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ABSTRACT

In 1992, the Office of Special Education Programs (OSEP) funded four projects for a three-year period to increase the participation of higher education faculty in inservice training for personnel in early intervention. These projects included: the Southeastern Institute for Faculty Training (SIFT), the Northeastern Early Intervention Faculty Training Institute, the Midwestern Consortium for Faculty Development (MCFD), and the Western Region Faculty Institute for Training (WRFIT). The projects were required to enhance faculty expertise through the utilization of state-of-the-art information related to the Individuals with Disabilities Education Act (IDEA) and innovative training resources. They were required to develop and evaluate curricula for use by faculty members, and these curricula were required to include discipline specific as well as multidisciplinary content related to Individualized Family Service Plans (IFSPs), service coordination, family-focused intervention, collaboration, and other relevant topics in early education. Each of the projects served a specific region of the country and each developed a unique model. This executive summary describes the projects, their accomplishments, and lessons learned. Lists of products for each project are included. (SG)

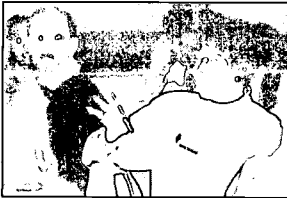
Improving the Quality of Early Intervention Personnel by Enhancing Faculty Expertise

Findings and Recommendations of the Regional Faculty Institutes

Executive Summary



Kathy Hebbeler, Editor



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EC 308597

Improving the Quality of
Early Intervention Personnel
by Enhancing Faculty Expertise
**Findings and Recommendations of the
Regional Faculty Institutes**

Executive Summary

Midwest Consortium for Faculty Development (MCFD)

Northeastern Early Intervention Faculty Training Institute

Southeastern Institute for Faculty Training (SIFT)

West Region Faculty Institute for Training (WRFTI)

Kathy Hebbeler, Editor—Executive Summary

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FOREWORD

Four regional faculty Institutes will be funded to provide training and support to higher education faculty so that they can do a better job providing inservice to early intervention practitioners. Four years ago when that message came out of the Office of Special Education Programs at the U.S. Department of Education, many interested grantwriters thought there was an error. Surely OSEP meant to say “preservice.” When it became clear that inservice was not a typo, all of us involved in responding to the grant opportunity for four regional faculty institutes were aware of the immense challenges we faced.

We all knew that institutions of higher education are among the most resistant and difficult organizations to change. We knew that university faculty are not rewarded for providing inservice training for early interventionists. In fact, it is not part of the average faculty job description. We also knew that many direct service providers and state agency representatives were skeptical about the ability of some faculty to stay up to date and be resources to inservice education. If we accepted OSEP’s challenge, we would be attempting to make dramatic changes in how these institutions and agencies operate. We would be attempting to forge alliances between higher education and state agencies. As we discussed these formidable tasks, an analogy came to mind—it was like trying to arrange a marriage between two people who did not even want to go on a blind date! However, the more we thought about the personnel development challenges facing the field, the more we appreciated the wisdom of OSEP in forcing us to tackle the “tower-trench” gap. The new-found appreciation of OSEP’s wisdom did not make the task any easier, simply more compelling.

Once the award announcement was made, the Directors of the newly funded Institutes knew that collaboration across the Institutes would be essential if the challenges were to be mastered. Even though collaboration was not specified in the Request for Proposals from OSEP, there was a general consensus among us all that we needed to work together on all fronts...in sharing successes and failures, in considering how we might measure nationwide impact, in discussing how to “institutionalize” changes that might take place as a result of our efforts. We did not want to be another flash in the pan—a good idea that goes away when the grant money ends. Over the three years of funding, our collaborative activities took on many forms:

- Holding cross-Institute meetings to share information
- Developing evaluation measures that could be used across Institutes
- Developing cross-Institute presentations for national conferences
- Creating this monograph to summarize our work

Our collaboration was encouraged and supported in critical ways. Martha Bryan, OSEP Project Officer to the four Institutes during our first two years of funding, provided strong support and participated actively in our discussions and meetings. Lee Coleman, who inherited us when Martha left OSEP, continued to provide encouragement. NEC*TAS, specifically Nancy Fire, Joicey Hurth, and Pat Trohanis, facilitated our meetings and the development of this monograph. The enthusiasm of the faculty, state agency personnel, practitioners, and families with whom we worked “fueled our fire” and helped us know that we were on the right track.

