mentions-- “One Life to Live.” Systematically identify events, and then proceed.)

★ If the careprovider is having difficulty identifying activities or routines, ask some specific questions about some of the following: dressing, breakfast, watching TV, car travel, preparing meals, household chores, nap, lunch and evening meals, yard work, bath, bedtime stories, or hanging out.

Possible follow-up questions to consider:

★ Are there any activities or places that you go (e.g., shopping, doctor’s appointments) that occur on a less than regular basis (e.g., once a week, every few days)?

★ Are there other events that occur fairly regularly or during the weekend (e.g., sport events for siblings)?

★ Who are the important people who participate in your child’s life? Who are helpful in your child’s care, and who may also have activities and routines for teaching and learning (e.g., grandparents, big brother, neighbor, friend)?
Family-guided Approaches to Collaborative Early Intervention Training and Services

★ What routines/activities does ______ (child’s name) ______ enjoy doing?
  • What makes this routine(s) enjoyable to ____________?
  • What does______________ usually do during the routine/activity?
  • What do you (or the other careproviders) do during the routine/activity?
  • How long does it take?

★ Are there opportunities for your child to interact with other children?
  • How many other children participate in this routine/activity?

★ What routine/activity(s) does ______________ not like?
  • What makes this routine/activity difficult or uncomfortable for ____________?
  • What does______________ usually do during the routine/activity?

★ What are your (family’s) expectations of the children during the routine/activity?
  • What do you do during the routine/activity?
  • How do you let the child know what is expected in this routine/activity?

★ Are there better times for you during the day or locations that are more comfortable for intervention routines?

SUMMARY INFORMATION

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<thead>
<tr>
<th>Potential Outcomes</th>
<th>Careprovider &amp; Child Routines</th>
<th>Good Times &amp; Places</th>
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<tbody>
<tr>
<td>What to do</td>
<td>Who</td>
<td>When</td>
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<tr>
<td></td>
<td>Which Routine</td>
<td>Where</td>
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(Adapted from Woods Cripe; Woods Cripe & Venn)

8/23/99    FACETS is a joint project of Kansas University Affiliated Program and Florida State University
Early Intervention Affects Families’ Quality of Life

Supports for families of young children with disabilities—as provided by Part C of the Individuals with Disabilities Education Act—are vital, according to a study that assessed family outcomes at the end of early intervention near their child’s third birthday. FPG Director Don Bailey, Ph.D., with FPG Investigators Anita Scarborough, Ph.D., and Lauren Nelson, Ph.D., co-authored the article in Pediatrics (December 2005)—“Thirty-Six-Month Outcomes for Families of Children with Disabilities Participating in Early Intervention”—that highlights the findings.

The Study: Questions & Answers
A nationally representative sample of over 2500 parents in 20 states completed a 40-minute telephone interview on or near their child’s third birthday. Five broad questions were asked. (Go to www.sri.com/acbs/ for a copy of the interview.)

1. Did early intervention enable the family to help their child grow, learn, and develop? Most parents knew how to care for their child’s basic needs, such as feeding, bathing, and dressing. They noted that they could help their child learn and develop. However, more than one-third indicated that they had a difficult time figuring out what to do about their child’s behavior.

2. Did early intervention enhance the family’s perceived ability to work with professionals and advocate for services? Most parents said that they knew how to work with professionals and advocate for services, and what to do if they did not feel their child was receiving needed services.

3. Did early intervention assist the family in building a strong support system? Most parents agreed that they had friends or relatives they could turn to for support or help in dealing with challenges related to their child’s special needs. The majority said their ability to work and play together as a family was fairly normal, though their child had special needs. But more than one-third had little chance to participate in community activities, such as religious, school, or social events.

4. Did early intervention enhance the family’s perceived quality of life? Most parents rated their quality of life as excellent, very good, or good.

5. Did early intervention help enhance an optimistic view of the future? Almost all parents expected their family’s future situation to be excellent, very good, or good.

