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ABSTRACT

This document reports on the Southwest (Region VI) Child Development Associate (CDA) assessment program during the 1973-74 and 1974-75 school years. Activities conducted through the office of the regional coordinator of CDA assessment are listed. An assessment system was developed and implemented to meet three needs: (1) to screen and rank CDA trainees on a priority basis for entry into the national CDA consortium assessment system; (2) to improve the quality of CDA training programs through assessment of trainee needs; and (3) to disseminate information about CDA training. The assessment system is described and critiqued, and recommendations for improving it are offered. Also included are the assessment manual used; a brief tabulated analysis of 1975 baseline data on the candidates, their training experience and their performance ratings; approximately 40 pages of "performance profiles" for the training institutions involved; information on a January 1975 workshop for CDA and Head Start Supplementary Training (HSST) personnel; and an overview of Region VI CDA written by an outside consultant. (SB)

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FINAL REPORT  
1973 - 1974 - 1975

OFFICE OF THE  
COORDINATOR OF CDA ASSESSMENT  
FOR SOUTHWEST REGION

TO  
CDA CONSORTIUM  
TEXAS SOUTHERN UNIVERSITY  
TEXAS OFFICE OF EARLY CHILDHOOD DEVELOPMENT  
OFFICE OF CHILD DEVELOPMENT, REGION VI OHD/HEW

by

J. K. Southard

June, 1975

ED135458

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## FOREWARD

This report is divided into two sections. The first section is a narrative summary of the activities of the Coordinator of CDA Assessment for the Southwest Region 1973 - 1975.

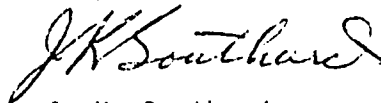
The second section is a statistical analysis of Southwest Region baseline data collected during the spring of 1975.

It would have been impossible to mail out over 900 priority statements regarding CDA assessment together with CDA Performance Profiles for each without the support and tireless effort of my secretary Linda Harriss. Also, my daughter, Kara, a junior high schooler, stuffed envelopes, scored tests, tallied results, and worked very hard on her vacation time to help her dad. My daughter Kim, a freshman in college, put in many hours putting data on computer program sheets and key punching the computer cards. Out of 896 computer cards keypunched she only had one error. The cards were delivered to the computer on the evening of June 19. They were run on June 20 and 22. The computer output was ready on the afternoon of June 22.

This report was completed on June 23. A great deal more information is available for analysis; but within the time, money, and manpower limitations this is the optimum result.

It was a family enterprise.

Respectfully,



J. K. Southard

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FINAL REPORT  
1973 - 1974 - 1975  
COORDINATOR OF CHILD DEVELOPMENT ASSOCIATE ASSESSMENT IN REGION VI

Introduction

In September, 1973 representatives of the HEW Region VI Office of Child Development, Texas Southern University, Texas Office of Early Childhood Development, and CDA Consortium agreed jointly to establish an office to coordinate CDA assessment activities in the Region. Primary funding of the office was assumed through the regional Leadership Development Program located at Texas Southern University. The TOECD and CDAC provided supplementary funds for the operation of the office located in close proximity to Regional OCD in Dallas. The office consisted of a full time professional coordinator (Dr. J. K. Southard) and a part time secretary (Mrs. Judith Franklin). TSU acted as the fiscal agent.

The office was continued for a second year at Dallas beginning in July, 1974 with the same full time coordinator and a full time secretary (Ms. Linda Harriss). During the second year salaries of the employees were handled through TSU while all other expenses of the office were paid through the CDA Consortium. TOECD provided grant funds to CDAC to compensate for certain specific services in the State of Texas. At the beginning of the second year of operation the Executive Director of the CDAC informed the Regional Coordinator that this would be the last year that the CDAC would entertain such an arrangement ... CDAC organization would not in the future involve established institutional ties or diversified/regional offices.

The report presented herein is an overview of the activities conducted through the coordinator's office for the two year period. The report is divided into (1) Operations: 1973-74 and 74-75; (2) a regional screen for CDA assessment; (3) a critique; (4) recommendations.

Operations 1973-75

First and second year operational summaries are presented below under each of the operational plan objectives for the office of the Regional Coordinator of CDA Assessment.

1. The Coordinator shall establish a regional communication system which will facilitate exchange of ideas and description of CDA activities in

the region/nation.

1973-74. Mail List. 772 names and addresses to be incorporated into the mail system were submitted to CDAC. Numerous others were told to contact the Consortium directly. The mail list descriptors and organization of the mail system were being revised by the CDAC.

Multi-media public information system. Slide film strip presentation on CDA was made available through the Coordinator's office to interest groups in the region. The Coordinator submitted copy in February to the CDAC for a newsletter to be sent to all names on the regional mail list. It was received by CDAC but never sent.

Fourteen presentations at workshops/conferences to 729 participants. Numerous other presentations at staff meetings of different organizations. Made 57 out-of-town trips totaling 99 days. Seven trips to CDAC in Washington; 14 to TOECD in Austin.

Visited 59 different early child development centers. Observed 118 different classrooms/teachers ranging from a few minutes to an hour. Averaged fifteen minutes in each.

1974-75. In excess of 2,000 names and addresses of people/institutions interested/involved in CDA in the region have been accumulated in the office and have been forwarded to CDAC. It was suggested that monthly or bi-monthly news bulletins related to CDAC and local CDA activities be inaugurated to facilitate communications. Monthly news bulletins were prepared by the Coordinator initially for use by CDAC but were discontinued because the news bulletin idea did not materialize at CDAC until the spring of 1975.

The Coordinator made presentations regarding CDAC developments at six different conferences/workshops to approximately 450 people total.

Made 35 out-of-town trips totaling 71 days. Most trips were site visitations and workshops. Made 12 trips to Austin, TOECD; 4 trips to CDAC.

Total travel for the 22 months: 92 trips for 170 days or 38% of work involved travel. Total travel expenditure for 22 months was approximately \$15,000 or an average of \$170 per trip.

2. All CDAC activities in the region will be coordinated through the Coordinator.

1973-74. CDAC and TOECD cooperative project for the seminar on variant perspectives of competency-based education was discussed and shelved for the time being due to the press of time and inability to arrive at a consensus regarding the objectives of the seminar among the principal parties involved.

CDAC Coordinator information flow. Copies of all memoranda emanating from the Coordinator's office to people in the region were submitted to the office of field services of the Consortium. Interoffice memoranda within the Consortium, responses from the Consortium to requests from the people within the region, and other information emanating from the Consortium have been sporadic. From March 30, 1974, to June 4, 1974, only one packet of information from the Consortium was sent to the office of the Coordinator. That one packet included the questionnaire that was sent to the CDAC Representatives related to the field test and was sent as a result of a special request from the Coordinator to the director of the field test effort. The office of the Coordinator did respond to a time management survey request concerning the operations of the Consortium.

1974-75. During the second year of operation the Regional Coordinator reported directly to the CDAC Director of Research. The Regional Coordinator acted as CDAC contact person for CDAC Reps in Oklahoma (Eastern Oklahoma pilot) during Winter 1975 CDAC field test of assessment system. The New Mexico pilot people in the field test reported to someone in Washington. Other CDAC colloquies, workshops, or activities conducted in the five state region were held without the Coordinator being involved or invited to attend.

A problem arose in that Texas CDA pilot training programs were involved in all CDAC field tests during 1973-74. They were not included by CDAC in 1974-75 field tests.

3. Coordinator will participate as an adviser/consultant in the following CDAC activities: monthly staff meetings, meetings of the CDA Board of Directors, etc.

1973-74. Attendance of Coordinator at monthly staff meetings of the Consortium and the CDA Board of Directors was performed as requested by the Consortium: 4 staff meetings, 2 board meetings.

Advisor on CDA Assessment System. Assisted in design of field test. Discussion paper was submitted in January regarding organization and delivery system for the CDA assessment and credentialing process in Region VI during 1974-75. Assignments for pilot testing CDA assessment tools were suggested for study in the region following the January workshop in Dallas. Initial assignments were completed. The second set of assignments for the pilot testing of tools made to the Consortium was shelved by the Consortium.

1974-75. Coordinator was not requested to attend staff meetings or board meetings during the second year.

Coordinator assisted in compiling/analyzing data from spring 1974 field test. Submitted critiques of assessment system procedures as requested/some not requested.

Coordinator participated in CDAC workshops on assessment in Washington, September 24-27, 1974; Denver, December 12-14, 1974; and Washington, January 20-24, 1975.

4. All CDAC Assessment system interventions in Region VI will be coordinated through the Coordinator.

1973-74. Coordinator was involved in coordinating all activities relating to the field test and pilot test within the region. Coordinator was involved to a limited extent with the Consortium's regional consultants contracted directly by the Consortium.

1974-75. With the exception of the winter field test involving the Coordinator with the assessment of five candidates, no Consortium activities took place in the Region. Therefore, the Coordinator devoted the remaining time and attention to the collection of baseline data and development of an assessment screen for the region ... described later in this report.

5. The Coordinator will work with the Texas Office of Early Childhood



Development to: design assessment systems/credentialing procedures, etc.

1973-74. Fourteen meetings with the staff of TOECD in Austin have been held, providing overviews of CDA assessment developments. The Coordinator of the TOECD Pilot Projects devoted approximately 20 days to assist the Regional Coordinator in identifying pilot test subjects and field researchers for the pilot test effort and for the field test of the CDAC assessment system.

1974-75. Coordinator had twelve meetings in Austin and numerous other contacts with TOECD staff. A problem arose in 1974-75 when it appeared that the Consortium would not be able to follow through on the following CDAC-TOECD contract provision:

"It is expressly agreed that the Consortium will use the assessment system developed by the Consortium to assess a maximum of 200 Child Development Associate trainees judged by the Department to meet Consortium guidelines and enrolled in the Department sponsored Child Development Associate pilot programs throughout the State of Texas. Such assessment shall be accomplished no later than June 30, 1975. All rights and designations in force through the Consortium shall accrue to those trainees assessed under provision of this agreement."

It is expressly agreed and understood by both parties to this contract that the Consortium will perform the services and obligations imposed by this contract through a Regional Assessment Office located in Dallas, Texas."

Realizing that a problem was arising, the Coordinator requested that the TOECD pilots be included in the CDAC winter field test. The request to have four to six CDAC Representatives from Texas involving approximately 14-20 candidates in Texas pilots in the winter field test was rejected because they were not included in the design.

In March the problem intensified because the Texas pilots were

scheduled to close in June 1975. The Coordinator with TOECD staff designed a plan in March, revised in April, wherein the commitment to assess the 200 candidates in Texas pilots could be attained by August 1975. The plan included meeting all CDAC requirements/specifications for the assessment process. However, the plan to assess 188 candidates would have cost an additional \$4,830.00. No response was received from the Consortium regarding the plan.

Negotiations regarding the contract commitment were then assumed by the TOECD principals with the Consortium. It has been relayed to the Coordinator by TOECD that the Consortium has committed to assess all Texas pilot candidates by December, 1975. The Coordinator was not asked or involved in those negotiations and has not been contacted about the new agreement.

6. The Coordinator will work with Texas Southern University ...

1973-74. Contractual obligations and employment contract with Texas Southern University for both the Coordinator and his secretary have been satisfactory. A problem has been the cash flow related to travel reimbursements. The University system is not geared to meeting the needs of personnel involved in extensive, day-to-day travel. Cooperation of staff at TSU/LDP has been outstanding.

1974-75. During the second year salary for the Coordinator and half of the secretary's salary came from TSU while all other expenses of the office were paid by the CDA Consortium under the agreement with TOECD.

TSU provided printing services for the Coordinator. A difficult task was completed by the TSU-LDP staff in record time - a first rate, quality job. Thanks!

An excellent working relationship has existed between the Coordinator and TSU during the second year.

7. The Coordinator will work with Region VI Office of Human Development ...

1973-74. Coordinator attended weekly office staff meetings and other meetings as requested by the region.

Coordinator provided consultant review of projects and proposals re-

lated to early childhood education. All trip reports and other special reports were submitted upon request by regional personnel.

1974-75. Coordinator continued role of consultant to Regional Office staff in CDA - related matters. As a result of needs identified to improve training in the region, the Regional Assessment - system or collection of baseline data was designed and implemented.

The Coordinator has been involved in designing a broad management information system for the region which will be implemented in 1975-76.

8. The Coordinator will work with local and state agencies in the region . . .

1973-74-75. The Regional Coordinator has participated as a CDA presenter in numerous organization conferences/workshops within the region. The Coordinator has also worked closely with the private sector of child care workers and has been given an honorary membership in the Alliance of Child Development Organizations, an alliance of private for profit day care organizations.

#### 1973-74 MAJOR ACCOMPLISHMENTS

##### 1. Pilot Test Effort

Identified and trained 33 field researchers to use CDAC Assessment tools in the pilot test study in a two-day workshop in Dallas. Researcher and pilot test site lists attached. Emphasis on pilot test of CDAC instruments was supplanted by the field test. Much of the ground work laid for the pilot test may be incorporated in future developments.

##### 2. Field Test Effort

Identified and assisted in training of 34 Representatives. List of Representatives and LAT Test Subjects attached. Many critiques and problems have been forwarded directly to the CDAC Field Test Director as they developed. Primary problems were time, lack of

protocol considerations at the local level, and communications. The organization was weak in that the Coordinator had to contact 34 people to find out what was happening--a pyramid structure should be established for future developments on a broad scale.

#### 1974-75 MAJOR ACCOMPLISHMENTS

1. From a report filed with CDAC, Region, and TOECD on April 21, 1975:

On April 17, 1975, the CDA Regional Coordinator made a progress report to the CDA subcommittee of the Task Force regarding national CDA Consortium efforts and the Southwest Region collection of baseline data/screening model. The following resolutions and regional objectives were formulated by the subcommittee and were presented to the Task Force for action on April 18.

The following Resolutions were passed by the 35 member, five state Task Force on April 18, 1975:

- I. The Region VI Child Development Task Force resolves to support the CDA Consortium Board of Directors' decision (Approved March 27, 1975) for assessment leading to the Child Development Associate credential and encourages the CDA Consortium to continue the development and refinement of the process by which it is implemented.
- II. The Region VI Child Development Task Force resolves that the CDA Consortium Board of Directors should encourage regions and states to develop screening models for the selection of candidates to be assessed for the CDA credential.
- III. The Region VI Child Development Task Force resolves that the Child Development Associate

Board of Directors should accept the Region VI screening model for use in establishing CDA assessment priorities in Region VI during FY 1976.

The following operational objectives were passed by the Task Force for the Region during FY 76:

1. To establish a CDA Consortium - Region VI Child Development Task Force joint plan for cooperative action to achieve the following objectives:
    - a. To obtain adoption of the CDA Credential by the appropriate agencies of the five states in Region VI.
    - b. To continue the development and use of Region VI screening model for establishing priorities for CDA assessment in the Region.
  2. To establish a management information system to collect and disseminate data on and for Regional CDA training programs.
  3. To meet in July to review data collected and to establish Regional program improvement objectives for 1975-76.
2. Collection of baseline data and implementation of prioritizing screen for CDA assessments in the region:

Coordinator in cooperation with University Research Corporation conducted a workshop in Irving, Texas, January 28-30, 1975, to train CDA/HSST personnel to collect data relating to the system design. More than 90 persons from seven states and Washington attended the workshop. (Evaluation of the workshop is included in addendum.)

Approximately 900 CDA/HSST trainees in the Region have responded to the study by sending in data/instruments to the Coordinator. A comprehensive description of the "screen" or data collection assessment is presented in the following section.

## THE REGION VI ASSESSMENT SYSTEM

### Introduction

In order to understand how and under what circumstances the Region VI Assessment System or collection of baseline data/prioritizing screen developed, it is essential to put the plan in historical perspective. From the beginning of the project the Coordinator saw the office as an arm or extension of the Consortium not only responsible for liaison officer for the Consortium but responsible for assessing needs and characteristics of training/trainees in the potential CDAC market. In that regard it was assumed that that responsibility carried with it the formulation of an organizational structure in the field for the CDAC assessment/credential delivery system.

On January 30, 1974, after five months in the field the Coordinator submitted to the Consortium a tentative plan whose objective was "to develop a feasible organization and delivery system for the CDA assessment and credentialing process in Region VI." The plan was revised extensively and was included in the June 1974 end-of-year report.

The 1974-75 operational plan for the Coordinator submitted in July 1974 called for the Coordinator "to identify personnel/projects in regional federally funded projects who might be involved in CDA field studies or ultimately subject to CDA assessment (for the national credential)." It was further planned that "The Coordinator will identify characteristics of the CDA population/universe in the region and forward to CDAC."

The monthly report for August pointed out that progress was being made on developing a self-assessment system for potential CDA candidates and that an organization/administrative structure was being developed to meet growing needs (concerns) of CDA candidates in the region.

September, 1974, request was made of CDAC to put into operation a plan to collect baseline data on CDA trainees in the Region: task analysis and knowledge base.

October-November 1974, final outline of plan, drafts of all instruments to be used, and date for workshop to implement the plan were set for January 28-30, 1975, and were sent to CDA Consortium. Critiques were requested

from CDAC and many other significant persons. First contact was made in November with University Research Corporation to co-sponsor workshop under their OCD contract obligations.