A frequent message to state groups was an acknowledgement that an Institute was a small grain of sand in comparison to the ongoing efforts and initiatives in a given state. We wanted this small but potentially helpful opportunity to be a catalyst for states’ moving in directions that were important to key stakeholders in each state. A parent of a young child with a disability said to me, “the grain of sand can become a pearl if it is properly nurtured.” We have convincing evidence that many “pearls” of innovative, creative, personnel development activities have been started by the four Institutes. The efforts will continue because of the commitment of faculty, families, state agencies, and practitioners to work as partners in creating better systems of personnel development in their states. The relationships that were formed in states among these stakeholder groups is our best insurance that the Institute efforts will continue. Has there been a marriage? Not yet, but we think a courtship has been started that has great promise.

*Pamela J. Winton
Frank Porter Graham Child Development Center
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EXECUTIVE SUMMARY

Kathy Hebbeler

PART H OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT was designed to assist states in building a family-focused, multidisciplinary, coordinated system of services and supports for infants and toddlers with disabilities and their families. Implementing this vision requires increasing the number of service providers who are skilled in their own professional areas as well as knowledgeable about delivering services in ways that are family-centered and culturally competent. Many service providers in the field were trained prior to the 1986 passage of Part H. While they may be familiar with their own discipline they are less familiar with the philosophical orientation toward service delivery embodied in Part H. Inservice training affords these practitioners the necessary opportunity to update their knowledge and skills.

Similarly, many faculty in institutions of higher education received their own training under the "old way" of providing early intervention services. For example, their own training probably emphasized discipline-specific rather than interdisciplinary service provision; child-centered rather than family-centered services; and center-based, self-contained services rather than service provision in inclusive settings within local communities. Not only are these faculty training the next generation of service providers, but also are involved in inservice training for individuals already providing services to infants, toddlers and their families. Faculty, however, much like the practitioners in the field, need additional support and technical assistance to upgrade their skills in order to more effectively provide training consistent with the type of service delivery envisioned by Part H.

Problem-solving and sharing information about personnel preparation challenges was an integral feature of the Institutes.



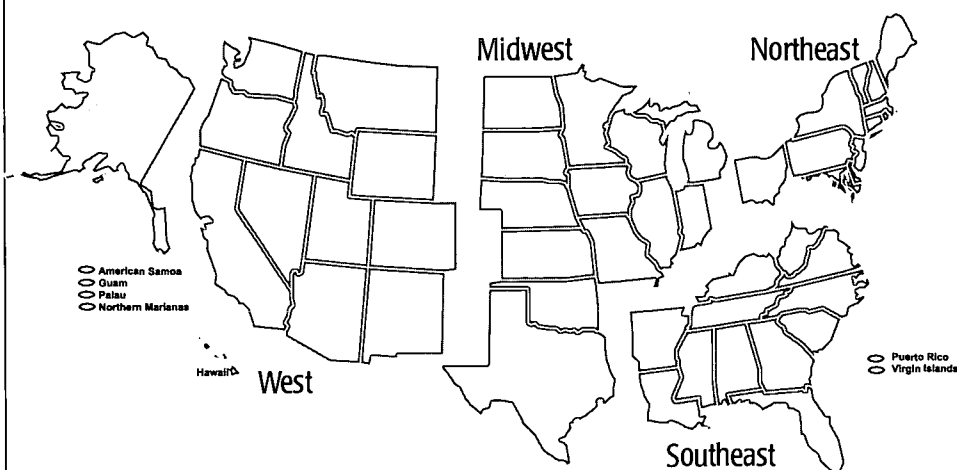
In 1992, the Office of Special Education in the U.S. Department of Education funded four projects for a three-year period to increase the participation of higher education faculty in inservice training for personnel in early intervention. The purpose of these projects was to develop, implement, evaluate, and disseminate models for training faculty from 2-year and 4-year colleges and universities to provide inservice training for early intervention service providers. Each project was required to enhance faculty expertise through the utilization of state-of-the-art information related to Part H and innovative training resources and modules.