In addition to answering these questions, parents weighed how the help and information from intervention have affected their family. Most parents rated their families as better off, with a very small percentage reporting that their family was about the same or worse off.

Room for Improvement
At the end of early intervention, families of infants and toddlers with disabilities generally describe themselves as competent and confident in their capacity to support their child, work with professionals, and gain access to formal and informal supports. These findings offer evidence that Part C programs have supported most families in their caregiving responsibilities.

The article also suggests areas for improvement:

• More specialized help for families of children with behavior problems
• Expanded efforts to help families gain access to community support systems
• More concerted efforts to ensure that early intervention is equally accessible and effective for families from diverse cultures
• More integration of pediatric health care with early intervention, particularly for children who have special health needs in addition to disability

These findings also underline the key roles that pediatricians and other professionals play in working with families to identify children who need and might qualify for early intervention. Early referral could result in more optimal outcomes for these children and their families.

From Bailey, D., Hebbink, K., Spiker, D., Scarborough, A., Malik, S., & Nelson, L. (2005). Thirty-six-month outcomes for families of children who have disabilities and participated in early intervention. Pediatrics, 116(6), 1346-1352. Snapshots are summaries of research articles, books, and other publications by researchers at the FPG Child Development Institute at UNC-Chapel Hill. Permission is granted to reprint this article if you acknowledge FPG and the authors of the article on which this Snapshot is based. For more information, contact FPG Publications at 919-966-4221 or FPGpublications@unc.edu.
The Importance of Joining Professional Organizations

You will find that many professional organizations sponsor meetings that include sessions designed to improve the expertise of professionals working with infants and toddlers. These groups offer professional-development opportunities of various kinds, including workshops or more formal sessions in which individual presenters share ideas. Some professional organizations focus on specific subject areas and specific categories of learners. Joining a professional group gives you an opportunity to meet people with shared interests. Members often get productive new ideas from even casual conversations with others in the group.

Many professional organizations sponsor the publication of journals that feature excellent, practical how-to-do-it articles. Subscribing to professional magazines like *Journal of Early Intervention*, *Zero to Three*, or *Young Children* will also give you advice and information from other early childhood professionals.

Many national organizations represent the general interests of those who work with young children with special needs. These organizations include:

- **The Council for Exceptional Children (CEC)**
  
  (CEC) This is the largest international professional organization dedicated to improving educational outcomes for individuals with exceptionalities, students with disabilities, and/or the gifted. CEC advocates for appropriate governmental policies, sets professional standards, provides continual professional development, advocates for newly and historically underserved individuals with exceptionalities, and helps professionals obtain conditions and resources necessary for effective professional practice.

  [www.cec.sped.org](http://www.cec.sped.org)

- **The National Association for the Education of Young Children (NAEYC)**
  
  (NAEYC) This organization is the world’s largest early childhood education organization with a national network of state, local and regional affiliates. By joining this organization you will connect with over 100,000 educators who want to work together to ensure young children make the most of their early years.

  [www.naeyc.org](http://www.naeyc.org)

- **Zero to Three**
  
  Zero to Three is a national nonprofit multidisciplinary organization that advances its mission by informing, educating and supporting adults who influence the lives of infants and toddlers. Zero to Three’s mission is to support the healthy development and well-being of infants, toddlers and their families.

  [www.zerotothree.org](http://www.zerotothree.org)
Professional Resources in Rhode Island

Professional development is designed to enhance your school and work growth opportunities. Professional development can be achieved through training, workshops, research and professional mentoring by a professional. The State of RI offers multiple conferences, RI Early Childhood Conference, Keys to Quality and Link to Learning as well as individual events around specific themes. Workshops are offered by many agencies, RIAEYC, and Kids Count just to name a few. Review the enclosed list of resources for more information and agencies to contact.