December 1974. Met with representatives from University Research Corporation to finalize plans for January workshop. Completed all plans, instruments, and materials for study. Final CDA criteria (organizers) from CDA Consortium were received to be included in Assessment Manual. Everything went to printer. (Copy of Assessment Manual is in Appendix.)

January 1975. Went to Washington for CDAC workshop January 20-24. While there, met with University Research Corporation staff to finalize plans for workshop. Conducted workshop on January 28-30 in Irving, Texas.

As of the end of the project, June 1975, approximately 900 CDA trainees throughout the Region have been incorporated into the study.

A description of the system employed is presented in the following sections. To introduce the system a brief clarification of purpose and method was disseminated on April 16, 1975. That paper is reproduced on the following pages. Procedures used with instruments for analysis follow.





## The Child Development Associate Consortium

Child Development Associate  
1507 Pacific Ave., Room 624  
Dallas, Texas 75201

DATE: April 16, 1975

SUBJECT: CDA Assessment in Region VI OCD: Clarification of purpose

The Problem: At present there are approximately 1,000 early child development workers involved in CDA training in the Region through HSST, seven Texas pilot projects, and two national OCD pilot projects. All of the trainees are knowledgeable about CDA and are interested in being assessed for the national CDA credential. Realizing that a developmental project cannot consider the universe at the beginning, the question was ... where do we begin?

Secondly, even though all programs are called CDA and are supposedly competency-based, program effectiveness/quality vary widely in subject emphasis and approach. How can programs be improved? Again, the question is ... where do we begin?

Thirdly, many people use the terms CDA and competency-based in common. However, their understanding as evidenced in methodology is as different as there are numbers of practitioners. How can a common definition be presented so that meaningful pedagogical dialogue can ensue? Again, where do we begin?

A Solution: A model has been implemented which would meet three needs at once, namely:

1. provide a screening process for ranking trainees on a priority basis for entry into the national CDAC assessment system.
2. provide information basic to improve program quality through a broad-based needs assessment system.
3. provide a vehicle for disseminating the meaning and intent of CDA competency-based training through process assessment techniques.

**The Method:** Use national CDA performance criteria as the basis for data collection ... relate process assessment to field supervisory techniques ... find out to what extent different levels of workers are involved in child center activities, that is, who are we dealing with ... find out if trainees think they are competent and sufficiently knowledgeable to be assessed as competent CDA's using national criteria ... find out if the CDA trainers themselves think their trainees are competent according to national criteria ....

Data collection in the field by trainers and trainees - centralized compilation and analysis - immediate feedback of findings.

**The Tools:** Position Analysis form. Trainees respond to an occupational analysis questionnaire designed to determine the extent of their involvement in early child center activities.

CDA Performance Profile. Trainees review national CDA performance criteria and determine if they feel they are competent or need to improve in each of thirteen areas ... a self assessment.

Trainers respond to the same Profile to ascertain how they assess the performance of their trainees according to the same criteria.

CDA Portfolio. To obtain an index of how prepared trainees are to enter the CDA assessment system, each was asked to specify to what level of completion their portfolio has been developed according to CDA Consortium guidelines.

Record of Development. CDA trainers use the "Record" to record supervisory visits/methods and relate that to trainees as a part of formative supervisory processes.

Concept Inventory. A closed inventory instrument will be responded to by trainees to obtain a measure/indicator of common and diverse knowledge in the field.

**The Results:** Based on data collected from the field using the tools and methods described, the following summary of findings will be available.

1. A prioritized list (nine ranked groups) of approximately seven hundred trainees will be made available to the CDA Consortium. That is, of 700 trainees, 28 with a priority rank of 1 will more likely meet CDAC criteria for role definition and competent performance than would the remaining trainees, and so on for ranked groups 2 through 9.  
(A place to begin for CDA Consortium assessment).
2. A summary profile of CDA competence will be available for the Region. The profile will present the percentages of trainees reflected through the collection of data to be competent or need improvement in each of the thirteen CDA performance areas. A compilation of demographic characteristics of the population will also be available.  
(A place to begin to improve training and technical assistance).
3. Summary profiles will be available for states and for individual training programs.  
(Another place to begin improving training).
4. Each trainee will receive a profile - feeding back to them an analysis of how they assessed their own competence in each of thirteen CDA areas.  
(A place to begin for individualized self-improvement).

**Summary:** There is too much involvement, more than seven hundred out of a thousand, to dismiss the impact of the system. Involvement was purely voluntary.

There have been many positive comments similar to, "For the first time, I think I know what CDA or competency-based training is all about," which suggest training in assessment procedures is crucial to understanding the CDA concept.

There is less likelihood of a disgruntled populace when the people know where they stand (no matter how far back in a line) in relationship to an ultimate goal. Hence, the need for a screen and prioritizing system close to the people.

An economically feasible management information system related to processes and formative development of training and assessment is necessary and basic to good decision making on the individual, local, state, regional, and national levels.

**Conclusion:**

The Region VI model (assessment screen) should be revised and continued as an operational CDA Consortium - OCD extension. Other models should be field tested in other regions or states. No single model should be imposed on everyone - the concept of individualization and local relevancy so essential to CDA training and assessment should be practiced in its management/organizational system. Theoretical dichotomies and inconsistencies cause credibility gaps which weaken the whole.

*Respectfully  
Submitted;*

*J. K. Southard*

J. K. Southard  
Coordinator, CDA Assessment System  
Southwest Region

### Procedure

The step-by-step procedure used in the system and analysis of data is presented below.

Following the workshop trainers were requested to return to their programs and

1. Trainer with each trainee review the 13 functional criteria and together fill out a Performance Profile on the trainee's performance level at that time according to the criteria referral. This procedure forced trainer - trainee dialogue regarding performance in relationship to specified criteria. The Performance Profile was signed by both trainer and trainee and mailed to the Coordinator.
2. Trainer with each trainee reviewed the Position Analysis form (folder), responded to it, and mailed it to the Coordinator. Hence, the Position Analysis became literally the candidate's file in the Coordinator's office.
3. During the spring of 1975, the trainer's were requested to use the Record of Development to record supervisory visits with the candidates. The "Record..." was designed to help trainers focus on specific competencies of trainees and monitor the development of trainees appropriately. Trainers were encouraged to be specific in their observations and to specify alternative actions for improvement in the "Record..." A copy of each notation was to be given to the candidate (trainee) for placement in the Portfolio. A duplicate copy was to be

retained by the trainer to monitor trainee progress and over-all program effectiveness. The "Record..." was well received by the trainers. Initially 1,000 were printed and distributed. Subsequent printings of 2,500 brought the total to 3,500 "Records..." distributed and used in the Region in the spring of 1975. It is a simple device which can be used in many different ways. If it were revised and marketed appropriately, probably 50,000 of the consumable items could be sold annually.

Nothing in the "Record..." was used in the prioritizing or baseline data system. It was merely meant to be a process or formative assessment procedure - a service to training programs and trainees.

4. In April and May trainees and trainers independently filled out a Performance Profile on the trainee's performance level and sent them to the Coordinator. On each Profile was a place to designate how far along the trainee's Portfolio was developed.
5. In May Concept Inventories were sent to trainers to be administered to trainees. The completed Inventories were mailed to the Coordinator.

#### Analysis of Data

Position Analysis yielded two sets of data: demographic on candidate characteristics and items describing tasks performed by the candidate on-the-job. Demographic data was summarized for analysis by program, state, and Region.

The Position Analysis included eighty items or tasks divided among the six major CDA competency areas. The items were formulated in dyads, each with a different level of expertise required to fulfill the function. The

two levels were

- a. Planning and evaluating generally require a high level of knowledge, understanding, assumption of initiative, and organizational ability than did the next level.
- b. Organizing and teaching - interacting, on the other hand, do not require the same high level of knowledge or conceptual understanding. A center can be organized according to a given plan or formula. Interacting can be emulated behavior or influenced by direction outside the individual.

The Position Analysis had forty planning - evaluating items and forty organizing - interacting items. Once the Position Analyses were received by the Coordinator the items were subjected to discriminate analysis. Thirty of the items were found to have discriminate power with critical ratios of .611 for teacher aides, .366 for teachers and .126 for those workers with high involvement in administrative functions of a center.

Each Position Analysis was scored according to the thirty items. Scores were ranked and stanine distribution was employed to arrive at a composite Position Analysis rank for each candidate. For consistency, stanine ranks were inverted so that a rank of #1 was given to the candidate with the highest Position Analysis score. That is, the candidates with the #1 Position Analysis rank would be those who most generally would be found to have the highest amount of involvement in center activities in relationship to those lower ranks.

The Performance Profile completed jointly by the trainer and trainee in February and forwarded to the Coordinator was not used in the final data analysis. The first Profile was used primarily to monitor the development of the data collection system and force trainee-trainer interaction and familiarization with CDA criteria.

Performance Profiles were completed independently by both trainees and their trainers regarding trainee progress as of May 1975. The Performance Profiles were scored using a weighted formula.

The Concept Inventory taken by each trainee was scored for each CDA function area and a composite was given each.

Based on analysis of data, all participants were placed in one of four groups. A copy of the letter informing candidates of their group designation, criteria for each group and the Performance Profile follow.



## The Child Development Associate Consortium

June 16, 1975

Dear

You are to be commended for involving yourself in training programs designed to increase your effectiveness as an adult responsible for the care and welfare of young children in a child development center.

During the spring of 1975 you have participated in a project conducted in five southwestern states to inventory the levels of competence of trainees in CDA programs. All the materials you have sent to the Regional Coordinator have been analyzed. As a result it has been determined that you are in the

- High priority group
- Second priority group
- Third group
- Fourth group

A description of the project and criteria to be in each group are given inside this brochure. Your Performance Profile determined by the information provided during the study is presented on the back. If your Profile is not completed it is because not enough information was available for analysis. This is not intended to be a statement of how competent you are in working with young children. Regardless of which group you are in, it is the trainee's responsibility to take the initiative to apply for assessment directly to the CDA Consortium.

What this means to you: your name, address, and group placement have been sent to the CDA Consortium at 7315 Wisconsin Avenue, Suite 601-East, Washington, D. C. 20014. The Region VI Task Force on Child Development, Region VI Office of Child Development, and Regional Coordinator of CDA Assessment are recommending to the CDA Consortium that assessments be made in the Region according to the priority ranks established. The CDA Consortium is solely responsible for CDA assessments for the national credential.

Enclosed in this packet are materials (with the exception of the Concept Inventory) you have sent to be analyzed to determine your priority rank and your composite profile. It is recommended that you place the materials in your CDA portfolio for safe keeping. They could be helpful when you are assessed for the CDA credential. No copies of the materials or individual reports have been shared with anyone - the materials are your personal property to do with as you wish.

Sincerely,

J. K. Southard  
Coordinator, CDA Assessment System  
Southwest Region

JKS/1h  
Enclosures

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## PROJECT AND GROUP DESCRIPTION

### SOUTHWEST REGION CDA ASSESSMENT SPRING 1975

During the spring of 1975 a study was conducted in the HEW Region VI five southwestern states

1. to inventory reported levels of competence of trainees in CDA programs and
2. to identify those who would be ready to be assessed for the national CDA credential.

Approximately 900 trainees in Head Start Supplementary Training, two OCD national CDA pilot training programs, and seven Texas pilot CDA training programs, participated in the project. Information was collected and analyzed by the Coordinator for CDA Assessment in the Region.

Information used in the study was a collection of responses to three forms: (1) a Position Analysis form to determine amount of trainees' involvement in center activities as related to CDA; (2) Performance Profile to determine competent performance levels related to CDA; and (3) Concept Inventory to determine knowledge and understanding level of trainees in relation to CDA criteria.

As a result of analyzing the information collected, each trainee was placed in one of the following four groups.

High Priority Group. According to the information collected, approximately 100 trainees in the first group were reported to have a high degree of readiness to be assessed for the CDA credential. Trainees in the first group met the following criteria:

1. Their response to the Position Analysis showed that they perform an adequate number of activities in a center in order for an assessment to take place.
2. They reported that their CDA Portfolio is almost completed.
3. Performance Profiles submitted by the trainee and trainer and Concept Inventories showed that the trainee was at least competent in all 13 CDA function areas and highly competent in most.

Second Priority Group. According to the information collected approximately 150 trainees in the second group could also be ready to be assessed for the CDA credential. Trainees in the second group met the following criteria:

1. Their response to the Position Analysis showed they perform an adequate number of activities in a child center in order for an assessment to take place.
2. They reported that they are in the process of developing their CDA Portfolio. (Those in the first group have completed or almost completed.)
3. Performance Profiles submitted by the trainee and their trainer and the trainee's Concept Inventory showed that the trainee was competent in all 13 CDA function areas. (Those in the first group showed highly competent in most areas.)

Third Group. According to the information collected, trainees in the third group were not ready for assessment because

1. it was reported that they need to improve in one or more of the 13 CDA function areas to meet CDA performance criteria; or
2. they reported that they had not yet begun or had only begun developing their CDA Portfolio.

Fourth Group. It was not possible to determine whether or not the trainees were ready for CDA assessment for one or more of the following reasons:

1. Their Position Analysis was not completed.
2. It was not reported how far along they were in developing their Portfolio.
3. There was no Performance Profile provided by the trainer.
4. There was no Performance Profile provided by the trainee.
5. No Concept Inventory was completed by the trainee.

Results from the study have been sent to the CDA Consortium in Washington, D.C. As of July 1, 1975, the office of the Coordinator for CDA Assessment for the Southwest Region in Dallas, Texas has been abolished. Questions regarding this study and requests to be assessed for the national CDA credential should be addressed by candidates/trainees directly to the

CDA Consortium  
7315 Wisconsin Avenue, Suite 601-East  
Washington, D.C. 20014  
(301) 652-7144

**Child Development Associate  
PERFORMANCE PROFILE  
Southwest Region CDA Assessment  
Spring 1975**

Competency Areas	Critical Functions	Highly Competent	Competent	Unknown Needs Improvement
I Establishes and Maintains a Safe and Healthy Learning Environment	SAFETY			
	HEALTH			
	ENVIRONMENT			
II Advances Physical and Intellectual Competence	PHYSICAL			
	COGNITIVE			
	LANGUAGE			
	CREATIVE			
III Builds Positive Self-Concept and Individual Strength	SELF- CONCEPT			
	INDIVIDUAL STRENGTH			
IV Positive Functioning of Children and Adults in a Group Environment	SOCIAL			
	GROUP MANAGEMENT			
V Coordination of Home and Center Child-Rearing Practices and Expectations	HOME- CENTER			
VI Supplementary Responsibilities Related to Childrens' Programs	STAFF			

\*Your Composite Profile is based on an analysis of CDA Performance Profiles submitted by you and your program trainer and your Concept Inventory results.

The UNKNOWN or NEEDS IMPROVEMENT column indicates either that there was not enough information supplied for analysis or that it is an area in which improvement is needed.

The Composite Profile can be used by you as a guide for work/study to improve yourself as a person directly responsible for the development of children in a child development center. Identify the areas in which you would like to improve and refer to CDA Consortium descriptions of those areas to outline your own plan for professional growth. Then work toward that goal for the betterment of children.



## The Child Development Associate Consortium

June 23, 1975

For Insp. Pilots  
only

Dear CDA Candidate:

You are to be commended for involving yourself in training programs designed to increase your effectiveness as an adult responsible for the care and welfare of young children in a child development center.

During the spring of 1975 you have participated in a project conducted in five southwestern states to inventory the levels of competence of trainees in CDA programs. All the materials you have sent to the Regional Coordinator have been compiled for inclusion in a final report on the Texas CDA pilot projects. Results from the study have been sent to the Texas Office of Early Childhood Development.

As of July 1, 1975, the office of the Coordinator for CDA Assessment for the Southwest Region in Dallas, Texas has been abolished. Questions regarding this study and requests to be assessed for the national CDA credential should be addressed by candidates/trainees directly to the

CDA Consortium  
7315 Wisconsin Avenue, Suite 601-East  
Washington, D. C. 20014  
(301) 652-7144

Enclosed in this packet are materials (with the exception of the Concept Inventory) you sent to be analyzed. It is recommended that you place the materials in your CDA portfolio for safe keeping. They could be helpful when you are assessed for the CDA credential. No copies of the materials or individual reports have been shared with anyone - the materials are your personal property to do with as you wish.

Thank you for participating in the study and good luck in your assessment for the CDA credential.

Sincerely,

J. K. Southard  
Coordinator, CDA Assessment System  
Southwest Region

JKS/1h  
Enclosure

### Performance Profile for Candidates

In addition to the priority rank for assessment, each candidate received a Performance Profile. The Performance Profile was a reflection of the level of performance of the trainee in each of thirteen CDA function areas. A copy of the Performance Profile sent to each trainee participating in the study is presented on the back of the priority statement.

### Summary

Data collected through the system was subjected to computer analysis to formulate composite demographic characteristics of the population. Regional composites of performance were extracted and certain research questions were asked of the data. Those findings are included in the final section of the Appendix.