The projects were required to develop and evaluate curricula for use by faculty members in some or all of the disciplines involved in early intervention. These curricular materials were required to include discipline specific as well as multidisciplinary content related to Individualized Family Service Plans, service coordination, family-focused-intervention, collaboration, and other relevant topics in early intervention.

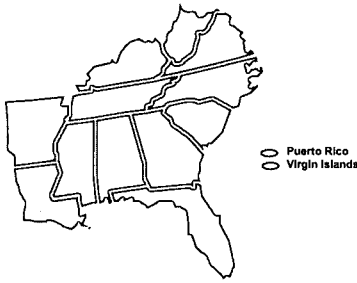
Projects were also to:

- conduct an assessment of the needs and priorities of early intervention service providers and faculty
- develop a feasible plan to address needs and priorities
- construct and implement a training model for faculty members using one or more delivery methods
- support the training of early interventionists by these faculty members

This executive summary describes the projects, some of their accomplishments and what was learned about enhancing faculty capacity to provide inservice training in early intervention. Each of the projects served a region of the country. The Institute at the University of North Carolina at Chapel Hill served the southeast region, Temple University served the northeast region, the University of Minnesota served the midwest region, and University of Colorado served the western region. Each of the projects developed a unique model for training faculty to provide inservice training to service providers.



Southeast Region



The project at the University of North Carolina, known as the Southeastern Institute for Faculty Training (SIFT), was based on a systems change model that included seven components. These components were stakeholder support and vision, leadership commitment at the state level, a needs assessment of state needs and individual faculty needs, a provision of information and activities to meet needs, an action plan for implementation, follow-up during implementation, and evaluation and monitoring. SIFT worked with sets of 5 states over each of the three years of the project.

The process followed by SIFT began in a state by asking the Part H coordinator in the lead agency and the director of the University Affiliated Programs (UAP) to identify a group of key leaders in personnel preparation to attend a 1-2 day meeting to be held in their state. These groups ranged in size from 7 to 52 across the 15 states. In each state, these leaders met to identify existing personnel initiatives, to develop a vision and plan for future personnel preparation activities in their state and to identify a group of faculty members from institutions of higher education who would receive future training.* These individuals completed a needs assessment which was used to shape a four day faculty training Institute held by SIFT.

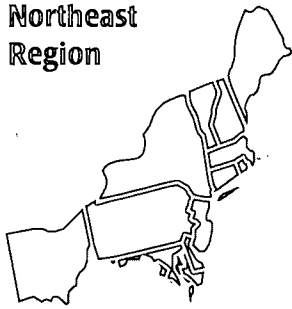
The training Institute consisted of 30-35 different sessions organized around the early intervention content areas identified through the state and individual needs assessment. Sessions were co-facilitated by a parent and a professional or by interdisciplinary teams whenever possible to model interdisciplinary and family-professional collaboration. Plans were developed by faculty participants that identified how they would apply what they learned through SIFT. State level action plans were developed as were individual action plans. Across all plans, a total of 1001 individual goals for applying what was learned were identified. A newsletter was published twice each year and 6-month follow-up meetings in each state facilitated ongoing information and resource sharing. The newsletter which has continued to be published is currently received by 1,100 subscribers. In addition, 6-month follow-up surveys and telephone interviews with each faculty member provided data about long-term impact. SIFT also created an interactive library of training resources which was transported to the training Institutes. Materials were catalogued in a *Resource Guide* that contained a description of the material and ordering information. Checklists of quality indicators related to preservice and inservice training were developed as part of the model. A description of the products produced by SIFT and the other Institutes can be found at the end of this summary.

Time for brainstorming about state issues was a feature of the Institutes.



*SIFT defined "faculty" in an inclusive fashion so that practica supervisors and adjunct instructors were included to ensure the presence of direct service providers. In addition, SIFT required that multiple disciplines, family members and minorities were represented on the faculty teams.