Professional Resources in Rhode Island:

The Arc, for people with intellectual and developmental disabilities
www.thearc.org

Prevent Child Abuse Rhode Island
(401) 728-7920
www.preventchildabuse-ri.org

Ready to Learn Providence (R2LP)
(401) 490-9960
www.R2LP.org

Rhode Island Association for the Education of Young Children (RIAEYC)
(401) 398-7605
www.riaeyc.com

Rhode Island Head Start Association
(401) 351-2750
www.riheadstart.org

Rhode Island Parent Information Network (RIPIN)
(401)270-0101 or (800)-464-3399
www.ripin.org

National Resources:

National Association for the Education of Young Children (NAEYC)  www.naeyc.org

National Education Association (NEA)  www.nea.org

Zero to Three  www.zerotothree.org
Section IV:

Information for College Supervisors
Early Intervention Recruitment and Retention activities are conducted through the Human Development and Family Studies Department at the University of Rhode Island. This project offers internship opportunities to students interested in pursuing a career in Early Intervention. The URI project is contracted by the Paul V. Sherlock Center on Disabilities.

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http://www.uri.edu/frp/ei.htm
Frequently Asked Questions

How many hours per week do interns typically work?
This is determined by the student’s program of study as defined in the course requirements. You decide this in consultation with the student. Most interns will work between 6-32 hours per week. Credits accompanying these hours are to be determined by your institution’s internship program.

How long will an intern be with the internship site?
See question 1 above. Internship duration is likely to be based on the academic calendar of the student’s institution (typically 1-2 semesters) but may vary depending on the role (i.e. the project or responsibilities of the intern).

How are responsibilities divided between the student, site supervisor, and college supervisor?

- **Student Intern:**
  - Maintains confidentiality: As an Early Intervention intern, you will be expected to respect the confidentiality of the families that you work with and at no time should a child or their family be discussed once you have left an EI visit. You are not to discuss a child with any parent (even their own). If there is a concern it needs to be addressed with the internship site staff and they will handle the situation with the family. Your professionalism in maintaining confidentiality of children with medical conditions/special needs is both expected and appreciated.
  - Maintains regular contact with the college supervisor to ensure that the necessary steps are being followed to secure the internship placement.
  - Creates a Learning Contract and job description, if applicable. This acts as a road map for the intern’s learning experience and serves as the outline for his/her portfolio. The Learning Contract will determine:
    1. What the intern wants to learn in the internship experience (goals).
    2. How the intern plans to meet each learning objective.
    3. How the intern will prove in his/her portfolio the objectives have been met.
  - Creates a professional portfolio: this is the compilation of the student’s learning. In the portfolio, the intern will provide evidence of meeting his/her learning goals.
  - Attends scheduled meetings: past student interns have indicated that regularly scheduled meetings with the site supervisor to discuss work assignments and performance greatly enhances the student’s experience. Also, willingness to provide more autonomy and responsibility as the intern demonstrates competence is a supervisory quality highly valued by students.
- Attendance: During your time at an Early Intervention site, you will become a valued member of the EI team. Your time scheduled with your site is important, so it is important that you come when scheduled, or notify your site supervisor in the event that you will be absent. You may be required to complete a specific number of hours, as determined by your program requirements, so missed hours may need to be made up.
- Fulfills field work and academic components of the internship as outlined in learning objectives.
- Completes an end of the internship evaluation survey.

**College supervisor:**
- Contacts Early Intervention Recruitment and Retention office with any questions or concerns
- Assists students in clarifying goals and offers guidance through the internship process.
- Approves potential internship sites.
- Grants final approval of the learning contract, if applicable.
- Provides a clear description of his/her assigned responsibilities during internship term.
- Meets with student’s site supervisor (if possible) in order to maintain open lines of communication throughout the internship.
- Monitor and supervise progress toward learning objectives.
- Assign the student’s letter grade.