The priority system was designed in 1974 to offset the problem which now exists in Region VI. All CDA pilots (national and Texas) plus HSST program candidates entering the system were, in effect, competing for priority standing for CDAC assessment. Everyone knew this and accepted it. However, when it became apparent in the Spring of 1975 the CDAC would not consider the Regional priorities, the various agencies began to vie directly with the Consortium for assessment of their candidates. Now it has become a matter of political struggle. The same problems will persist until there is a prioritizing system implemented and accepted.

## CDA: A CRITIQUE

Introduction

Writing a critique of a program or concept is difficult, to say the least. It requires a thorough knowledge of the subject and a high degree of objectivity. A critique of CDA assessment, for the author, is like unto publicizing one's own frailties. Two years of soul and mind have been put into CDA ... the commitment and desire to support the philosophy underlying CDA hasn't wavered and shall remain. This critique has been written solely to provide "food for thought" intended to strengthen a concept to improve care for young children.

The critique begins with a hypothetical interview with myself as a potential CDA and concludes with a description of possible problem areas in assessment procedures presently outlined in an early warnings section.

The Interview

What would it mean to you to have a CDA credential?

It would mean that a great number of people would recognize my competence in working with young children. Hopefully, it might help me to get a job and make more money if I were working in an early childhood center.

Would you rather have a CDA credential or a college degree, either an AA or BA?

I would like to have both if possible. But if not, I would prefer the degree because more people recognize its worth right now and with a degree I can always move up a career ladder with more credits. A degree is more flexible. If I couldn't get the college degree for some reason, I would settle for a CDA ... but only if it is going to be worth my time in terms of job security and more money.

If the CDA were worth so many credits on a degree program, would you want it then?

Certainly! Do you know of any that will? Generally colleges

like to base credits on experience or some form of testing. They give "tests" in many different ways ... many are interviews by boards, observations, etc., but they also ask for some kind of hard or base data, I believe.

Most colleges now have provisions for students to challenge for credits by taking exams. Others let you challenge for credits by performing specific tasks and taking written exams on the task-related subject matter.

Why do you suppose they use so many exams?

Probably because there is some historical precedent. It is true that there are people who know what to do but for some reason can't perform well. However, there are few people who consistently do something well without knowing what they are doing. Performance and knowledge are generally related. The difficulty comes in finding an avenue wherein what is known by the person can be communicated.

Right. Many people are opposed to giving a test for the CDA for just that reason.

True, and for just cause. Many people have been hurt by how test results have been used. But that doesn't by itself make tests or testing bad. And don't forget there are many forms of tests. Basically test results provide only a basis for communicating and decision-making. Tests alone should not be used to decide something. But test results can be useful in formulating a semantic base for understanding.

For instance, someone could tell me that their child is a high achiever because he does thus and so and all his teachers say so. I would be impressed; but not knowing the parent or teachers, I would be skeptical. Not skeptical because I question the integrity of the teachers or parent, but because I wouldn't know if their definition of high achiever is the same as mine. I would want some other evidence with which we were all familiar and could agree upon.

But isn't that what the CDA competencies and criteria are supposed to provide?

Yes, and that is admirable. But there are problems in the way a number of different people interpret specific criteria. And another problem is the seeming confusion between evidence and criteria... they are not the same. Just to agree on criteria doesn't solve the problem. The problem is equating evidence and evidence gathering procedures.

Isn't the assessment team concept supposed to provide that equality?

The team is supposed to gather evidence and make a decision based on that evidence as it relates to the criteria. But every team for every CDA will be different from every other team. The criteria may be the same but the evidence will not. So there will not exist equality or comparability of evidence of competence unless some other more "hard" data is provided.

You can ask a team of people to describe any particular event and the team can do so through a system of negotiations ... they cannot totally reconstruct what was. Change one or two members on the team and the description will vary even more. That is, unless only one person is making all the decisions in both situations. In that case, why have the team? You see the real problem with the team is one of team credibility. Are the team results valid? And are they reliable?

What do validity and reliability have to do with it?

Everything. Validity and reliability for a team can only be determined for a particular team given controlled situations. Anytime a member of a team changes interpersonal dynamics change and hence, reliability - validity indices of the team vary ... no matter how specific the criteria for assessment. Even time will influence a team's validity. A subjective, human-oriented system alone cannot be relied upon unless each



team is tested for reliability and validity of findings.

What can be done?

Balance the system. CDA training according to OCD is supposed to be 50% academic and 50% field experienced. Do the same with assessment. Use the team to gather subjective evidence and make the final decision; and provide the team with some "hard" data on the candidate's conceptual understanding of the subject matter. Let the team interpret all the data.

Gathering "hard" data isn't all that bad. And people are used to it. To get a G. E. D. you have to pass a written test. The same is true for a driver's license, U. S. naturalization, even to be a maintenance man in some organizations. Some people will be less frightened of a standardized test than they will be going into a group "board of examiners." We need to give everyone a break.

Why everyone is so afraid of tests is beyond me. Some tests, like games, simulations, etc., are fun and non threatening. Creative designers can minimize the language and reading ability problems, and the cultural variations can be taken into consideration without much difficulty.

Ok, that's enough on that subject. Does anything else bother you about the CDA assessment system as it is presently designed?

Yes, a couple of things. First, to be compatible with the CDA concept, assessment should be diagnostic in part and formative. The way the system is described now it is almost entirely a summative or product-oriented system. It is like taking doctoral oral exams where a group sits down to decide whether or not you get the degree. Even the group is similar: your faculty sponsor is there, an objective chairman is present, a community representative is there, perhaps two or so other faculty, and yourself. They review your "portfolio," consider the university policies and standards as criteria, study evidence, and make a judgment. Sometimes

they tell you to go back and try again.

Secondly, the CDA concept is developmental. It should help/guide people to move up a career ladder. It should not lock them in to a system but should allow them mobility. In order to do that it should have rapport, if not direct liaison with established institutions ... ones which can provide the means for extended social, economic mobility. I am not saying tie the CDA to a degree or degree plan. But the assessment system/credentialing process should be institutionalized in some way. Not institutionalized just in Washington.

I have an uneasy feeling that CDA because of its cost will be tied too directly to Head Start and other federally funded projects. And like Head Start, it may continue to be only a part of a national demonstration project. It will then be left to states to follow the lead set by Washington; or CDA, with its Consortium of national organizations in support, could become a lever to expand Head Start and other federal programs. Which way do we go? There should be a policy statement formulated, and soon.

#### Early Warnings

Some problems exist now and others are developing which may cause difficulties with CDA in the future. These problems are discussed below and it is suggested that they be considered by the decision makers at the Consortium.

1. The decision to approve the assessment process was made in March 1975. Supposedly the decision was based on data gathered during the Winter 1975 field test. However, the results of that field test will not be made public until sometime in June. The question arises will the final evaluation results support the March decision?
2. The March decision, if it holds, approved the LAT as the

data gathering vehicle and decision group to determine whether or not a candidate should be awarded a credential. One member of that team was identified as the actual trainer of the candidate. It has come to the Coordinator's attention that supposedly a decision has been made or will be made that "trainer" in the future might not be the trainer who has been directly supervising a candidate's academic/work experience. If so, that decision raises tremendous problems.

It is the opinion of the Coordinator that this change in team membership will greatly effect team outcomes. Certainly the change should be tested before being decided.

Also, the trainer-change will significantly increase the cost of assessment. It will be difficult to find an adequate number of qualified trainers who will have the time and will to make the necessary observations of a candidates performance to formulate an opinion about the candidate's competence - that is, unless they are paid fees to cover costs and time.

Now there may be some "trade-offs" or cooperative arrangements made somehow among established trainers. But that will suggest a patronizing system which will be wholly unsatisfactory for many reasons.

According to recent "trainer" criteria, it would be possible for a trainer to have direct or indirect influence on the employment status of a candidate. That is a totally unsatisfactory situation due to bias contamination and conflict-of-interest in the profession.

3. A centralized delivery system for CDA Assessment is not feasible. Just looking at the CDA market potential in Region VI is overwhelming and would require an effective organizational structure - the national market will be ten times that of Region VI.

4. The amount of work and kinds of information the trainee is required to put into development of a portfolio is extensive and will necessitate a great deal of supervision/guidance by professionals if the product is to be meaningful.
5. A major problem is one of time. How long will it take before an individual applying for assessment will actually be assessed? Is there a prioritizing system or schedule established that people can relate to? Will the priorities be competitive; on a first come, first serve basis; or will they be arbitrarily set? The people need to know.
6. A problem could develop in Region VI if the Texas pilot candidates are given preferential treatment as opposed to the Regional HSST needs. The Consortium people should make their position clear to all parties concerned and negotiate problems.
7. In order to be effective, the CDA Consortium needs to be fiscally independent. That cannot happen under present constraints ... it is possible through realistic marketing of CDA for the CDA Consortium to achieve that independence within two-three years. Fiscal independence is not just having funding sources changed from a federal agency to foundations or professional associations does not bring about fiscal autonomy.

## RECOMMENDATIONS

The Coordinator of CDA Assessment in the Southwest Region makes the following recommendations in regard to implementing the assessment/credentialing process:

Research. A great deal of research needs to take place to determine: (1) validity and reliability of the team approach to assessment ... what factors influence team decision making, desirable characteristics of team members, etc.

(2) A standardized/normed assessment component needs to be developed to provide teams with some "hard" data indication of candidate knowledge and conceptual development. Such data would also be useful in research and quality control.

(3) A self-assessment/training package needs to be developed and marketed for wide dissemination to potential candidates. Something similar to the CDA-Q proposed by the Regional Coordinator in 1974.

(4) Research needs to be conducted to determine which criteria are program specific and culture related.

(5) An effective screen/prioritizing system must be developed.

(6) A training needs assessment package should be developed for use by centers and individuals.

(7) You can't do research without funds. Thirty per cent of funds should be in the R & D budget for the next three years. Without at least \$200,000 for research each year for the next two years, I predict CDAC will be dead for all practical purposes in three years. New and more efficient assessment procedures must be developed.

The Criteria/Competency Areas. Either the criteria should be stated in developmental levels (scaled) related to a career ladder; or, criteria/areas should be developed for child development specialities such as, administrative duties, aide duties, nurse duties, special education, home liaison, etc.

Consideration should be given to candidate's competence to regard to cultural characteristics of children, such as languages, etc.

Delivery System. A centralized organization cannot effectively manage the volume of business necessary if CDA is to have the impact envisioned. I recommend that consideration be given to institutionalizing the system. CDAC should become an approving/accrediting agency for training programs with attendant assessment responsibilities. CDA training programs are cropping up all over the country right now and there is no control or attempt to even define commonalities.

CDA Consortium. The Consortium should have a market development plan to bring about fiscal independence within two years, that is, independence from any and all outside grant sources. There are plenty of materials and services which can be marketed by the Consortium.

Dissemination. Informing the public on CDA training/assessment/credentialing is vital. Without knowing what is happening nationally, states and local institutions are going ahead with their own programs and plans. Once they are in place, they are very difficult to change. Adequate information may at least guide decision-making agencies to formulate open-ended policies/regulations of the eventual inclusion of CDA when it becomes a viable alternative.

Consumer Involvement. Aren't approximately 80% of children in the nation cared for in private child care situations?

Private child care industry must be involved/included in CDA decision making if CDA is to serve all children. If not, put the CDAC funds into upgrading Head Start T/TA or state capacity building or bringing Head Start centers up to licensing standards or something more worthwhile.

In summary, I think it is a mistake not to elicit state/regional assistance to establish regional and state offices to coordinate assessment/credentialing procedures at the local level. States and regions would have contributed to such an organizational plan which would have increased the total investment in CDAC by ten fold. CDA needs all the friends and support it can get. Policies of centralization and isolation only tend to alienate and cause loss of credibility.

I look forward to the day when an individual working in a child care center can initiate an assessment in his/her local community. That assessment will provide a profile that the candidate can use as a guide to self improvement.

Hopefully the day will come when a CDA credential will be worth college credits applicable to a degree program at the AA or Ph.D. levels. By the same token degree programs will produce competent child care workers with the CDA.

Perhaps the day will come when there are different categories of CDA's. Aides, teachers, administrators, specialists, and support personnel will have the opportunity to receive recognition of their competence and identified areas wherein they can improve their work.

.... to have child care centers which not only are licensed but offer quality programs with professional CDA staff...a CDA seal of approval on the door of every child care center in the nation.

## SECTION TWO

## Analysis of Baseline Data

Introduction

The Regional collection of baseline data was formulated to

1. establish a system of data collection and feed back related to CDA criteria for training program improvement,
2. pilot a region-wide procedure to identify potential candidates for CDA assessment by priority rank, and
3. feed test data collection instrumentation.

Results from the study indicate that the procedures devised met the objectives and that with minimum finances a broad system could be implemented to assess training strengths and weaknesses and establish priorities for CDA assessment... a screen. The system needs a great deal of work, but it is pretty good as it is and all who participated benefited greatly from the experience.

Procedure

All data collected using the Position Analysis, candidate and trainer Performance Profiles, and Concept Inventory were subjected to computer analysis. Presented below is the data output: demographic description of participants, visits and hours reported for supervised CDA field experiences, relationships of candidate-trainer-Concept Inventory results, training institution strengths/weaknesses by CDA criteria, and summary of all candidates by priority rank.

Description of Participants

Presented in Tables I through IV are summarized descriptions of 865 participants in the study who were included in the data analysis.

TABLE I

NUMBER AND PERCENT OF CANDIDATES BY SEX

SEX	NUMBER	PERCENT
Males	34	3.93
Females	819	94.68
Not Indicated	12	1.39



TABLE II

## NUMBER AND PERCENT OF CANDIDATES BY AGE CATEGORIES

AGE CATEGORIES	NUMBER	PERCENT
Under 20 years	13	1.50
20-29 years	309	35.72
30-39 years	294	33.99
40-50 years	178	20.58
Over 50 years	56	6.47
Not Indicated	15	1.73

TABLE III

## NUMBER AND PERCENT OF CANDIDATES BY ETHNIC CATEGORIES

CATEGORIES	NUMBER	PERCENT
Black	299	34.57
Mexican American	332	38.38
Oriental	1	0.12
Native American	12	1.39
White	194	22.43
Other	27	3.12

TABLE IV

## NUMBER AND PERCENT OF CANDIDATES BY YEARS OF EXPERIENCE

CATEGORIES	NUMBER	PERCENT
First year	106	12.25
2-4 years	276	31.91
5-10 years	352	40.69
Over 10 years	49	5.66
Not Indicated	82	9.48

### The CDA Field Experience

The CDA training program is supposed to interface academic study with supervised field experience. Trainees and Trainers were asked to specify the number of visits trainers made in the trainees rooms and the approximate length of time over a six month period. Presented in Table V are the average visits/hours reported by the trainees that trainers reported that they made... by institution (key to institution identification numbers is on the last page of this report).

Distance and delivery system design for training programs are evident in the wide variation of the number of visits reported and the duration of each. In some cases there is great discrepancy between what was reported by trainees and trainers.

There was not time to determine if there was a relationship between the amount of trainer - trainee supervision and performance/knowledge/priority rank for CDA assessment. However, a cursory review of the data tends to indicate that there is a highly significant correlation. This is an area that requires further study and suggests an avenue for monitoring programs.

TABLE V

AVERAGE NUMBER OF VISITS AND HOURS REPORTED BY CANDIDATES AND TRAINERS AT EACH LEVEL.

INSTITUTION/LEVEL	CANDIDATES		TRAINERS	
	Visits	Hours	Visits	Hours
INSTITUTION # 01	10.55	33.20	15.85	30.51
# 02	3.33	4.50	6.00	14.10
# 03	3.00	4.50	1.72	1.74
# 04	4.63	6.75	4.02	8.31
# 05	--- *	--- *	23.00	7.64
# 06	1.00	6.44	6.70	5.23
# 07	--- *	--- *	2.96	2.38
# 08	20.00	21.88	19.81	24.81
# 09	2.22	12.56	2.00	10.39
# 10	5.70	5.70	6.00	6.00
# 11	2.00	1.00	2.00	1.00
# 12	--- *	--- *	32.00	32.00
# 13	6.16	18.75	6.16	18.68
# 14	--- *	--- *	3.70	7.90
# 15	--- *	--- *	14.54	19.36
# 16	--- *	--- *	8.0	8.33
# 17	2.00	12.00	--- *	--- *
# 18	11.00	60.00	8.86	33.83
# 19	6.00	6.00	6.00	6.00
# 20	7.75	12.00	7.75	12.00
# 21	33.20	15.85	30.51	41.40
# 22	4.50	6.00	14.10	20.89
# 23	4.50	1.72	--- *	--- *
# 24	6.75	4.02	8.31	12.78
# 25	8.40	23.00	7.64	19.29
# 26	6.44	6.70	5.23	12.00
# 27	----	----	----	----
STATE # 01 Arkansas	10.55	60.00	7.13	38.94
# 02 Louisiana	4.17	7.14	3.06	4.11
# 03 New Mexico	1.67	2.00	2.58	2.50
# 04 Oklahoma	2.22	12.56	2.00	10.39
# 05 Texas	6.01	10.37	8.72	11.94
# 06 Tx.Pilot	7.05	24.62	9.54	18.80
# 07 N.M.Pilot	20.00	21.88	19.79	24.79
REGION	6.86	17.94	7.63	15.18

\* Not Reported

### Rating Interrelationships

The area of greatest criticism regarding the data collection system was the use of a written test - the Concept Inventory. Presented in Table VI are computed intercorrelations between the candidate's self rating, trainer rating of the candidate, and Concept Inventory scores of candidates. As shown in the table there was greater agreement between the test scores and subjective ratings by both trainers and candidates than there was between the trainers and candidates.