Northeast Region



The **Northeastern Early Intervention Faculty Training Institute** was designed as three subregions with a director for each of those regions (New England, Northeast, and Middle Atlantic). Teams that included at minimum, a parent of a young child with a disability, the Part H Coordinator, and a university faculty member were formed in each state. These ongoing teams, a sequenced set of goals, common to all teams, and individualized objectives, unique to particular state teams, were the core of the Institute's model. The model included the following components: a) common and individualized team goals; b) implementation by interdisciplinary state teams across time; c) regional team network for colleague assistance and support; and d) technical assistance and support from the Institute staff. The Institute's model addressed the following goals: a) establish and implement state teams to promote and increase personnel preparation activities within each state by impacting on state interdisciplinary faculty and both current and future practitioners; and b) develop and disseminate training materials, resources, and supports for use by the state teams.

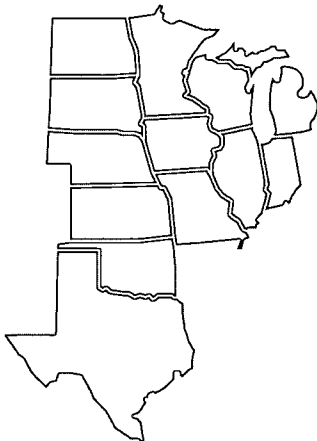
State teams were responsible for: a) finding out about and linking with the state's CSPD efforts; b) arranging and conducting meetings of interdisciplinary faculty across the state; c) determining topics of interest within the state so that training materials and other resources could be developed by Institute staff and consultants for dissemination through the state teams; and d) establishing and implementing individualized state teams goals and activities. Teams were provided with technical assistance, support, data, information, and materials by the Institute staff and through a network of all teams within the Northeast region. Members came together as group twice yearly to share information about state activities and strategies, focus on topics of regional interest and need (e.g., CSPD; addressing therapy shortages), and learn new training information. A majority of the team members remained consistent throughout the three-year duration of the Institute.

State teams carried out activities common to all teams as well as activities that had been individually designed to address issues and concerns within each state. A needs assessment was carried out by Institute staff and provided data used by the state teams to build initial collaborative relationships with and among interdisciplinary faculty within each state. An emphasis in these meetings was on ways in which information about early intervention and its underlying concepts (e.g., parent involvement; family-centered care) could be infused into existing basic discipline preparation coursework. Teams were provided with training modules that were distributed to faculty attending the meetings. The second activity was to learn more about personnel preparation activities within each state and to use this information to develop individual goals for the state. During the second and third year of the Institute, teams held additional meetings with faculty within their state, identified additional areas in which topical modules and other information would be helpful, and began to work with state faculty to develop and implement innovative ways of training personnel in early intervention. In some instances, this required restructuring existing state activities and priorities; capacity building was required in other instances. Team activities during the third year of the Institute

focused on institutionalizing activities past the end of the three-year funding cycle for the Institute through the state's CSPD committees (or other state-specific mechanisms) and on continued implementation of state specific goals. State teams were encouraged during the second and third years to apply for minigrants through the Institute to support special initiatives developed for their states.

Throughout the three-year team process, Institute directors and the coordinator provided support and technical assistance to state team members, developed and disseminated a wide variety of materials, resources, and information to the state teams to use in addressing state goals, and hosted a series of meetings to provide opportunities for teams to acquire additional information and expertise about personnel issues and to network with each other. Emphasized throughout the three-year duration of the Institute was an approach of parent/professional collaboration and increased expertise and effectiveness of state teams. Products developed included several reports and a series of topical modules designed to be infused into courses within preparation programs of many different disciplines or to be used as a basis for professional development.

Midwest Region



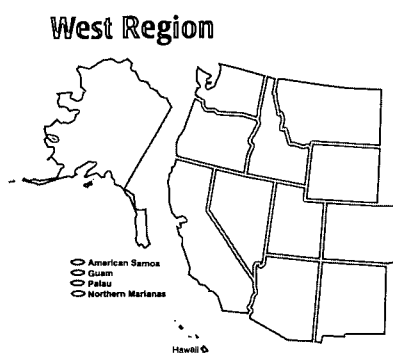
The **Midwestern Consortium for Faculty Development (MCFD)** involved a consortium of faculty from University of Minnesota, the University of Wisconsin, the University of Illinois, and Iowa State University. This faculty Institute was grounded in principles that included a conceptualization of training for early intervention professionals along a continuum ranging from preservice to inservice, the involvement of parents as partners in all aspects of early intervention training, and a process that would be responsive to an individual state's needs and circumstances.