**Site Supervisor**
- Contacts Early Intervention Recruitment and Retention office with any questions or concerns
- Interview potential interns to determine if the student meets necessary qualifications.
- Assists students with the agency description section of the learning contract, if applicable.
- Provides the intern with a clear description of his/her assigned responsibilities during the internship term.
- Designates a qualified agency staff member to serve as a student supervisor.
- Provides the intern with a meaningful orientation to the internship site’s services, organizational and operating practices.
- Provides the intern with opportunities to become significantly involved in agency activities consistent with the objectives outlined in the learning contract. These opportunities should include but are not limited to: hands on learning through completion of work tasks, professional opportunities (e.g. staff meetings and trainings), time to observe and shadow agency professionals.
- Provide a reasonably safe environment to work in, as well as adequate supervision and the necessary tools to perform their internship duties.
• Provides periodic work planning and review sessions for the intern and the site supervisor to assess progress and plan for the continued learning.
• Completes written evaluation of student intern’s performance to be returned to college supervisor.
• Completes an evaluations survey at the end of the internship.

**How is attendance handled?**
Interns become valued members of their agency’s team, so it is important that they report when scheduled and arrive on time. Interns are often required to complete a certain amount of hours in order to receive college credit, so absences often must be made up. Interns are expected to follow the agency’s procedures for reporting illness, absenteeism, and tardiness. All hours that an intern serves should be recorded by the agency and submitted to the college supervisor. If an attendance problem is not resolved through discussion with the intern, the site supervisor should contact the student’s college supervisor.

**How much supervision time is expected of the site supervisor?**
Past student interns have indicated that regularly scheduled meetings with the site supervisor to discuss work assignments and performance notably improve the student’s experience. Many agencies choose to have weekly meetings with student interns.

**How are interns evaluated?**
Interns will provide their site supervisors with evaluations at the midterm (depending on length of internship) and final evaluations to be completed and returned to the student’s college supervisor. Ideally, evaluations should be discussed with the student before being submitted.

**Are Interns typically paid for their time?**
Agencies are not required to pay the student. Students generally complete internship hours to receive academic credit.
Goals and Objectives of an Early Intervention Internship

- To provide the opportunity for students to test theory learned in the classroom in an actual working situation.
- To provide a system of accountability and encourage professionalism.
- To provide an opportunity for students to develop positive work habits.
- To gain professional attitude, growth, maturity, and judgment.
- Facilitates networking with professional contacts and references.
- To provide an opportunity to test aptitude for or interest in Early Intervention.
- To help students strengthen their professional philosophy and understanding of Early Intervention.
- To become familiar with Early Intervention in general, and specifically to become acquainted with the Early Intervention Program at one particular EI site.
- To gain understanding of the impact of Early Intervention on the emotional and developmental needs of infants and toddlers.
- To have the opportunity to interact with families on a one-to-one basis and in group situations.
- To become acquainted with the needs of children with developmental delays and to recognize creative and flexible programming in meeting these needs.
- To gain a basic and practical working knowledge of Early Intervention procedures, terminology, and the roles of multidisciplinary professionals within the EI setting.
- To strengthen ability to interact and relate to the multidisciplinary team to promote positive experiences for children and families serviced by EI.
Thank you!

The URI Early Intervention Recruitment & Retention Office would like to thank you for participating in our internship program.

Your assistance in providing positive, reflective, and rewarding experiences for Early Intervention interns makes a difference in their lives and the lives of the families they develop relationships with during their internship.

We appreciate your efforts and assistance in making this program successful!

University of Rhode Island
Early Intervention Recruitment & Retention Grant
401-874-4036
Section V:

Information for Site Supervisors
Early Intervention Recruitment and Retention activities are conducted through the Human Development and Family Studies Department at the University of Rhode Island. This project offers internship opportunities to students interested in pursuing a career in Early Intervention. The URI project is contracted by the Paul V. Sherlock Center on Disabilities.