TABLE VI

INTERCORRELATIONS AMONG PERFORMANCE RATINGS ON THIRTEEN FUNCTION AREAS  
(TOTAL SCORES)

GROUPS	CANDIDATE SELF RATING	TRAINER RATING OF CANDIDATE	CONCEPT INVENTORY SCORE
Candidate Self Rating	1.00	.09	.28
Trainer Rating of Candidate		1.00	.33
Concept Inventory Score			1.00

Presented in Table VII are the mean ratings/scores for candidates reported by the candidates (trainees), their trainers, and their Concept Inventory scores. There was no difference between the candidates' self rating and their Concept Inventory score. The trainers ratings of candidate performance according to CDA criteria tended to be higher than either the candidates' self rating or Concept Inventory score.

After taking the Concept Inventory (test), many participants reported they liked it and learned from it. In some instances, no participants in a particular training program took the test because the trainers would not administer it. We have a lot of fear to overcome in trainers.

This point out one thing. Sole reliance on subjective assessment may not be the strongest indicator of competence. There needs to be a great deal of study in this area.

TABLE VII

MEANS AND STANDARD DEVIATIONS FOR THE CANDIDATE AND TRAINER FUNCTION AREAS  
AVERAGE SCORE RATINGS AND CANDIDATE TOTAL SCORES ON THE CONCEPT INVENTORY

RATINGS	MEAN	S.D.
Candidate Self Rating	19.12	6.63
Trainer Ratings	21.21	5.47
Concept Inventory Score	19.13	3.35

#### Training Strengths and Weaknesses

The Performance Profiles reported by trainers and candidates were summarized and ranked in priority order for each institution. The results are presented on the following pages together with the Regional summary for comparative analysis. It is interesting to note wide discrepancy between what trainees and trainers reported in some institutions.

INSTITUTION I. D. NUMBER: 1

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SOCIAL  
ENVIRONMENT  
HEALTH  
GROUP MANAGEMENT  
SAFETY  
SUPPLEMENTARY  
LANGUAGE  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
PHYSICAL  
CREATIVITY  
COGNITIVE  
HOME CENTER

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

HEALTH  
SOCIAL  
SUPPLEMENTARY  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
SAFETY  
LANGUAGE  
GROUP MANAGEMENT  
ENVIRONMENT  
COGNITIVE  
HOME CENTER  
PHYSICAL  
CREATIVITY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 2

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
HEALTH  
SELF CONCEPT  
CREATIVITY  
HOME CENTER  
SAFETY  
LANGUAGE  
GROUP MANAGEMENT  
SOCIAL  
PHYSICAL  
ENVIRONMENT  
INDIVIDUAL STRENGTH  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
HEALTH  
GROUP MANAGEMENT  
SOCIAL  
SUPPLEMENTARY  
HOME CENTER  
ENVIRONMENT  
SELF CONCEPT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

STITUTION I. D. NUMBER: 3

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
CREATIVITY  
ENVIRONMENT  
HEALTH  
SAFETY  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
SOCIAL  
HOME CENTER  
LANGUAGE  
COGNITIVE  
PHYSICAL  
GROUP MANAGEMENT

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

ENVIRONMENT  
HEALTH  
SAFETY  
SOCIAL  
HOME CENTER  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
PHYSICAL  
GROUP MANAGEMENT  
CREATIVITY  
SUPPLEMENTARY  
COGNITIVE  
LANGUAGE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE



INSTITUTION I. D. NUMBER: 4

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
SELF CONCEPT  
HEALTH  
CREATIVITY  
INDIVIDUAL STRENGTH  
ENVIRONMENT  
PHYSICAL  
SOCIAL  
LANGUAGE  
GROUP MANAGEMENT  
COGNITIVE  
HOME CENTER  
SUPPLEMENTARY

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

HEALTH  
SELF CONCEPT  
COGNITIVE  
PHYSICAL  
CREATIVITY  
HOME CENTER  
INDIVIDUAL STRENGTH  
ENVIRONMENT  
SOCIAL  
GROUP MANAGEMENT  
SAFETY  
SUPPLEMENTARY  
LANGUAGE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 5

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
COGNITIVE  
SAFETY  
SOCIAL  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
ENVIRONMENT  
HEALTH  
LANGUAGE  
PHYSICAL  
CREATIVITY  
HOME CENTER  
GROUP MANAGEMENT

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
ENVIRONMENT  
HEALTH  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
LANGUAGE  
COGNITIVE  
SUPPLEMENTARY  
HOME CENTER

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 6

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
PHYSICAL  
SAFETY  
HEALTH  
SOCIAL  
CREATIVITY  
ENVIRONMENT  
SELF CONCEPT  
HOME CENTER  
GROUP MANAGEMENT  
INDIVIDUAL STRENGTH  
COGNITIVE  
LANGUAGE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

HOME CENTER  
SUPPLEMENTARY  
SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
GROUP MANAGEMENT  
PHYSICAL  
SOCIAL  
INDIVIDUAL STRENGTH  
COGNITIVE  
LANGUAGE  
CREATIVITY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

STATION I. D. NUMBER: 7

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

ENVIRONMENT  
SELF CONCEPT  
INDIVIDUAL STRENGTH  
GROUP MANAGEMENT  
HEALTH  
SAFETY  
PHYSICAL  
SOCIAL  
HOME CENTER  
SUPPLEMENTARY  
CREATIVITY  
LANGUAGE  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
HOME CENTER  
SAFETY  
HEALTH  
ENVIRONMENT  
SELF CONCEPT  
GROUP MANAGEMENT  
PHYSICAL  
SOCIAL  
INDIVIDUAL STRENGTH  
COGNITIVE  
CREATIVITY  
LANGUAGE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 8

TOTAL *Region*

46

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
SAFETY  
HEALTH  
INDIVIDUAL STRENGTH  
COGNITIVE  
SUPPLEMENTARY  
PHYSICAL  
CREATIVITY  
SOCIAL  
LANGUAGE  
ENVIRONMENT  
GROUP MANAGEMENT  
HOME CENTER

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
INDIVIDUAL STRENGTH  
ENVIRONMENT  
HEALTH  
SAFETY  
LANGUAGE  
GROUP MANAGEMENT  
SOCIAL  
COGNITIVE  
SUPPLEMENTARY  
PHYSICAL  
HOME CENTER  
CREATIVITY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 9

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
ENVIRONMENT  
HEALTH  
PHYSICAL  
SOCIAL  
SUPPLEMENTARY  
HOME CENTER  
LANGUAGE  
CREATIVITY  
SELF CONCEPT  
COGNITIVE  
GROUP MANAGEMENT  
INDIVIDUAL STRENGTH

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

HOME CENTER  
SUPPLEMENTARY  
SAFETY  
LANGUAGE  
CREATIVITY  
HEALTH  
ENVIRONMENT  
PHYSICAL  
COGNITIVE  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 10

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
HEALTH  
INDIVIDUAL STRENGTH  
SOCIAL  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
PHYSICAL  
CREATIVITY  
GROUP MANAGEMENT  
COGNITIVE  
LANGUAGE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

PHYSICAL  
HEALTH  
ENVIRONMENT  
COGNITIVE  
SAFETY  
HOME CENTER  
GROUP MANAGEMENT  
CREATIVITY  
SOCIAL  
SUPPLEMENTARY  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
LANGUAGE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 11

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

CREATIVITY  
ENVIRONMENT  
HEALTH  
SAFETY  
SOCIAL  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
LANGUAGE  
COGNITIVE  
PHYSICAL  
GROUP MANAGEMENT  
HOME CENTER  
SUPPLEMENTARY

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
HOME CENTER  
GROUP MANAGEMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
CREATIVITY  
LANGUAGE  
COGNITIVE  
PHYSICAL  
ENVIRONMENT  
HEALTH  
SAFETY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE



INSTITUTION I. D. NUMBER: 12

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

CREATIVITY  
ENVIRONMENT  
COGNITIVE  
SUPPLEMENTARY  
SELF CONCEPT  
SAFETY  
HOME CENTER  
INDIVIDUAL STRENGTH  
HEALTH  
LANGUAGE  
SOCIAL  
PHYSICAL  
GROUP MANAGEMENT

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

CREATIVITY  
HOME CENTER  
LANGUAGE  
SUPPLEMENTARY  
ENVIRONMENT  
SELF CONCEPT  
GROUP MANAGEMENT  
HEALTH  
SAFETY  
SOCIAL  
INDIVIDUAL STRENGTH  
PHYSICAL  
COGNITIVE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

STITUTION I. D. NUMBER: 13

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES.

ASSESSMENT SUMMARY: CANDIDATES.

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
HEALTH  
SUPPLEMENTARY  
SELF CONCEPT  
HOME CENTER  
ENVIRONMENT  
SOCIAL  
GROUP MANAGEMENT  
INDIVIDUAL STRENGTH  
PHYSICAL  
CREATIVITY  
LANGUAGE  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
PHYSICAL  
CREATIVITY  
INDIVIDUAL STRENGTH  
LANGUAGE  
ENVIRONMENT  
SAFETY  
HEALTH  
GROUP MANAGEMENT  
SUPPLEMENTARY  
HOME CENTER  
SOCIAL  
COGNITIVE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 14

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
HEALTH  
ENVIRONMENT  
SUPPLEMENTARY  
CREATIVITY  
INDIVIDUAL STRENGTH  
LANGUAGE  
GROUP MANAGEMENT  
HOME CENTER  
SOCIAL  
SELF CONCEPT  
COGNITIVE  
PHYSICAL

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
HEALTH  
ENVIRONMENT  
SOCIAL  
LANGUAGE  
COGNITIVE  
PHYSICAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
SELF CONCEPT  
CREATIVITY  
GROUP MANAGEMENT  
HOME CENTER

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 15

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

- HEALTH
- SUPPLEMENTARY
- ENVIRONMENT
- SAFFTY
- SOCIAL
- LANGUAGE
- CREATIVITY
- SELF CONCEPT
- HOME CENTER
- GROUP MANAGEMENT
- COGNITIVE
- INDIVIDUAL STRENGTH
- PHYSICAL

FUNCTION AREA (STRONGEST TO WEAKEST)

- SAFETY
- HEALTH
- SELF CONCEPT
- ENVIRONMENT
- SOCIAL
- INDIVIDUAL STRENGTH
- SUPPLEMENTARY
- CREATIVITY
- PHYSICAL
- GROUP MANAGEMENT
- LANGUAGE
- HOME CENTER
- COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

- SOCIAL
- SELF CONCEPT
- INDIVIDUAL STRENGTH
- GROUP MANAGEMENT
- LANGUAGE
- SAFETY
- HEALTH
- ENVIRONMENT
- PHYSICAL
- HOME CENTER
- COGNITIVE
- SUPPLEMENTARY
- CREATIVITY

FUNCTION AREA (STRONGEST TO WEAKEST)

- HEALTH
- SAFETY
- ENVIRONMENT
- SUPPLEMENTARY
- HOME CENTER
- SELF CONCEPT
- SOCIAL
- GROUP MANAGEMENT
- PHYSICAL
- INDIVIDUAL STRENGTH
- LANGUAGE
- CREATIVITY
- COGNITIVE



INSTITUTION I. D. NUMBER: 16

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)      FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
HOME CENTER  
GROUP MANAGEMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
CREATIVITY  
LANGUAGE  
COGNITIVE  
PHYSICAL  
ENVIRONMENT  
HEALTH  
SAFETY

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)      FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
SELF CONCEPT  
ENVIRONMENT  
HEALTH  
SOCIAL  
INDIVIDUAL STRENGTH  
HOME CENTER  
GROUP MANAGEMENT  
CREATIVITY  
SAFETY  
COGNITIVE  
LANGUAGE  
PHYSICAL

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 17

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

LANGUAGE  
SAFETY  
GROUP MANAGEMENT  
SOCIAL  
PHYSICAL  
SELF CONCEPT  
CREATIVITY  
HEALTH  
HOME CENTER  
INDIVIDUAL STRENGTH  
COGNITIVE  
ENVIRONMENT  
SUPPLEMENTARY

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
HEALTH  
GROUP MANAGEMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
CREATIVITY  
SAFETY  
COGNITIVE  
PHYSICAL  
ENVIRONMENT  
LANGUAGE  
HOME CENTER

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 18

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
HEALTH  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SOCIAL  
LANGUAGE  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

ENVIRONMENT  
HEALTH  
SAFETY  
HOME CENTER  
SUPPLEMENTARY  
CREATIVITY  
LANGUAGE  
PHYSICAL  
SELF CONCEPT  
INDIVIDUAL STRENGTH  
COGNITIVE  
GROUP MANAGEMENT  
SOCIAL

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 19

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES.

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
HEALTH  
SOCIAL  
PHYSICAL  
ENVIRONMENT  
CREATIVITY  
SUPPLEMENTARY  
SELF CONCEPT  
GROUP MANAGEMENT  
LANGUAGE  
INDIVIDUAL STRENGTH  
HOME CENTER  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

ENVIRONMENT  
HEALTH  
GROUP MANAGEMENT  
SOCIAL  
PHYSICAL  
SAFETY  
INDIVIDUAL STRENGTH  
HOME CENTER  
SUPPLEMENTARY  
SELF CONCEPT  
CREATIVITY  
COGNITIVE  
LANGUAGE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE



INSTITUTION I. D. NUMBER: 20

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
HEALTH  
PHYSICAL  
CREATIVITY  
LANGUAGE  
SOCIAL  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
GROUP MANAGEMENT  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
INDIVIDUAL STRENGTH  
HEALTH  
SUPPLEMENTARY  
HOME CENTER  
ENVIRONMENT  
PHYSICAL  
SELF CONCEPT  
GROUP MANAGEMENT  
SOCIAL  
CREATIVITY  
LANGUAGE  
COGNITIVE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 21

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES.

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

HEALTH  
SAFETY  
SELF CONCEPT  
ENVIRONMENT  
INDIVIDUAL STRENGTH  
GROUP MANAGEMENT  
COGNITIVE  
SOCIAL  
PHYSICAL  
SUPPLEMENTARY  
HOME CENTER  
LANGUAGE  
CREATIVITY

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

HOME CENTER  
SUPPLEMENTARY  
ENVIRONMENT  
HEALTH  
SOCIAL  
SAFETY  
SELF CONCEPT  
PHYSICAL  
COGNITIVE  
INDIVIDUAL STRENGTH  
GROUP MANAGEMENT  
CREATIVITY  
LANGUAGE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 22

TOTAL Region

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

COGNITIVE  
PHYSICAL  
ENVIRONMENT  
HEALTH  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
CREATIVITY  
SAFETY  
SUPPLEMENTARY  
HOME CENTER  
GROUP MANAGEMENT  
SOCIAL  
LANGUAGE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

GROUP MANAGEMENT  
SOCIAL  
ENVIRONMENT  
HEALTH  
SAFETY  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
LANGUAGE  
COGNITIVE  
PHYSICAL  
CREATIVITY  
HOME CENTER  
SUPPLEMENTARY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. O. D. NUMBER: 23

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
HOME CENTER  
GROUP MANAGEMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
CREATIVITY  
LANGUAGE  
COGNITIVE  
PHYSICAL  
ENVIRONMENT  
HEALTH  
SAFETY

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
HOME CENTER  
GROUP MANAGEMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
CREATIVITY  
LANGUAGE  
COGNITIVE  
PHYSICAL  
ENVIRONMENT  
HEALTH  
SAFETY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 24

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

INDIVIDUAL STRENGTH  
SELF CONCEPT  
SAFETY  
CREATIVITY  
PHYSICAL  
ENVIRONMENT  
HEALTH  
SOCIAL  
GROUP MANAGEMENT  
LANGUAGE  
COGNITIVE  
SUPPLEMENTARY  
HOME CENTER

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

HEALTH  
HOME CENTER  
ENVIRONMENT  
SAFETY  
SELF CONCEPT  
GROUP MANAGEMENT  
SUPPLEMENTARY  
SOCIAL  
LANGUAGE  
INDIVIDUAL STRENGTH  
CREATIVITY  
PHYSICAL  
COGNITIVE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 25

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

LANGUAGE  
ENVIRONMENT  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
GROUP MANAGEMENT  
HEALTH  
SUPPLEMENTARY  
COGNITIVE  
SAFETY  
HOME CENTER  
CREATIVITY  
SOCIAL  
PHYSICAL

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

ENVIRONMENT  
PHYSICAL  
CREATIVITY  
SELF CONCEPT  
SUPPLEMENTARY  
LANGUAGE  
COGNITIVE  
SOCIAL  
HEALTH  
INDIVIDUAL STRENGTH  
SAFETY  
HOME CENTER  
GROUP MANAGEMENT

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

INSTITUTION I. D. NUMBER: 26

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST) FUNCTION AREA (STRONGEST TO WEAKEST)