MCFD held Summer Training Institutes every year for teams of 6 to 20 participants from each state in the region. Teams were nominated by each state's Part H coordinator and included higher education faculty and administrators from a variety of disciplines, state Part H representatives and staff involved with the state's Comprehensive System of Personnel Development (CSPD), parent trainers, representatives of each state's University Affiliated Programs, and other trainers. The Institutes were designed to model the training ideas and methods that were taught such as including parents as co-trainers. Each state team worked together during the Institute to develop an Individualized State Training Plan containing goals and action steps to be completed during the coming year. The state team was responsible for carrying out the work begun at the Institute and reporting back at the following year's Institute.

MCFD created a Management Team of faculty from the four cooperating institutions and parents who were involved in training early intervention professionals in their state. The Management Team was involved in planning, implementing, and evaluating the Summer Training Institutes. The annual needs assessments and post-Institutes self-assessments were used to plan each Institute. A faculty mem-

ber from the Management team served as a resource person and facilitator for each state team over the three years of the project.

Additional resources provided to the states included mini-grants that were given to each state every year to assist in implementing the state plan. A newsletter was published twice yearly throughout the project and highlighted individual state training plans. MCFD also distributed resources and training models. In the final year, a workshop on strategic planning was held for key participants from each state. Participants at this workshop were to serve as resource persons for their state teams in future planning efforts. MCFD also provided funds for follow-up individual state consultation to each state at the end of the three year project. Parent involvement was embedded in MCFD at many levels including parents as presenters at the Summer Institutes and as members of the Management Team and state teams. Products developed by MCFD included a set of outcome indicators for preservice and inservice training and a planning guide for individualized state training plans.



The **Western Region Faculty Institute for Training (WRFIT)** implemented yet another model for enhancing the participation of higher education faculty in inservice training. The WRFIT approach was designed to foster training activities in each state and jurisdiction tailored to local conditions and locally identified priorities. First, planning teams were formed in each of the 13 states and 4 jurisdictions. These 6-7 person teams were made up of faculty, family members, state department personnel (Part H, Part B, Training Coordinators, and CSPD staff), and UAP personnel. Across the 17 planning teams there were a total of 109 team members. Each of these planning teams conducted a needs assessment and then identified local training priorities for higher education faculty and, in turn, for service providers. These priorities were translated into Action Plans by each planning team.

The WRFIT supported the planning teams with a “kickoff conference” on inservice training, financial assistance, materials and resources, technical assistance and ongoing consultation. Planning teams designed and implemented two or more training events for faculty. Rather than using a single curriculum for all of these events, the WRFIT provided planning teams with a Curriculum Compendium which thoroughly reviewed 25 of the best currently available curricula about early intervention. In conjunction with WRFIT consultation, this flexible curricular approach promoted training content and methods chosen to meet local priorities. Across the region, 35 such training events were held with over 2,000 participants, including faculty as well as family members, providers, planners, and other leaders. Events included Summer Institutes, retreats and seminars, faculty forums, workshops and conferences.

In order to encourage higher education faculty to connect with their state/jurisdiction planning team and to pilot new ideas, the WRFIT issued mini-grants to 34 faculty, often with a community partner, across the region. The 34 mini-grant

projects all involved faculty conducting community-based inservice training. A tremendous number of themes and accomplishments emerged from the mini-grants, far beyond what had been anticipated. Recipients of the mini-grants attended a retreat in Denver to present their accomplishments, network, and learn/share new ideas for exemplary teaching practices. Additional outcomes of the WRFIT mini-grant program included training packets, new curricula, and audio-visual materials developed by many of the mini-grant projects.

In addition to the activities described above, the WRFIT facilitated networking which enabled state and jurisdiction faculty and other leaders to make intra- and interstate links for sharing ideas, materials, and collaborative projects. Finally, the WRFIT developed several products including a new comprehensive curriculum regarding infants and toddlers with special health care needs, a set of personnel preparation needs assessment surveys, the Curriculum Compendium, several training packets and policy papers regarding teaching/training challenges related to Part H, and six newsletters.



New collegial relationships proved to be an important outcome of regional Institutes.