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Frequently Asked Questions

How many hours per week do interns typically work?
This is determined by the student’s program of study as defined in the course requirements. Most interns will work between 8-32 hours per week. Credits accompanying these hours are to be determined by the internship program at the student’s institution.

How long will an intern be with the agency?
See question 1 above. Internship duration is likely to be based on the academic calendar of the student’s institution (typically 1-2 semesters) but may vary depending on the role (i.e. the project or responsibilities of the intern).

How are responsibilities divided between the student, site supervisor, and college supervisor?

- **Student Intern:**
  - Maintains confidentiality: As an Early Intervention intern, you will be expected to respect the confidentiality of the families that you work with and at no time should a child or their family be discussed once you have left an EI visit. You are not to discuss a child with any parent (even their own). If there is a concern it needs to be addressed with the internship site staff and they will handle the situation with the family. Your professionalism in maintaining confidentiality of children with medical conditions/special needs is both expected and appreciated.
  - Maintains regular contact with the college supervisor to ensure that the necessary steps are being followed to secure the internship placement.
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We appreciate your efforts and assistance in making this program successful!

University of Rhode Island
Early Intervention Recruitment & Retention Office
401-874-4036
Site Supervisor Survey

We value your feedback. Completing the following survey will allow us to better meet the needs of students interested in EI/CSHCN internships in the future. Your participation is greatly appreciated.

1. Name of site: ________________________________________________

2. When did you supervise this student? ___________/___________
   Semester/Year

Startup

5. What was your student intern’s major?
   1. Early Childhood Education/HDF
   2. Elementary Education
   3. Physical Therapy
   4. Occupational Therapy
   5. Speech and Language
   6. Human Development
   7. Psychology
   8. Nursing

   Other (please list): _____________________________________________

Please rate the following statements on a scale of 1-5.
1 = Strongly Disagree   2 = Disagree   3 = Neutral     4 = Agree    5 = Strongly Agree

3. The student’s major and career aspirations were a good fit with Early Intervention/CSHCN and the services we provide

4. Upon starting the internship experience, the intern arrived having completed all necessary paperwork, human resource requirements, etc.

Orientation

Please rate the following statements on a scale of 1-5.
1 = Strongly Disagree   2 = Disagree   3 = Neutral     4 = Agree    5 = Strongly Agree

6. I felt heard and responded to when I raised issues about the internship process with the URI staff

7. The intern was adequately informed about the definition and purpose of Early Intervention/CSHCN prior to the start of the internship.

8. The information offered in the Early Intervention handbook was useful and seemed to help prepare the intern for his/her responsibilities.

9. The internship setup with the Early Intervention staff at URI increased my level of comfort with the initiation process and with my responsibilities as a supervisor

If yes, what information could be added to the internship information binder to make it more useful?
Comments

10. Have you received a copy of the EI grant handbook? Yes/No
   If yes, what information could be added to the internship information binder to make it more useful?

11. What could have been done to make this experience more successful?

12. Have you visited our website at www.uri.edu/frp.ei? Yes/No
   If yes, did you find it to be useful?

Internship Activities

Please rate the following statements on a scale of 1-5.
1 = Strongly Disagree  2 = Disagree  3 = Neutral  4 = Agree  5 = Strongly Agree

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<tr>
<td>13. The student was professional, motivated, and made a positive contribution to our organization</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<tr>
<td>14. The intern’s personality was a good match for my site.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>15. I had the right amount of one-on-one time with the intern to review his/her progress.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>16. The student provided insights into the field and/or a new perspective that was beneficial to professionals at my site.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>17. Overall, my experience as a supervisor met my expectations</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>18. I felt this intern was useful to my site as a professional in training.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<tr>
<td>19. The intern fulfilled his/her hours as expected (i.e. promptly notified us when couldn’t make a schedule appointment, rescheduled when necessary, arrived and left on time, etc).</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<tr>
<td>20. Based on my supervisory experience, I would recommend the EI office at URI to other providers.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<tr>
<td>21. If an appropriate job were open at my program, I would hire this intern</td>
<td>1</td>
<td>2</td>
<td>3</td>
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If you rated any item as 2 (disagree) or 1 (strongly disagree), please explain in the space below.