HEALTH  
SELF CONCEPT  
SUPPLEMENTARY  
SAFETY  
SOCIAL  
INDIVIDUAL STRENGTH  
HOME CENTER  
PHYSICAL  
GROUP MANAGEMENT  
CREATIVITY  
LANGUAGE  
ENVIRONMENT  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST) FUNCTION AREA (STRONGEST TO WEAKEST)

SOCIAL  
LANGUAGE  
SELF CONCEPT  
HEALTH  
SAFETY  
SUPPLEMENTARY  
PHYSICAL  
ENVIRONMENT  
INDIVIDUAL STRENGTH  
GROUP MANAGEMENT  
COGNITIVE  
HOME CENTER  
CREATIVITY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

STITUTION I. D. NUMBER: 27

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
SUPPLEMENTARY  
ENVIRONMENT  
INDIVIDUAL STRENGTH  
HEALTH  
CREATIVITY  
PHYSICAL  
SAFETY  
SOCIAL  
LANGUAGE  
GROUP MANAGEMENT  
HOME CENTER  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
INDIVIDUAL STRENGTH  
LANGUAGE  
COGNITIVE  
HOME CENTER  
SAFETY  
HEALTH  
SELF CONCEPT  
GROUP MANAGEMENT  
SOCIAL  
ENVIRONMENT  
CREATIVITY  
PHYSICAL

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE



STATE I. D. NUMBER: 1

TOTAL Region

ARKANSAS

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST) FUNCTION AREA (STRONGEST TO WEAKEST)

SOCIAL  
ENVIRONMENT  
HEALTH  
GROUP MANAGEMENT  
SAFETY  
SUPPLEMENTARY  
LANGUAGE  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
PHYSICAL  
CREATIVITY  
COGNITIVE  
HOME CENTER

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST) FUNCTION AREA (STRONGEST TO WEAKEST)

HEALTH  
SOCIAL  
SUPPLEMENTARY  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
SAFETY  
LANGUAGE  
GROUP MANAGEMENT  
ENVIRONMENT  
COGNITIVE  
HOME CENTER  
PHYSICAL  
CREATIVITY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

STATE I. D. NUMBER: 2

TOTAL Region

LOUISIANA

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST) FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
HEALTH  
CREATIVITY  
SAFETY  
ENVIRONMENT  
INDIVIDUAL STRENGTH  
SOCIAL  
SUPPLEMENTARY  
LANGUAGE  
PHYSICAL  
HOME CENTER  
GROUP MANAGEMENT  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST) FUNCTION AREA (STRONGEST TO WEAKEST)

HEALTH  
SAFETY  
SOCIAL  
ENVIRONMENT  
GROUP MANAGEMENT  
HOME CENTER  
SELF CONCEPT  
SUPPLEMENTARY  
PHYSICAL  
INDIVIDUAL STRENGTH  
CREATIVITY  
COGNITIVE  
LANGUAGE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

STATE I. D. NUMBER: 3

NEW MEXICO

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)      FUNCTION AREA (STRONGEST TO WEAKEST)

ENVIRONMENT  
SELF CONCEPT  
SAFETY  
HEALTH  
PHYSICAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
GROUP MANAGEMENT  
SOCIAL  
HOME CENTER  
CREATIVITY  
LANGUAGE  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)      FUNCTION AREA (STRONGEST TO WEAKEST)

SUPPLEMENTARY  
HOME CENTER  
SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
GROUP MANAGEMENT  
PHYSICAL  
SOCIAL  
INDIVIDUAL STRENGTH  
COGNITIVE  
LANGUAGE  
CREATIVITY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

TATE. I. D. NUMBER: 4

TOTAL *Region*

OKLAHOMA

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
ENVIRONMENT  
HEALTH  
PHYSICAL  
SOCIAL  
SUPPLEMENTARY  
HOME CENTER  
LANGUAGE  
CREATIVITY  
SELF CONCEPT  
COGNITIVE  
GROUP MANAGEMENT  
INDIVIDUAL STRENGTH

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

HOME CENTER  
SUPPLEMENTARY  
SAFETY  
LANGUAGE  
CREATIVITY  
HEALTH  
ENVIRONMENT  
PHYSICAL  
COGNITIVE  
INDIVIDUAL STRENGTH  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

STATE I. D. NUMBER: 5

TOTAL *Region*

*TEXAS*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)      FUNCTION AREA (STRONGEST TO WEAKEST)

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
CREATIVITY  
SUPPLEMENTARY  
INDIVIDUAL STRENGTH  
PHYSICAL  
GROUP MANAGEMENT  
HOME CENTER  
LANGUAGE  
COGNITIVE

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)      FUNCTION AREA (STRONGEST TO WEAKEST)

HEALTH  
ENVIRONMENT  
SAFETY  
SOCIAL  
SELF CONCEPT  
INDIVIDUAL STRENGTH  
PHYSICAL  
GROUP MANAGEMENT  
CREATIVITY  
SUPPLEMENTARY  
HOME CENTER  
LANGUAGE  
COGNITIVE

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

LOT I. D. NUMBER: 6

TOTAL *Region*

*TEXAS PILOTS*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
HEALTH  
INDIVIDUAL STRENGTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
SOCIAL  
PHYSICAL  
CREATIVITY  
GROUP MANAGEMENT  
LANGUAGE  
COGNITIVE  
HOME CENTER

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

ENVIRONMENT  
HEALTH  
HOME CENTER  
SUPPLEMENTARY  
SELF CONCEPT  
SAFETY  
SOCIAL  
PHYSICAL  
LANGUAGE  
INDIVIDUAL STRENGTH  
COGNITIVE  
GROUP MANAGEMENT  
CREATIVITY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

OT I. D. NUMBER: 7  
NEW MEXICO PILOT

TOTAL *Region*

ASSESSMENT SUMMARY: CANDIDATES

ASSESSMENT SUMMARY: CANDIDATES

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
SAFETY  
HEALTH  
INDIVIDUAL STRENGTH  
COGNITIVE  
SUPPLEMENTARY  
PHYSICAL  
CREATIVITY  
SOCIAL  
LANGUAGE  
ENVIRONMENT  
GROUP MANAGEMENT  
HOME CENTER

SAFETY  
HEALTH  
SELF CONCEPT  
ENVIRONMENT  
SOCIAL  
INDIVIDUAL STRENGTH  
SUPPLEMENTARY  
CREATIVITY  
PHYSICAL  
GROUP MANAGEMENT  
LANGUAGE  
HOME CENTER  
COGNITIVE

ASSESSMENT SUMMARY: TRAINERS

ASSESSMENT SUMMARY: TRAINERS

FUNCTION AREA (STRONGEST TO WEAKEST)

FUNCTION AREA (STRONGEST TO WEAKEST)

SELF CONCEPT  
INDIVIDUAL STRENGTH  
ENVIRONMENT  
HEALTH  
SAFETY  
LANGUAGE  
GROUP MANAGEMENT  
SOCIAL  
COGNITIVE  
SUPPLEMENTARY  
PHYSICAL  
HOME CENTER  
CREATIVITY

HEALTH  
SAFETY  
ENVIRONMENT  
SUPPLEMENTARY  
HOME CENTER  
SELF CONCEPT  
SOCIAL  
GROUP MANAGEMENT  
PHYSICAL  
INDIVIDUAL STRENGTH  
LANGUAGE  
CREATIVITY  
COGNITIVE

State	Institution
<u>Code</u>	<u>Code</u>
I	<u>ARKANSAS</u>
	01 Arkansas State University
II	<u>LOUISIANA</u>
	02 Northwestern State University
	03 Southern University
	04 University of Southwestern Louisiana
	05 Grambling
III	<u>NEW MEXICO</u>
	06 U. N. M.
	07 New Mexico Highlands University Eastern New Mexico University New Mexico State - San Juan Branch Midwest (UNM) Gallup Grants Head Start Western New Mexico University Adelino Head Start
VII	08 NEW MEXICO PILOT
IV	<u>OKLAHOMA</u>
	09 Eastern Oklahoma State College Sallisaw Head Start
V	<u>TEXAS</u>
	10 Amarillo College (P.E.S.O.) Lubbock Christian



## V

TEXAS con't.

- 11 Austin Community College
- 12 El Paso Community College
- 13 Incarnate Word  
San Antonio
- 14 Midland College
- 15 Pan American University
- 16 Texas A & I
- 17 T. S. U.
- 18 T. W. U.
- 19 South Plains Junior College  
Vernon Regional Junior College  
Southwest Texas Junior College  
Howard County Junior College
- 20 Tarrant County Junior College

## VI

TEXAS PILOTS

- 216 T.W.U.
- 226 Pan American University
- 236 T. S. U.
- 246 Texas A & I
- 256 Stephen F. Austin
- 266 Tarrant County Junior College
- 276 T. C. U.

## SUMMARY

Presented below is a summary of the number of participants in each of the four priority groups for CDA assessment as determined by the system described.

<u>STATES</u>	<u>PRIORITY GROUPS</u>			
	<u>First</u>	<u>Second</u>	<u>Third</u>	<u>Fourth</u>
Arkansas	20	9	24	10
Louisiana	1	15	30	110
New Mexico	10	8	39	39
Oklahoma	1	1	1	38
Texas *	8	29	35	212
Total	40	62	129	409

\*Two hundred nineteen participants in the study were enrolled in Texas pilot CDA training programs. Texas pilot candidates were not assigned priority group standings because they will be assessed by the CDA Consortium under special arrangement. Their names and addresses are already on file at the CDA Consortium.

The primary reason for the large fourth group was that in approximately two thirds of the cases candidates did not send in their post performance profile. Approximately one third did not take the Concept Inventory. Using data available it is projected that seventy-five percent would be in group three.

Names, addresses and priority group assignment of all candidates in the study have been sent to the CDA Consortium.

Criteria for assignment to each priority group were:

High Priority Group. According to the information collected, approximately 100 trainees in the first group were reported to have a high degree of readiness to be assessed for the CDA credential. Trainees in the first group met the following criteria:

1. Their response to the Position Analysis showed that they perform an adequate number of activities in a center in order for an assessment to take place.
2. They reported that their CDA Portfolio is almost completed.
3. Performance Profiles submitted by the trainee and trainer and Concept Inventories showed that the trainee was at least competent in all 13 CDA function areas and highly competent in most.

Second Priority Group. According to the information collected approximately 150 trainees in the second group could also be ready to be assessed for the CDA credential. Trainees in the second group met the following criteria:

1. Their response to the Position Analysis showed they perform an adequate number of activities in a child center in order for an assessment to take place.
2. They reported that they are in the process of developing their CDA Portfolio. (Those in the first group have completed or almost completed.)
3. Performance Profiles submitted by the trainee and their trainer and the trainee's Concept Inventory showed that the trainee was competent in all 13 CDA function areas. (Those in the first group showed highly competent in most areas.)

Third Group. According to the information collected, trainees in the third group were not ready for assessment because

1. it was reported that they need to improve in one or more of the 13 CDA function areas to meet CDA performance criteria; or
2. they reported that they had not yet begun or had only begun developing their CDA Portfolio.

Fourth Group. It was not possible to determine whether or not the trainees were ready for CDA assessment for one or more of the following reasons:

- \_\_\_ 1. Their Position Analysis was not completed.
- \_\_\_ 2. It was not reported how far along they were in developing their Portfolio.
- \_\_\_ 3. There was no Performance Profile provided by the trainer.
- \_\_\_ 4. There was no Performance Profile provided by the trainee.
- \_\_\_ 5. No Concept Inventory was completed by the trainee.

## AN OBJECTIVE OVERVIEW OF CDA

### REGION VI

As a consultant with University Research Corporation, I have had the opportunity over the past few weeks to review the progress of CDA in Region VI, speak with project directors, some candidates, college deans, OCD staff, the Regional CDA Coordinator and others regarding their operation and concerns with CDA and review the newly prepared LAT Guidelines. With no vested interest in CDA, I feel I can therefore provide an objective overview of where CDA is in Region VI which the Regional Coordinator has asked me to include in his final report to the Child Development Associate Consortium.

In general, the CDA philosophy and the CDAC assessment and credentialing process has been well received and great strides have been made in the region in its implementation. The Region VI Federal Regional Committee on Children and Youth, made up of persons from the regional, state, and local agencies, both public and private have endorsed the CDAC and the assessment/credentialing process that it approved in March. The Office of Early Childhood Development, a division of the Texas Office of Community Affairs, under a contract with CDAC has been successful in implementing seven Texas pilot projects which have at least 200 persons now ready for assessment. Regional OCD, through its T/TA contracts, has spent approximately 10 man years in the last 2 years converting Head Start Supplementary Training to Child Development Associate Training. Responsible private day care operators are increasingly aware of the need for professional standards for child care workers. It appears that within the next few years the Texas Department of Public Welfare may set a policy requiring at

least one CDA per licensed center throughout the state. Increasing numbers of educators throughout the region are becoming proponents of competency-based professional training and assessment and willing to accept CDA's into their ranks.

However, as with any new system there are problems and concerns. I will attempt to give my impression of the concerns from several perspectives:

The Candidates: First and foremost the candidates, having trained for years, want to be assessed and credentialed now. They fear the time lag between training and actual assessment. Many are concerned because over time their individual trainers are leaving those positions and they feel they need them as part of the LAT. Others are concerned because they don't feel the trainers have spent enough time with them. Still others find a change of trainers or project directors confusing during the training process.

Most candidates feel that they need more time notification in preparing the necessary documents for both national CDAC assessment and regional assessment/prioritizing screening. They seem to feel this is the fault of CDAC, OCD, the Regional Coordinator. (OCD and the Regional Coordinator feel the fault lies with project directors or trainers.)

There is fear on the part of both candidates and trainers that CDAC representatives will not understand the problems inherent in bilingual-bicultural portions of the states. Many fear the LAT approach to assessment because strangers observing classroom routine automatically changes the behavior of the children and the candidate. Some have even suggested the use of paper and pencil type tests as part of the assessment process. Having reviewed the guidelines for assessment, it is clear that reading and writing ability will be necessary for successful assess-

ment.

While the Regional Coordinator has stressed the purposes and aims of the regional assessment/prioritizing screening process, many candidates do not have a clear understanding of the differences between it and the CDAC credential award system.

Especially in Texas, and particularly in the joint HSST-Texas pilot projects, there is apt to be a great deal of resentment by the HSST candidates as Texas CDA candidates are assessed and possibly credentialed and they are not. Additionally, as some candidates do not meet the assessment criteria, fear of even applying for assessment will multiply. Potential candidates, grow more wary of CDA training as they see candidate failure, the slowness of the assessment credentialing process, and/or the lack of acceptance of the credential by professional organizations, education agencies, or potential employers.

Project directors and trainers: The project directors and trainers, while very much behind the CDA competency based philosophy, also express many of the same concerns as the candidates. These include the time lag between training and assessment, lack of information from CDAC as to when, how, and who will be assessed, fear of a lack of understanding on the part of the CDAC representative to the bilingual-bicultural problems, and lack of acceptance of the credential when it is awarded. They also have special concerns.

Almost every project director I have spoken with has expressed gratitude for the helpfulness and interest of the Regional Coordinator in their programs. At the same time they are often times distressed with the lack of information from or involvement with the national CDAC and at times regional OCD. They feel they have little input (and no formal mechanism for input) into the plans which they must implement and which affect the training plans they must develop.

In many cases project directors are having difficulty selling the CDA concept to the universities they represent. They feel that more direct contact by CDAC and/or OCD staff would be helpful in gaining the acceptance of this still unproven product.

Project directors, trainers, and center directors will increasingly have morale problems with the candidates, especially in joint projects, as some are assessed and others are not on an apparent non-logical basis. In Region VI an assessment/prioritizing system is in place that would rank candidates in order of those most ready to be assessed by CDAC. This system was devised by the Regional CDA Coordinator and accepted by the project directors in all five states in the fall of 1974. While the system has been helpful to trainers and candidates as a training tool which allows them insight into the strengths and weaknesses in each of the six competency areas, and while it will provide valuable T/TA needs information for both the regional office and local projects, its third function of providing a rational basis for assessment in Region VI has been lost. A review of correspondence between CDAC and the Regional Coordinator's office, as well as discussions with regional OCD staff and the Regional Coordinator reveals little interest in the system (which might prove most profitable in terms of money, morale and time.

Regional Coordinator and OCD: For whatever reason (misunderstanding regarding the purpose of the regional assessment/prioritizing system, termination of the Regional CDA Coordinator's position, etc.) the flow of information from CDAC to the regional offices has been almost non-existent. This in turn makes effective communication with grantees difficult. It is unfortunate that information regarding the new assessment procedures and the "rules" regarding assessment/credentialing have been obtained only through informal communication.

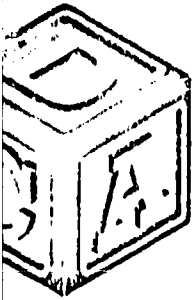
Of course the Regional Coordinator and regional staff are pleased that assessments will soon be underway in the region because of the contract with the Texas pilot projects. However, OCD staff are concerned over the fact that there are not equally concrete plans for the assessment of HSST candidates.

In individual conferences, workshops, meetings with educational agencies, and the Federal Regional Committee on Children and Youth, OCD and the Regional Coordinator have encouraged and promoted CDA philosophy, training, and the CDAC award system. They have offered support and suggestions to CDAC in an effort to provide a cost effective, efficient structure for assessment in Regional VI. There is a feeling that CDAC misunderstood the purpose of the regional system. However, although they regret the lack of consideration by CDAC of their suggestions, they continue in their support.