Accomplishments

Through the efforts of the faculty Institutes, a number of individuals were brought together within their regions and within states to learn new skills and share their many areas of expertise. These activities produced several significant accomplishments including the effective inclusion of parents in all aspects of the Institutes, the involvement of professionals from a variety of disciplines in Institute activities, and numerous positive outcomes including an increase in faculty willingness to be involved in inservice training.

The Institutes modeled the philosophy of Part H through the successful inclusion of parents as partners in the planning and conducting of training activities. For example, in the Southeast Region, 21 percent of the SIFT teams members were family members of children with disabilities. Family members were also involved in planning, evaluating and implementing the SIFT project. In the West, each of the 17 state and jurisdiction WRFIT planning teams included at least one parent of a child with a disability as a member. Family members of children with disabilities were in attendance at each of the 35 mini-grant inservice trainings. In the Midwest Region, Institute participants reported a greater awareness with respect to family involvement in training that translated into concrete actions in their home states including funding parent trainers through Part H, parents as equal participants on state planning efforts, and establishment of a statewide system of parent trainers available to co-teach with faculty.



Sharing ideas across states was one of the benefits to regional Institutes

The participants in Institute activities came from diverse disciplines including but also extending beyond the traditional disciplines involved in early intervention. Across the Institutes, the majority of participants were from universities (56%) but participants came from a number of other settings as well including state agencies (10%), community colleges (8%) and University Affiliated Programs (7%). A variety of disciplines were represented among the Institute participants with special education (14% of the participants), education (12%), and psychology (10%) being the most frequent. Other disciplines represented included speech/language pathology, early childhood education, nursing, early childhood special education, child development, social work, physical therapy, occupational therapy, nutrition, medicine, and audiology.

Participants experienced a number of positive outcomes as a result of the Institutes. Some common evaluation questions were used by all four Institutes in order to describe nationwide impact. Participants from the Northeast, Midwest, and Southeast reported a greater willingness to be involved in training early intervention personnel at the preservice, inservice, and technical assistance levels as a result of their participation in the faculty training. (This question was not utilized with participants in the West). For example, SIFT faculty showed a statistically significant increase in their commitment and willingness to participate in community-based inservice training and technical assistance, and, in fact, did increase the amount of inservice training they provided after participating in SIFT training.

Participants across the Institutes reported that they were provided with opportunities in many different areas including the opportunity to:

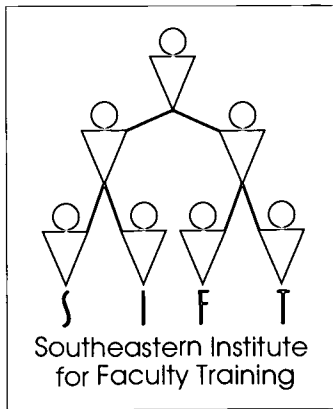
- develop competence in one or more early intervention content areas (78% participants reported having this opportunity),
- develop awareness of and ways to access existing preservice (92%) and inservice curriculum (92%) materials,
- learn to use specific existing preservice (78%) and inservice (82%) curriculum materials,
- learn to use teaching techniques that apply to preservice (80%) and inservice training (82%), and
- examine their own preservice (88%) and inservice (90%) practices within the context of the training event.

Lessons Learned

Several important lessons were learned about the involvement of higher education faculty in inservice training efforts through the Faculty Institutes such as:

- Given support from administrators in higher education and state agencies, faculty members are willing and eager to become involved in the planning and implementation of inservice efforts within their states. A barrier to involving faculty is that inservice training is not a primary part of university faculty members' positions.
- Faculty involvement in inservice training can be encouraged through the use of incentives and rewards such as seed money, release time, mini-grants, public recognition, and transportation costs.
- Key players in inservice training are the state Part H and CSPD personnel, as well as higher education faculty, family members, and service providers. All need to be involved in planning inservice training. Many state agency leaders outside of the lead agency for early intervention were unaware of state personnel preparation efforts and were not operating within an overall plan for personnel preparation. Awareness of state efforts can be increased.
- Faculty appreciate the opportunity to meet and share resources with colleagues in related fields.
- Parents play a critical role in the development, implementation, and evaluation of training for early intervention professionals.