We appreciate your participation!
Early Intervention Internship Competency Domains

This assessment is completed by the supervisor upon completion of internship. Students may not be exposed to all of these domains.

**NE** = No experience: Student shows no awareness of this particular skill/knowledge.

**B** = Beginner: Student recognizes, understands and has awareness of skill.

**C** = Competent: Student sometime uses this skill.

**P** = Proficient: Student is consistently able to apply skills in field based setting.

**DK** = Don’t know. Supervisor has had no opportunity to observe the student's competency in this area.

### Internship Skills

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<th>Internship Skills</th>
<th>NE</th>
<th>B</th>
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<tr>
<td>1</td>
<td>Student can interact with families in a supportive non-judgmental respectful manner.</td>
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<td>2</td>
<td>Student is able to provide positive feedback to families.</td>
<td></td>
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<td>3</td>
<td>Student uses effective, research based techniques for talking to families about concerns with child’s development, or behavior.</td>
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<td>4</td>
<td>Student can effectively encourage parent involvement in the activity of visit.</td>
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<td>5</td>
<td>Student can use effective rapport building techniques like asking questions about the families’ life, or referring to something discussed at previous visit.</td>
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<td>6</td>
<td>Student can identify risk and protective factors of families who have a child with a disability; for example isolation of parent is a risk factor and social support a protective factor.</td>
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<td>7</td>
<td>Student can describe and use strengths based model which capitalizes on what children can do rather than focusing on their deficits.</td>
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### Internship skills

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<td>8.</td>
<td>Student can explain the importance of play and ways to incorporate therapy into everyday routines.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
<td>P</td>
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<td>9.</td>
<td>Student can differentiate typical from atypical child development.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
<td>P</td>
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<tr>
<td>10.</td>
<td>Student can describe the developmental skills developed by typical child activities.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
<td>P</td>
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<tr>
<td>11.</td>
<td>Student can measure progress towards IFSP goals.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
<td>P</td>
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<td>12.</td>
<td>Student can assist families to increase child’s participation in community settings.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
<td>P</td>
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<tr>
<td>13.</td>
<td>Student can describe the different personnel that make up the EI team.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
<td>P</td>
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<tr>
<td>14.</td>
<td>Student is able to communicate the benefits of playgroup or socialization groups for children and parents.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
<td>P</td>
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<tr>
<td>15.</td>
<td>Student can effectively encourage participation in group meetings.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
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### Knowledge of Early Intervention

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<tr>
<td>1.</td>
<td>Student is familiar with a variety of different cultures.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
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<td>2.</td>
<td>Student understands the diverse families served by the E.I. agency she/he works at.</td>
<td>NE</td>
<td>B</td>
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<td>3.</td>
<td>Student is knowledgeable about children with special needs and their families.</td>
<td>NE</td>
<td>B</td>
<td>C</td>
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<tr>
<td>4.</td>
<td>Student can explain how family systems theory is related to Early Intervention i.e. that child’s disability impacts the whole family.</td>
<td>NE</td>
<td>B</td>
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<td>5. Student understands the importance of inclusion which is the practice of including children with disabilities in all natural settings like school and community programs.</td>
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<td>6. Student is familiar with IDEA, the Individuals with Disabilities Education Act.</td>
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<td>7. Student is familiar with eligibility requirements for Early Intervention.</td>
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<td>8. Student is familiar with HIPPA regulations and policies related to confidentiality and professionalism.</td>
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<td>9. Student is familiar with the transition process.</td>
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<td>10. Student is familiar with the process used to help families prioritize, remove barriers and plan next steps in participating in community settings.</td>
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