CDA is off the ground in Region VI. Many people have worked, and will continue to work, hard and patiently to promote quality child care in this Region. A first step is development of professional standards for child care workers. It is for this reason that CDAC has been supported. It is now the responsibility of CDAC to insure that their efforts do not go unrewarded. Assessment and credentialing must take place soon. The Consortium must renew the confidence of these dedicated people by providing reliable and up-to-date information on where assessment/credentialing is and where they stand. And finally, the CDAC must take any necessary steps to insure that the credential award system actually does assess competency in order to promote its acceptance as a professional standard.

Terry Dismukes





## The Child Development Associate Consortium

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TO: Pat Murphy  
Charles Cotten  
Allee Mitchell  
Leon Paulson  
Carroline Carroll

Dick Orton  
Jeannette Watson  
Tommy Sullivan  
Ray Williams  
Virginia Kronfeldt

FROM: J. K. Southard *[Signature]*

DATE: February 3, 1975

SUBJECT: Monthly Activity Report for January, 1975

### I. MAJOR ACCOMPLISHMENTS

- A. Conducted Workshop on Southwest Region plan to collect baseline data on CDA trainees - January 28, 29, 30, 1975, in Irving, Texas.
- B. Evaluation of Workshop - Total number of participants registered: 88. 68 Participants' responses to Workshop evaluation form. Based on an analysis of the participants' responses to the evaluation form, the following conclusions can be made:

#### Workshop Design

1. The large group - small discussion group format was very well received. Almost everyone felt they were involved.
2. The CDA-HSST slide tape presentation and training film added a great deal to the workshop.
3. Even though most participants were pleased with the facilities, there were some who were not.
4. Most participants liked the structured schedule and some did not.
5. The group leaders did an excellent job in relating to the needs of the people.
6. For almost everyone the workshop was on target with its purpose.

#### Workshop Content and Materials

1. Presentations and discussions were clear for the vast majority of participants. Some participants had trouble with how it all fits together and with the Concept Inventory.
2. The CDA Consortium input (organizers, criteria, portfolio

guidelines) was clear and had high acceptance.  
Only one respondent stated that the criteria were unclear...Thanks to CDAC.

3. Almost everyone liked the Manual, Profile, Position Analysis and Record of Development. The Record... received the highest rating.
4. The Concept Inventory received mixed reviews. In the form it was presented, it is of little use; but the idea is supported by most of the participants. It needs a great deal of work.
5. It is clear that the assessment procedures presented are only to collect baseline data to improve training and not to be used to award a credential or certificate.

Summary: It was a good workshop. There were fewer problems than I anticipated. To evaluate its effectiveness we will have to wait until we can see outcomes from the field.

## II. TRAVEL:

- A. January 2, 1975, Nacogdoches - Met with Eugene Howard to go over Region plan and review all materials.
- B. January 7, 1975, Austin, Texas - TOECD - TEA reviewed proposals for occupational analyses at TEA. Discussed Region plans and critiqued materials.
- C. January 8, 1975, Houston, Texas, - Took Assessment Manual copy to TSU for printing.
- D. January 14, 1975, Dallas, Texas, - Visited DISD Skyline Center early child center.
- E. January 20 - 24, 1975, Washington, D. C., - CDAC Workshop for training of Representatives involved in winter validity study. Met with University Research Corporation regarding Region workshop plans.

## III. EARLY WARNINGS:

- A. One of the stated benefits to CDA candidates participating in the collection of baseline data is to be placement/assignment of a priority ranking for entry into Consortium assessments for this region. If the Consortium imposes its own order of priorities without regard or consideration for this region's plan, we may have a problem.



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
REGIONAL OFFICE  
1114 COMMERCE STREET  
DALLAS, TEXAS 75202

OFFICE OF  
THE REGIONAL DIRECTOR

TO: HSST Directors  
FROM: Charles Cotten  
Management Specialist

DATE: December 6, 1974  
SUBJECT: CDA Assessment  
Workshop

The CDA Assessment Workshop for Region VI will be held in Dallas from noon January 28 through noon of January 30, 1975.

The purpose of the workshop will be to train all HSST trainers and field supervisors, both full time and part time, in the use of instruments and techniques employed in gathering baseline data on all trainees in the region. It is anticipated that everyone involved in HSST/CDA training during the spring of 1975 will participate in the assessment. Results from the data collection will be analyzed to upgrade training programs, individualize instruction for those requiring further training, and determine levels of performance of those exiting HSST programs.

HSST trainees in protected categories may participate in the assessment. Trainees who have exited training previously, that is, are not enrolled in training in the spring of 1975 will not be included in this assessment. A system to include them later is being devised.

The workshop will be conducted by Dr. J. K. Southard, Coordinator of CDA Assessment for the Southwest Region. University Research Corporation will coordinate and assist in presenting the workshop.

Travel and per diem expenses shall be assumed through your project grant budgets. As project director, you are responsible for informing your trainers of their participation.

Only trainees whose trainers or supervisors attend the workshop will be involved in the assessment this spring. Results will be used to set priority standings for trainees to be involved in later assessment for the national CDA Credential.

Have a pleasant holiday season.

See you in January.

lh

CDA/HSST

university research corporation

December 18, 1974

(Attached Addressees)

University Research Corporation has been contracted by the National Office of Child Development to provide regional workshops and materials development services to CDA/HSST programs. In cooperation with Dr. J. K. Southard, Coordinator of CDA Assessment for the Southwest Region and Region VI Office of Child Development, we will coordinate and assist in conducting a workshop in Dallas, Texas, on January 28, 29, and 30, 1975.

This workshop will serve as a training session covering the CDA assessment system to be used in Region VI. Everyone involved in CDA program development, training and field supervision should plan to attend. Would you please arrange for all of the appropriate part-time and full-time staff in your program to participate in this workshop.

The workshop will be held at the Ramada Inn, 120 West Airport Freeway, Irving, Texas (there is hourly limousine service from the Dallas-Ft. Worth Airport). Special arrangements have been made for room accommodations. In order for you and your staff to take advantage of the reduced rate of \$13/day available to workshop participants, please complete and return the enclosed preregistration cards by January 13, 1975. URC will be responsible for your hotel arrangements in line with preferences indicated on the reservation card. Additional cards have been enclosed for those trainers and field supervisors in your program who will be attending the conference.

Travel and per diem expenses for you and your staff are to be incurred by your project budget. If you should have any questions regarding this matter, please contact your Region VI Office.

Feel free to call or write Laura Battey of our office (301/654-8338) regarding questions you may have concerning the workshop arrangements. We look forward to seeing you on January 28.

Sincerely,

Leroy Jones  
Project Director

LJ:ewk  
Attachments

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cc: Charles Jones, James Cotten, Jerry Southard



REGION VI WORKSHOP AGENDA  
January 28 - 30, 1975, Dallas, Texas

Group designation

TUESDAY, JANUARY 28, 1975


12:00 - 1:30	Registration	Ballroom Lobby
1:30 - 2:00	Opening Remarks - OCD	Salon I
2:00 - 2:30	CDA/ C/N Overview, (Leroy Jones)	Salon I
2:30 - 3:00	Slide-tape presentation, "CDA/HSSST: Together Towards Competence"	Salon I
3:00 - 3:15	Coffee	
3:15 - 4:00	Rationale For Assessment/Region VI Plan; Relationship of Training and Assessment; Overview of Materials; Workshop Format, (Dr. Jerry Southard)	Salon I
4:00 - 5:00	Four small group meetings: Position Analysis	Salon I Bambu Room Cacto Room Conferencia Room
5:30 - 6:30	Hospitality	(Suite to be announced)

chalk board

WEDNESDAY, JANUARY 29, 1975

8:30 - 9:15	Orientation to Analysis of Performance Profile	Salon I
9:15 - 9:30	Coffee	
9:30 - 11:30	Four small group meetings on Analysis of Performance Profile	Salon I Bambu Room Cacto Room Conferencia Room
11:30 - 1:00	Lunch	
1:00 - 2:00	Orientation to Observation Record	Salon I

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 CDA-HSSST

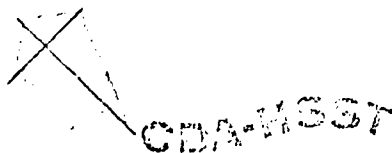
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## WEDNESDAY, JANUARY 29, (Continued)

2:00 - 3:00	Small group discussion of Observation Record	Salon I Bambu Room Cacto Room Conferencia Room
3:00 - 3:15	Coffee	
3:15 - 4:00	Small group discussion of CDA Portfolio Guidelines	Salon I Bambu Room Cacto Room Conferencia Room
4:00 - 4:30	Large Group Summary and Pick Up Materials for Trainees	Salon I

## THURSDAY, JANUARY 30, 1975

8:30 - 9:00	Concept Inventory Orientation	Salon I
9:00 - 9:15	Coffee	
9:15 - 11:15	Concept Inventory Administration, four small group meetings	Salon I Bambu Room Cacto Room Conferencia Room
11:15 - 11:45	Summary and Deadlines	Salon I



AN EVALUATION OF  
CDA/HSST WORKSHOP  
REGION VI OFFICE OF CHILD DEVELOPMENT  
January 28 - 30, 1975, Dallas, Texas

*Composite*

I Workshop Design

A. Circle the small group you were in:

A      B      C      D

Wt.  
Avg.

B. Please rate the following sessions:

1. Opening remarks
2. Slide-tape presentation
3. Large group orientation sessions
4. Small group work sessions
5. Wrap-up session

Not Useful		Excellent			
1	2	3	4	5	
1	13	17	24	3	3.3
1	5	18	29	8	3.5
3	4	23	29	3	3.4
3	2	12	30	16	4.5
3	7	18	18	8	3.4

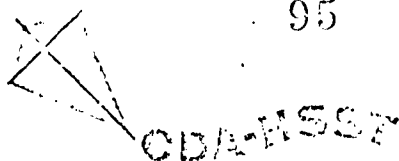
C. To what extent do you agree or disagree with the following statements?

1. All activities were consistent with workshop objectives.
2. The schedule was too structured
3. The group facilitators were competent and effective.
4. The workshop facilities (e.g., meeting rooms, coffee breaks, etc.) enhanced the workshop.
5. All participants had opportunities for involvement.
6. The film provided useful practice in recording observations.

	Strongly Agree	Strongly Disagree	%
1.	86	7	14
2.	34	42	66
3.	91	5	9
4.	71	16	29
5.	94	4	6
6.	86	8	14

D. The workshop was: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(use back if necessary)



## II Workshop Content and Materials

A. The following presentations and discussions were:

	%	Clear	Unclear	%
1. Rationale for assessment/data collection plan	85	49	9	15
2. Position analysis	85	46	8	15
3. The 13 critical functions and criteria	99	56	1	1
4. Performance profile	95	58	3	5
5. Performance levels	87	48	7	13
6. Record of development	90	60	7	10
7. Portfolio guidelines	88	52	7	12
8. Concept inventory	64	37	21	36
9. Synthesis of the assessment components	70	36	15	30

B. Please rate the following materials:

	Not Useful					Excellent					Wt. Ave.
	1	2	3	4	5	1	2	3	4	5	
1. Assessment manual	0	2	19	23	12						3.8
2. Position analysis	0	3	22	30	5						3.5
3. Performance profile	1	1	21	27	7						3.7
4. Record of development	2	4	14	25	12						3.9
5. Portfolio guidelines	0	6	18	25	9						3.6
6. Concept inventory	19	8	13	16	1						2.5

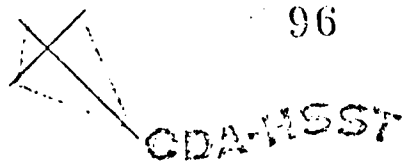
C. The concept inventory: (Check one)

- 24% 14  1. Should be abandoned. Why? \_\_\_\_\_
- 61% 35  2. Should be kept but needs much improvement. How? \_\_\_\_\_
- 15% 9  3. Is OK the way it is.

D. Is it clear that this assessment procedure is only for collecting data and improving training and is not going to be used to award a credential or certificate? All Yes  No 10

E. Comments, questions, reactions, suggestions, etc.: (Use the back for C and E if necessary.) \_\_\_\_\_

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Workshop - January 28-30, 1975  
Irving, TX

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Child Development Associate  
*ASSESSMENT MANUAL*

*For*

*Southwest Region*

Spring 1975

Published by

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Houston, Texas

**Child Development Associate**

**ASSESSMENT MANUAL**

**for**

**Southwest Region**

**Arkansas  
Louisiana  
New Mexico  
Oklahoma  
Texas**

**Prepared by**

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**Spring 1975**

## PREFACE

The plan for assessing the competence of early child workers described in this document has been formulated to meet an immediate and specific need within Region VI, that is, to collect baseline data regarding performance and knowledge of trainees in early child programs. Results from the region-wide assessment will be fed back to all trainees so that professional growth plans may be individualized. Grouped program data will be used to identify strengths, weaknesses and design strategies for overall program improvement in the region.

Even though the system established is comprehensive in approach, specifics are not exhaustive. In addition, great consideration has been given to the problem of program variations related to philosophical differences in theoretical and pragmatic domains.

The system itself is open ended and dynamic. It will be under constant scrutiny and revision. Therefore, data collected at one point in time will not be compared to subsequent data. By the same token a person assessed at one level today might be assessed at another level a year from now . . . both the assessment system and the individual assessed will change over time. The results or standing of a person assessed can only be considered in terms of a particular time. The greater the amount of time between assessment and future analysis of that assessment, the greater will be the disparity between what was measured and what is real. For that reason, this assessment is continuous or assumed to be formative in nature rather than summative. In that way assessment becomes a vehicle for individual professional growth and training program improvement.

Writing a manual describing an assessment system is fraught with many problems. If too much is put in, it gets heavy and loses its strength. If too little explanation or background is given, its validity will be challenged. Being aware that writing this manual is probably only the first of an annual task makes the job somewhat easier. The author knows that everyone involved will feed back criticisms so that the system — and manual — next year will be better than this one.

The system has been designed by a great number of early child development professionals in the Southwest region — all knowledgeable about the work of the Child Development Associate Consortium. The author has attempted a synthesis between practicality and "ivory tower" theoretical constructs. The system is compatible with CDA Consortium approaches and is intended to complement the national effort.

Jerry K. Southard

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I  
**Southwest Region  
CDA ASSESSMENT PLAN**

Introduction

The idea of early child development competency-based training in the Southwest Region has captured the imagination of practitioners and professionals alike. Head Start Supplementary Training programs throughout the region have been in the process of converting to competency-based training during 1974-75. States have established Offices of Early Child Development to promote the improvement of training programs, upgrade the quality of child care, and coordinate multi-agency forces in child advocacy programs.

Since the advent of the Child Development Associate concept presented by the HEW Office of Child Development, much progress has been made in improving care for children throughout the Region. The proposition that training should include supervised field experience as well as academic study in the field of early child development has been incorporated into many training institutions.

Two projects have been funded by OCD in the Southwest Region to pilot CDA training. Eastern Oklahoma State College is piloting a training design from a central location at Wilburton which reaches throughout the state. The project at the University of New Mexico in Albuquerque contemplates multi-culture social variables in a bilingual training model. The Texas Department of Community Affairs, Office of Early Childhood Development funded projects in 1971-72 to pilot varied training models at nine different institutions of higher education.

The great emphasis on conversion to competency based training programs in all of the states is influencing questions about licensing regulations, personnel certification and the like for early child centers in all the states.

State task groups charged with studying changes in regulations and policy making are vitally interested in the assessment and credentialing responsibility of the CDA Consortium. The wide spread implementation and acceptance of the CDA credential will fill a prime need for standardization of definitions of competent performance. However, the Consortium may not have the capability to meet the broad needs within Region VI this spring. The following plan is proposed to fill the gap until the Consortium can meet those needs.



### Southwest Region Plan for Spring 1975

The Offices of Child Development in HEW Region VI and Texas Department of Community Affairs have devised a plan to meet three specific needs. First, a great number of trainees\* in competency-based training will be exiting from pilot programs in the spring of 1975. Those candidates should receive commendation for their participation in the special projects. Secondly, broad baseline data should be collected on the candidates who were involved in the various projects. Third, candidates have the right to know where they stand in relation to entering assessment for a national CDA credential.

Within the time and financial constraints of existing structures, the Coordinator of CDA Assessment in the Southwest Region will supervise the collection and analysis of broad baseline data. Individual results will be reported to candidates. Composite results will be reported to program directors and other appropriate state and federal agencies.

Participants. Candidates will be all those currently involved in special early child development training: those who are determined by project trainers as "ready to exit" a specific program -- using program criteria, as well as, those who are not ready to exit in the spring of 1975. Special training programs are defined as those funded by state or federal agencies (HISST, TEXAS pilots, OCD pilots) to provide early child development training in 1974-75.

Deadline. The collection of data will begin in January and continue through May, 1975. Trainers will be responsible for the involvement and participation of candidates directly under their supervision in the various programs.

Only candidates for whom all data requested as described in the instrument - procedures section of this manual and received by the Regional Coordinator by June 2, 1975, will be included in the study or receive candidate benefits described below.

### Benefits to Candidates

Each candidate included in the study will receive: (during the summer of 1975)

1. A commendation for their participation in CDA training. \*\*
2. A statement from the Regional Coordinator of CDA Assessment of their priority standing for CDA Consortium assessment toward the national CDA credential when it is made available.
3. A profile of the candidate's performance and knowledge levels as determined through the system.

\*Trainees hereinafter will be referred to as "candidates" in that they are candidates for a credential identifying their competence.

\*\*The commendation is NOT a CDA credential of competent performance.

SPECIAL NOTE: Individual profiles will be given only to the candidate to be used or shared as they see fit. All other data reported to agencies or programs will be group data or identities will be held anonymous.

NOTE: Letters of commendation, but not individual profiles, will be sent to the employer of each candidate participating.

NOTE: Governing boards and directors of early child development centers will be encouraged to begin considering the CDA performance concept when studying personnel policies relating to promotions, salary increases, and hiring practices.

### Benefits to Training Programs

The director of each training program will receive:

1. A composite profile of all candidates' performance and knowledge in their program.
2. A composite profile of all candidates participating in the study in the region for comparative purposes.

*Profile*  
*Candidate to Candidate*  
*Program to Program*  
*State - Region*

Based upon a study of the profiles, training program plans may be revised, in-service remediation measures may be designed, and supplementary materials to improve programs may be procured.

State and regional offices will receive comprehensive reports which can be used to improve programs.

### Assessment Model

The assessment model designed for the region is based upon the supposition that both performance and knowledge are integrated in competent early child development workers . . . that critical functions within the broad field of early child development can be specified . . . that there are levels of performance and knowledge . . . that behavioral levels within functions can be specified and identified . . . and that trends or patterns can be established over time using multi techniques which point to criteria referents.

CDA Competency Areas. The six primary competency areas have been further defined in terms of critical functions for each. The scheme presented on the following page is an outline of the model used throughout the system. The critical functions are identical with organizers defined by the CDA Consortium as used in the Consortium's 1975 field test of the assessment system.

# CHILD DEVELOPMENT ASSOCIATE

## Competency Areas and Critical Functions

CDA Comp Area

Critical Functions

I Establishes and Maintains a Safe and Healthy Learning Environment	SAFETY	HEALTH	ENVIRONMENT	
II Advances Physical and Intellectual Competence	PHYSICAL	COGNITIVE	LANGUAGE	CREATIVE
III Builds Positive Self-Concept and Individual Strength	SELF-CONCEPT	INDIVIDUAL STRENGTH		
IV Positive Functioning of Children and Adults in a Group Environment	SOCIAL	GROUP MANAGEMENT		
V Coordination of Home and Center Child-Rearing Practices and Expectations	HOME - CENTER			
VI Supplementary Responsibilities Related to Childrens' Programs	STAFF			

## *Instruments and Procedures*

The assessment includes three instruments for collecting information regarding the developmental level of candidates and two techniques for recording growth in the profession for the candidate's personal file.

### Collecting Baseline Data

- Position Analysis The Analysis is designed to provide information about the background and job of the candidate as of February, 1975.  
Procedure. The trainer will explain the Analysis to the candidate and together they will fill out one form and mail it to the regional coordinator in February only.
- Performance Profile The Profile is designed to provide an assessment of the candidate's level of performance in each of the CDA critical function areas.  
Procedure. Using the descriptions in the manual as guidelines, two assessments of candidate performance will be made.

### Pre-Assessment in February

Both the candidate and trainer in conference will fill out one form and mail to the regional coordinator.

### Post-Assessment in May

The candidate and trainer will independently fill out one Profile each and independently mail them to the regional coordinator.

- Concept Inventory The Inventory is designed to obtain a measure of the candidate's level of understanding of early child development.  
Procedure. Each candidate will respond to the instrument under strict conditions at the training institution. The instruments will be sent to the regional coordinator for scoring and analysis.

### Recording Growth.

- Record of Development The Record is designed for the trainer to record the development of the candidate over an extended time period.  
Procedure. The trainer may use the Record to record observations of the candidate's performance, candidate's participation in study sessions, etc. The Record should become a part of the candidate's Portfolio and should be consistent with the trainer's post-Performance Profile.
- Portfolio The Portfolio is the historical file describing candidate's professional development. The Portfolio will become the basis for assessment for national CDA credential.  
Procedure. Guidelines for developing the Portfolio are presented in the appendix of the MANUAL.

**NOTE:** Questions regarding the Record of Development and the Portfolio should be answered on the post-Performance Profile sent to the regional coordinator in May, 1975.

1975 Spring Calendar  
HEW Region VI CDA Assessment

<u>January</u>	<u>February</u>	<u>March</u>	<u>April</u>	<u>May</u>	<u>June - July</u>
<p>28-30 Dallas Workshop for all Trainers</p>	<p><u>Position Analysis</u> Candidates with trainers respond and send composite to regional coordinator</p> <p><u>Performance Profile</u> Candidates with trainers respond and send composite to regional coordinator (Pre-assessment)</p>		<p><u>Concept Inventory</u> One or more trainers receive instruction in administering CI to candidates</p>	<p><u>Profile</u> Candidates and trainers send to regional coordinator independently (Post-assessment)</p> <p><u>Inventory</u> All candidates will respond under strict conditions. Send to Region Office.</p>	<p>Region Office Analysis of data and return of Profiles to Candidates</p>
	<p><u>Record of Development</u> Trainers begin record of supervision of candidate performance.</p>	<p><u>Record</u> continue</p>	<p><u>Record</u> continue</p>	<p><u>Record</u> continue</p>	
	<p><u>Portfolio</u> Candidate begins organi- zation of Portfolio.</p>	<p><u>Portfolio</u> continued</p>	<p><u>Portfolio</u> continued</p>	<p><u>Portfolio</u> Verifications sent to regional coordinator on PP.</p>	<p><u>Portfolio</u> Candidate continues to upgrade Portfolio.</p>

## II

### Child Development Associate

#### PERFORMANCE LEVELS AND FUNCTION AREAS

The CDA Performance Levels to be used in the Southwest Region Spring assessment are adaptations of CDA Consortium guidelines. The Function Area criteria are similar to those used by the CDA Consortium in the spring, 1975 validity field test and are reproduced here with permission.

##### Performance Levels

The performance levels described below should be followed by everyone in the Regional Assessment when using the Performance Profile and when recording the development of candidates in training.

<u>Level</u>	<u>Performance Description</u>
<u>Highly Competent</u>	Can develop program activities, schedules, and evaluate development of children without help. Can supervise the work of other staff members in the child center. Can train other adults to work with children at the competent level. Assumes initiative and is a leader in the profession/center.
<u>Competent</u>	Can adapt plans and activities to meet the needs of children. Can be independently responsible for the development of a group of children. Can supervise the work of an adult assistant. Takes the initiative for his/her own professional development.
<u>Needs Improvement</u>	Requires training and/or experience to reach competent level. Requires supervision while working with children.

A fourth category used in the assessment instruments is the **UNKNOWN**. Many factors may be present which would make it impossible to accurately determine the level of performance of a candidate. (1) Conditions. Center policies, program, or conditions might prevent a candidate from the way he/she would want to work with children. (2) Time. The trainer may not have observed or worked with a candidate to adequately assess a level of performance in a particular area. (3) Other. Some other variable, such as, a personality or philosophical difference between the trainer and candidate, or language barrier might make an accurate assessment impossible. When the level is Unknown, the reason should be specified: Conditions, Time, or Other.

NOTE: In the Region Spring assessment, if either the candidate or trainer note that the performance level of the candidate is unknown in any area or category, the CDA Profile issued to the candidate from the Regional Coordinator will show only that the performance level is unknown. The specific reason will be kept confidential. Different techniques will be used to determine the unknown performance levels of candidates in later assessments depending upon the reasons given.

## CDA FUNCTION CRITERIA\*

### I. Establishes and Maintains a Safe and Healthy Learning Environment

#### Function Area: SAFETY

Candidate provides a safe environment by taking necessary measures to avoid or reduce accidents.

#### Criteria:

Candidate provides and maintains a safe environment as evidenced by the applications of generally acceptable safety practices,

e.g.:

- encouraging child behavior and children's activities which are consistent with common safety practices;
- stopping and/or redirecting unsafe child behavior or children's activities;
- making sure exits are uncluttered and clearly marked;
- placing equipment consistent with use;
- eliminating hazardous conditions or dangerous situations;
- stores dangerous or poisonous materials properly;
- providing equipment that is in non-hazardous condition;
- keeping play areas free from hazardous debris.

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

\*Adapted by Regional Coordinator with permission from CDA Consortium drafts.

## **I. Establishes and Maintains a Safe and Healthy Learning Environment**

### **HEALTH**

Candidate provides an environment which is free of factors which may contribute to illness.

#### **- Criteria:**

Candidate provides and maintains a healthy environment as evidenced by the application of generally acceptable health practices,

e.g.:

- encouraging child behavior and children's activities which are consistent with common health practices;
- recognizing unusual behavior or symptom of children who are not feeling well;
- making adequate (supervised) provision for children who become ill;
- within constraints of the facilities, providing adequate climatic conditions in the classroom;
- providing adequate storage for the preservation of food;
- providing clean serving and eating areas for children;
- keeping the environment free of garbage;
- having adequate first aid materials available;
- having tissues and soap available.

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.



## I. Establishes and Maintains a Safe and Healthy Learning Environment

### ENVIRONMENT

Candidate arranges the room and selects materials to provide an environment conducive to learning.

#### Criteria:

Candidate arranges and maintains an environment which is conducive to learning as evidenced by his application of generally acceptable principles of learning,

e.g.:

- the day-to-day selection of materials and equipment which are appropriate to the objectives of the program;
- the day-to-day selection of materials and equipment which provide a challenge while enabling each child to experience success;
- the use of materials and equipment in such a way as to enable adequate adult supervision and assistance;
- the use of materials and equipment which consider the child's total development (mental, physical, emotional);
- the incorporation into the environment of materials and/or equipment which are native to the cultural groups and regions being served;
- the arrangement of an environment so as to encourage children to use it productively; one which:
  - ★ is aesthetically appealing
  - ★ is orderly, but not sterile
  - ★ makes good use of the space available
  - ★ considers the specific needs of children (interests, capabilities)

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

## II. Advances Physical and Intellectual Competence

### PHYSICAL

Candidate helps children to feel comfortable with themselves and their surroundings by providing an environment which promotes competence in a wide variety of movement activities.

#### Criteria:

Candidate promotes the physical competence of children as evidenced by the providing and maintaining of an environment in which children grow and learn to move with competence and confidence,

e.g.:

- assessing the physical needs of individual children: adapting materials, equipment and activities to meet these needs;
- adequate provision of materials and activities which are designed to promote and stimulate the motor development of children;
- adequate day-to-day provision of materials and activities which are designed to promote and stimulate the physiological growth of children (strength, flexibility, agility, balance, speed, endurance, etc.);
- providing activities and equipment which encourage children to explore and to experiment with body movement;
- providing adequate supervision to movement activities so that, while allowing a maximum of freedom, children are not subjected to undue physical danger;
- providing adequate opportunity throughout the program for children to move.

NOTE: The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

## II. Advances Physical and Intellectual Competence

### COGNITIVE

Candidate stimulates thinking and provides problem-solving activities appropriate for the developmental level of each child.

#### Criteria:

Candidate promotes the cognitive development of children as evidenced by providing and maintaining an environment which stimulates children to think and to solve problems,

e.g.:

- assessing the cognitive needs of individual children/adapting equipment, materials and activities to meet these needs;
- using materials and activities which enable individual children to experience success (neither too difficult nor too easy);
- providing opportunities and encouragement throughout the program for children to acquire information about their world (concept formation);
- providing materials and activities which require children to think and to solve problems;
- interacting with children in ways which allow and encourage them to think and to solve problems;
- stimulating expanded thinking and problem-solving by providing immediate specific feedback to children;
- providing materials and activities which encourage children to explore and experiment with new ideas;
- providing materials, activities and teacher-child interaction which stimulate focused behavior (of initiating, attending, carrying through, etc);
- providing activities and teacher-child interaction which are likely to stimulate children to organize their experiences in terms of relationships and conceptual dimensions (classifying objects, identifying similarities and differences, comparing sizes or amounts, determining causality, etc.).

NOTE: The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

## II. Advances Physical and Intellectual Competence

### LANGUAGE

Candidate helps children acquire and use language so they can communicate their thoughts and understand the thoughts of others.

#### Criteria:

Candidate promotes the language competence of children as evidenced by the providing and maintaining of an environment in which children are stimulated to use language as a means of communication,

e.g.:

- assessing the language needs of individual children/adapting materials and activities to meet these needs;
- using materials, activities and time in ways which stimulate children to communicate with each other;
- interacting with children in ways which allow and encourage them to use language as a means of communicating (by asking questions which require multiple word responses, using periods of silence during verbal interaction, etc.);
- providing opportunities and encouragement throughout the program for children to acquire and enlarge their vocabulary;
- encouraging children to use language to express feelings;
- associating words with objects, events, persons, etc.;
- providing a good language model by speaking clearly and distinctly and at a level which children understand and respect;
- recognizing a child's cultural heritage by encouraging him to use the language which is native to that culture;
- recognizing a child's language competence as an accepted form of communication/encouraging him to use his language ability as the vehicle for continued language learning.

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

## II. Advances Physical and Intellectual Competence

### CREATIVE

Candidate provides a variety of media which encourage children to express their creative abilities.

#### Criteria:

Candidate promotes the creative expression of children as evidenced by providing and maintaining an environment in which children are allowed and encouraged to explore, to experiment, and to express their ideas,

e.g.:

- using equipment, materials and activities throughout the program which stimulate exploration, experimentation and expression of ideas;
- establishing an environment which allows and encourages children to explore, to experiment and to express their own ideas (reasonable rules, reasonable schedules, etc.):
  - \* encouraging children to explore alternative approaches or responses;
  - \* encouraging children to express new or different ideas;
  - \* accepting a child's ideas and responses/ encouraging children to evaluate their ideas or responses and to express their feelings about them;
  - \* accepting a child's creative expression without placing a value judgment on it/accepting the child's feelings about his creative expression

NOTE: The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

### III: Builds Positive Self-Concept and Individual Strength

#### SELF-CONCEPT

Candidate helps children to know, to accept and to appreciate themselves as persons.

#### Criteria:

Candidate helps children to grow toward a sense of positive identity by providing and maintaining an environment of acceptance and encouragement,

e.g.:

- providing equipment, materials and activities which recognize and are adapted to the differences of individual children;
- providing equipment, materials and activities which accept and build upon the differences of individual children;
- relating to children in ways which indicate that they are known and appreciated (using child's name, noticing child's clothing, listening to child's story, etc.);
- providing individual children with direct positive (but honest) feedback about their performance, their ideas, etc.;
- including a child's home language/culture functionally in activities of the center;
- using a child's home language as a bridge to another language for the sake of extending communication;
- establishing and maintaining limits for student behavior which are reasonable, fair, and reflect a positive tone;
- establishing and maintaining a feeling tone which is likely to be positive and comfortable to children (relaxed, sincere, secure, natural, interested, etc.);
- relating to the individual needs of children by using a variety of teaching methods and by maintaining flexible, realistic expectations;
- using materials and activities throughout the program which enable individual children to experience success (neither too difficult nor too easy);
- encouraging individual children to accept and to express their feelings within acceptable limits.

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

### III. Builds Positive Self-Concept and Individual Strength

#### INDIVIDUAL STRENGTH

Candidate helps children develop a sense of independence and acquire the ability to express, understand and control their feelings.

#### Criteria:

Candidate helps children develop a sense of independence by providing and maintaining an environment in which children are respected as competent persons who can make decisions and care for their own needs,

e.g.:

- using materials and activities which enable individual children to experience success (neither too difficult nor too easy);
- providing opportunities for children to make decisions and to direct their own activities;
- accepting the ideas and decisions of individual children;
- providing opportunity and encouragement for children to care for their own needs — providing assistance where it is needed and requested;
- encouraging and, as needed, assisting children in expressing their feelings in acceptable ways;
- supporting individual children's attempts to deal with their feelings — providing assistance as needed and requested;
- interacting with individual children in ways which are open and honest;
- providing individual children with positive constructive feedback about their ideas, their performance, etc.;
- interacting with children in ways which exhibit honesty and trust (keeping promises, expressing honest feelings, etc.)

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

#### IV. Positive Functioning of Children and Adults in a Group Environment

##### SOCIAL

Candidate helps the children get along with others and develop a feeling of mutual respect for other children in the group.

##### Criteria:

Candidate stimulates children to relate to and develop a feeling of respect for other persons (children and adults) by providing an environment in which children are respected and in which respect for other persons is expected and encouraged,

##### e.g.:

- relating to children as individual persons who have feelings and thoughts which will be considered throughout the program;
- using equipment, materials and activities which relate to the individual interests, capabilities and learning styles of children;
- setting expectations for children which are consistent with their individual capabilities, interests, etc.;
- respecting the rights of children (listening to them, respecting their privacy, respecting their property, etc.);
- providing an environment in which children are given opportunities to work cooperatively as well as independently;
- encouraging children to express their feelings and to defend their rights/ providing assistance as needed and/or as requested;
- encouraging children to recognize, accept and respect the feelings and rights of others/providing assistance as needed and as requested;
- providing materials and activities which recognize and build upon cultural variation;
- providing an environment in which individual children are encouraged to compete with themselves.

NOTE: The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.



#### IV. Positive Functioning of Children and Adults in a Group Environment

##### GROUP MANAGEMENT

Candidate provides a positive and related routine and establishes simple rules for the group which are understood and accepted by children and adults.

##### Criteria:

Candidate provides effective group management as evidenced by his ability to work productively with both children and adults in the center,

e.g.:

- establishing a reasonable system of limits, rules and regulations which are understood, honored and respected by children and adults;
- assuming his share of the responsibilities for operation of the program;
- using equipment, materials and space in ways which are considerate of the needs and desires of both the children and other adults in the center;
- scheduling of activities in ways which are comfortable and which consider the needs and desires of children and other adults in the center;
- organizing transition activities in ways which are considerate of the needs and desires of children and other adults in the center;
- anticipating potential problem areas and taking action necessary to avoid the problem or to work with the problem.

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this functional area. The observer should add any evidence which he feels may be useful in making a decision.

## V. Coordination of Home and Center Child-Rearing Practices and Expectations

### HOME CENTER

Candidate establishes positive and productive relationships with parents and encourages them to participate in the center's activities.

#### Criteria:

Candidate establishes and maintains positive and productive relationships with parents and encourages them to participate in the center's activities,

e.g.:

- sending announcements or letters about center activities to parents;
- giving parents information about child's progress;
- responding to parent requests about child or center;
- involving parents in center activities;
- visiting home or with parents to learn about cultural and ethnic background of child;
- planning center activities which are related to home background of child;
- considering parent expectations for child in program plans.

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this function area. The observer should add any evidence which he feels may be useful in making a decision.

## VI. Supplementary Responsibilities Related to Children's Programs

### STAFF

Candidate communicates with other staff members concerning activities, policies, rules, programs, and plans about the performance and health of the children.

#### Criteria:

Candidate carries out supplementary staff responsibilities in center as evidenced in planning, maintaining supplies, and keeping records,

e.g.:

- planning with other staff in developing programs for children;
- working cooperatively with other staff;
- shows respect for other staff and is respected by them;
- communicates with other staff;
- obtains supplies appropriate for needs of children in program activities;
- maintains required administrative records;
- maintains health records on each child;
- maintains progress (developmental) records on children.

**NOTE:** The above examples do not represent a complete list of the evidence which one might use to support a rating of the candidate in this function area. The observer should add any evidence which he feels may be useful in making a decision.

## CDA PORTFOLIO GUIDELINES\*

**NOTE:** The CDA Consortium guidelines for developing the candidate's Portfolio are in the draft stage and are being field tested. However, it is not anticipated that the guidelines will be changed appreciably if at all in the future. Therefore, candidates may proceed in developing their Portfolio with confidence that it will become an important part of their eventual assessment for a national CDA credential.

### **What Is A Portfolio?**

A Portfolio holds a collection of material which you, as the Candidate, assemble to reflect your competence in working with young children. Properly used, the Portfolio will give a picture of you working with children. It will be examined in your assessment for a CDA credential.

### **When should You Start Your Portfolio?**

As soon as possible.

### **Who prepares Materials For Your Portfolio?**

This task belongs primarily to you, the Candidate. Your trainer will provide some materials, will act as a sounding board for your ideas and will help you, if you wish.

### **What Materials Should You Provide For Your Portfolio?**

Materials in your finished Portfolio must support your competence in the 6 Competency Areas and 13 Functional Areas (given in the Assessment Manual). The Functional Areas tell how you are expected to carry out your work with children. To help you, this Handbook includes some suggestions for your Portfolio. You need not include every suggestion. You may want to use other materials not listed below.

**Photographs** — Your activities with the children; for example, at snack hour, at nap time, at play time -- all would make good snapshots. Each picture must have with it a written statement describing the activity pictured and telling how this activity shows your competence in a particular Functional Area.

**Samples of Children's Work** — These samples may best express your competence in a particular Functional Area. With each sample, include a written explanation of the Functional Area which it fits.

**Curriculum Material** — Daily activity charts and long-range plans for the children in your group. These must also show how the activities and plans relate to one or more Functional Areas.

\* The Portfolio Guidelines are reproduced by permission from the Handbook for Candidate . . . for CDA Consortium Validity Study; Winter, 1975.

**Home-center Coordination** – Explanations of communications between you and the parents. Examples could include notes, letters, a report of phone contacts, conferences and parent meetings. Note clearly their purpose and how they fit a Functional Area.

**Evaluation Techniques** – Charts, records and written observations of each child. Clearly state their purpose, how they were used and how the information affected program plans. How does each fit a Functional Area?

**Samples of Goals for Individual Children and Children in Groups** – Give samples of evaluations you have made of children. These could include such information as general health, a child's strengths and weaknesses and goals you have for the special needs of any child.

**Materials Used During Candidate Training Sessions** – These could show how you've been instructed to carry out work in a particular Functional Area.

**Examples of Your Work With Co-workers** – Tell how you share and coordinate plans with co-workers. How do you exchange ideas and techniques? Describe how these relate to a particular Functional Area.

#### **How Should Materials For the Portfolio Be Organized?**

The Portfolio should have 13 sections – one for each Functional Area. You should index everything you put into your Portfolio. Index simply means writing on each piece of material the key word of the Functional Area to which the material applies. You should have material for each of the 13 Functional Areas. What exactly do you do to show that you understand and are able to carry out each task?

#### **What If A Certain Piece of Material Fits More Than One Functional Area?**

This could happen frequently since activities with children often have more than one purpose. Simply note on the material the key words showing the Functional Area the activities fit. Then place the material with only one Functional Area – the one it seems to fit best.

#### **How Will the Finished Portfolio Look?**

You may collect and arrange your material in any one of numerous ways. However, your Portfolio must have 13 sections -- one for each Functional Area. Your sections can be:

- Big Brown Envelopes – 13 of them
- Manila File Folders – 13 of them
- A Three-ring Binder with 13 Dividers

Use whichever arrangement you choose. Each of the 13 sections should contain material showing your competence in that particular area.

Example: In the first Functional Area the key word is: SAFE. Everything in that folder must have something to do with a safe environment.

#### **What Will Become of the Portfolio?**

The Portfolio is your property to be developed and maintained by you until you are assessed for the national CDA Credential.

**NOTE:** Letter of commendation, profiles, and your trainer's Record of Development should be placed in your Portfolio.

**PERSONAL INFORMATION**

Sex:  Male  Female  
Age:  Under 20  20-29  30-39  40-50  Over 50  
Ethnic Background:  Black  Mexican American  Native American  White  Oriental  Other

(✓ each that applies)

PLEASE PRINT ALL INFORMATION

**BACKGROUND**

Years of experience working with children under six years:  First year,  2-4 years,  5-10 years,  over 10 years

PRESENT EDUCATION:  Less than High School  High School or Equivalent  Some College  2 Years College  3-4 Years College  Beyond Bachelor's Degree

**TRAINING IN EARLY CHILD DEVELOPMENT**

Presently in training at \_\_\_\_\_ (Institution)

Name of Trainer: \_\_\_\_\_

Time in Training:  First Year,  Second Year,  Third Year,  More than 3 Years

Type of Training:  CDA,  HSST,  CDA:HSST,  Other \_\_\_\_\_

**CENTER WHERE YOU WORK**

Name of Center \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ AC \_\_\_\_\_ Phone \_\_\_\_\_

Name of Center Director \_\_\_\_\_

Name of your immediate work/job supervisor \_\_\_\_\_

Age of children with whom you work:  0-2 Years  2-3 Years  3-4 Years  4-5 Years  5-6 Years  6 and Over

Type of Center in which you work:  Day care (Non-profit)  Day Care (Profit)  Head Start  College/University Laboratory  Public School  Other \_\_\_\_\_

Locale of Center:  Rural,  Urban  Suburban

Ethnic Background of Children with whom you work: (✓ all percentages that apply)

0-25% Black  0-25% Mexican-American  0-25% Native American  0-25% White  0-25% Other (Name) \_\_\_\_\_  
 26-50%  26-50%  26-50% (Indian)  26-50%  26-50%  
 51-75%  51-75%  51-75%  51-75%  51-75%  
 76-100%  76-100%  76-100%  76-100%  76-100%

Time you work with children:  All Day,  Morning,  Afternoon

For how many children are you directly responsible on your job?  0-6,  7-10,  11-15,  16-20,  Over 20

How many hours each day are you employed to make home visits, plan programs, or other work not directly with children?  
 None,  One Hour,  One-Two Hours,  Two-Three Hours,  More than Three Hours

ALL INFORMATION PROVIDED WILL BE KEPT STRICTLY CONFIDENTIAL

**POSITION ANALYSIS  
 EARLY CHILD DEVELOPMENT  
 Southwest Region CDA Study - Spring, 1975**

**Directions:** Form to be completed jointly by Candidate and Candidate's CDA trainer.

**TASK DESCRIPTION**

Candidate does each task.

(Circle A-S-N for each item)

All the Time	Some- times or as Needed	Never
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N

**I. ENVIRONMENTAL HEALTH AND SAFETY**

1. Establish plan for emergency evacuations from center.
2. Arrange play areas, make minor repairs.
3. Check for safety regulations.
4. Instruct children in safety rules.
5. Arrange for health examinations in center.
6. Help children with clothing.
7. Control ventilation and lighting in center.
8. Administer first aid.
9. Plan meals and snacks.
10. Prepare meals and snacks.
11. Evaluate child nutritional intake.
12. Supervise/eat with children.
13. Schedule pick-up/delivery of children.
14. Organize children to clean-up.
15. Revise room arrangement.
16. Supervise routine bathroom procedure.

Other similar tasks you do all the time:

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(Circle A-S-N for each item)

All the Time	Some- times or as Needed	Never
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N

**II. PHYSICAL AND INTELLECTUAL DEVELOPMENT**

17. Plan activities for gross motor skill development.
18. Arrange equipment for free play.
19. Specify activities for handicapped.
20. Guide children in putting away toys and equipment.
21. Develop child listening activities.
22. Use materials to promote language development.
23. Identify children with speech problems.
24. Tell or read stories to children.
25. Make program learning schedules.
26. Coordinate materials such as phonograph records and books with program theme.
27. Demonstrate concepts such as size, color, and shapes to children.
28. Evaluate progress of individual children.
29. Plan art and music activities.
30. Arrange materials for art and music.
31. Select television programs for children to view.
32. Guide dramatic play activities.

Other similar tasks you do all the time:

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**ALL INFORMATION PROVIDED WILL BE KEPT STRICTLY CONFIDENTIAL**

Candidate does each task.

(Circle A-S-N for each item)

All the Time	Sometimes or as Needed	Never
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N

### III. SELF CONCEPT DEVELOPMENT

33. Plan activities for children to compare self with others.
34. Arrange displays of children's work.
35. Refer children for counseling.
36. Take photos of children.
37. Develop activities to help children help themselves.
38. Help children talk about feelings.
39. Chart child personality characteristics.
40. Praise children for trying.
41. Plan ways for children to vent frustrations.
42. Organize environment for alone time.
43. Write anecdotal records on children.
44. Show children how to care for their own things.

Other similar tasks you do all the time

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(Circle A-S-N for each item)

All the Time	Sometimes or as Needed	Never
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N

### IV. CHILD AND ADULT INTERACTION

45. Schedule special parties.
46. Prepare games, activities for center parties.
47. Evaluate activities for development of cooperation among children.
48. Introduce new children to center.
49. Establish center rules of behavior.
50. Guide orderly movement of children in center.
51. Discuss discipline problems with staff.
52. Discipline children.
53. Schedule adults to present special programs in center.
54. Prepare materials for other adults to use with children.
55. Train volunteers and aides to work with children.
56. Guide work of adult volunteers in center.

Other similar tasks you do all the time

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Candidate does each task.

(Circle A-S-N for each item)

All the Time	Sometimes or as Needed	Never
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N

### V. HOME - CENTER INVOLVEMENT

57. Maintain list of places, ways to contact parents.
58. Organize special parent visitation nights.
59. Revise center policies to coincide with parent/child needs.
60. Discuss child rearing practices with parents.
61. Schedule home visitations.
62. Distribute information regarding center policies to parents.
63. Inform parents of changes in child behavior.
64. Contact parents in case of emergency.
65. Plan family cultural-related events.
66. Decorate center for seasons, holiday themes.
67. Evaluate materials for cultural relevance.
68. Communicate with parents in their dominant language.

Other similar tasks you do all the time

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(Circle A-S-N for each item)

All the Time	Sometimes or as Needed	Never
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N
A	S	N

### VI. SUPPLEMENTARY RESPONSIBILITIES

69. Prepare schedules for building maintenance.
70. Set up and store cots and bedding.
71. Order needed supplies.
72. Distribute materials to children.
73. Set up record and reporting procedures.
74. Inventory supplies and equipment.
75. Submit records and reports to authorities.
76. Keep daily attendance record.
77. Plan staff meetings.
78. Help arrange or produce materials for staff.
79. Conduct in-service meetings.
80. Attend staff meetings.

Other similar tasks you do all the time

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Understand the information provided will be used strictly for research purposes and will be kept confidential.

Signature of Candidate

Date

Signature of Candidate's Trainer

Date

CDA Trainer \_\_\_\_\_

Candidate \_\_\_\_\_

Institution \_\_\_\_\_

Date \_\_\_\_\_

Center \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

## CHILD DEVELOPMENT ASSOCIATE PERFORMANCE PROFILE

The CDA PERFORMANCE PROFILE is designed to focus attention of early child development workers on their performance related to specific CDA competency areas. The Profile can be used by CDA candidates as a self-assessment instrument. Or, the Profile can be used by someone who is well acquainted with the Candidate's performance as a supervisory or assessment tool.

The Profile is actually a score sheet which is to be used with CDA Function Criteria outlined in the Southwest Region Assessment Manual. The criteria are those used by the CDA Consortium in the Winter, 1975, Field Test.

### Directions for the Candidate

1. Review the Performance Levels in the Assessment Manual and get acquainted with the assessment model, that is, the six major competency areas and critical functions.
2. With your Profile at hand, read the criteria for each function.
3. Now ask yourself this question:  
"WHICH LEVEL BEST DESCRIBES MY OVERALL PERFORMANCE AT THIS TIME . . . . Highly Competent? Competent? Needs Improvement? or Unknown?"
4. On your Profile put an X in the appropriate box for the function level designated. Force yourself to make a definite decision about how you generally perform. Your growth is what is important.
5. Continue this procedure until you have completely finished analyzing your performance in all areas.

### Directions for CDA Trainers

CDA trainers use the Profile in the same way as the candidate. Go completely through the Functions Criteria at one sitting. Try to recall, overtime, observed performances of the candidate which relate to each critical function. Record of Development and other evidence should substantiate your assessment.

### Use of the Performance Profile

In order for a Performance Profile to be considered as part of the Spring, 1975 assessment process in the Southwest Region,

1. One Profile must be completed jointly by the candidate and the trainer in February, 1975 and sent to the Regional Coordinator. This is a pre-assessment.
2. A post-assessment Profile should be completed and sent to the Regional Coordinator in May, 1975. A post-assessment Profile should be completed by both the trainer and candidate and sent in independently -- without conferring with each other. Evidence in candidate's Portfolio should be consistent with Profile.

If you have any questions, you may call the Regional Coordinator collect at (214) 744-2346.

PERFORMANCE PROFILE

Southwest Region CDA Assessment  
Spring 1975

Competency Areas	Critical Functions	Highly		Needs Improvement	Unknown (Circle Reason)		
		Competent	Competent		C - Conditions	T - Time	O - Other
I Establishes and Maintains a Safe and Healthy Learning Environment	SAFETY				C	T	O
	HEALTH				C	T	O
	ENVIRONMENT				C	T	O
II Advances Physical and Intellectual Competence	PHYSICAL				C	T	O
	COGNITIVE				C	T	O
	LANGUAGE				C	T	C
	CREATIVE				C	T	O
III Builds Positive Self-Concept and Individual Strength	SELF-CONCEPT				C	T	O
	INDIVIDUAL STRENGTH				C	T	O
IV Positive Functioning of Children and Adults in a Group Environment	SOCIAL				C	T	O
	GROUP MANAGEMENT				C	T	O
V Coordination of Home and Center Child-Rearing Practices and Expectations	HOME-CENTER				C	T	O
VI Supplementary Responsibilities Related to Childrens' Programs	STAFF				C	T	O

Analysis made by \_\_\_\_\_ (Candidate and/or Trainer) Date \_\_\_\_\_

Development of Candidate's Portfolio is \_\_\_ Not Started \_\_\_ Only Begun \_\_\_ In Process, \_\_\_ Almost Completed

Performance assessment was based on \_\_\_\_\_ (number) RECORDED visits by CDA Trainer totalling \_\_\_\_\_ hours.

Return to: Regional Coordinator of CDA Assessment - 1507 Pacific Avenue, Room 624, Dallas, Texas 75201