The four Institutes validated the need for ongoing support and education for faculty who are training the current and future work force in early intervention. The field of early intervention has evolved rapidly over the last decade in response to the passage and implementation of Part H. Infants and their families will receive the full benefit of the legislation's vision only if those faculty who are training service providers have been exposed to state of the art practices in early intervention. The Faculty Institutes developed and implemented unique models to accomplish this task. □



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PRODUCTS

SOUTHEASTERN INSTITUTE FOR FACULTY TRAINING

Early intervention personnel preparation: The past guides the future. Winton, P. (1994). *Early Childhood Report*, 5 (5), 4-6. *A brief article summarizing the challenges of early childhood personnel preparation.* [Journal article].

Family-professional partnerships in early intervention personnel preparation: Guidelines and strategies. Winton, P., & DiVenere, N. (1995). *Topics in Early Childhood Special Education*, 15 (3), 295-312. *This article offers guidelines and strategies for facilitating family participation early intervention personnel preparation in ways that model collaborative family-professional partnerships.* [Journal article].

A model for supporting higher education faculty in their early intervention personnel preparation roles. Winton, P. (1996). *Infants and Young Children* 8(3), 56-67. *This article provides an overview of the critical components, lessons learned, and promising training strategies of the SIFT project.* [Journal article].

A systems approach to early intervention personnel preparation: A model for moving towards collaboration and effective training practices. Winton, P., Catlett, C., & Houck, A. (1995). In A. Widerstrom & D. Bricker (Eds.), *Preparing personnel to work with infants and young children and their families: A team approach*. Baltimore, MD: Paul Brookes. *This chapter summarizes the model and initial (cohort 1) findings of the SIFT project.* [book chapter].

How to create and use a petting zoo. Catlett, C. (1995). Unpublished guidelines. Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center. *This document describes interactive strategies for helping teachers and trainers to discover new training resources.* Free with SASE (self-addressed stamped envelope).

Inservice personnel preparation quality indicators (see Winton, 1994) and Preservice personnel preparation quality indicators. Winton, P. (1996). Checklists. Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center. *Based on research related to effective practices (see Winton, 1993), these checklists are useful for reinforcing promising practices and promoting effective changes in early intervention personnel preparation.* Free with SASE.

Resource guide: Selected early childhood/early intervention training materials. (5TH Ed.). Catlett, C. & Winton, P. (1996). Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center. *This annotated bibliography includes over 300 resources that might assist in designing preservice or inservice instruction. Resources, including curricula, videotapes, programmed texts, and discussion guides, are grouped by content area (e.g., assessment, cultural diversity).* \$10.00

What we have learned about Part H personnel preparation. Winton, P. (1993). Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center. *Pamphlet summarizes research related to effective practices in early intervention personnel preparation.* Free with SASE.

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Exploring the Dimensions of Parent-Professional Partnerships in the Personnel Preparation Process—an overview of the nature of parent-professional partnerships, including ways of strengthening partnerships in personnel preparation.

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Regional Summit on Therapy Services: How-to Manual—strategies for forming collaborative partnerships among early intervention provider agencies, higher education therapy preparation programs, and other stakeholders as a means of enhancing preparation of therapists and decreasing personnel shortages in early intervention.

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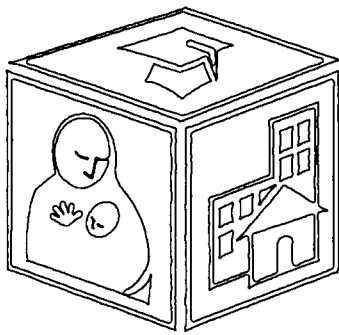
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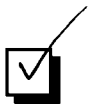


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~~DEMIN~~ Coordination
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~~DEMIN~~ Faculty Development
~~DEMIN~~ Family Programs
~~DEMIN~~ Individualized Family Service Plans
~~DEMIN~~ Preschool Education

~~IDMAJ~~ Individuals with Disabilities Education Act Part *EH*

IDMIN Individuals with Disabilities Education Act

ABST In 1992, the Office of Special Education Programs (OSEP) funded four projects for a three-year period to increase the participation of higher education faculty in inservice training for personnel in early intervention. These projects included: the Southeastern Institute for Faculty Training (SIFT), the Northeastern Early Intervention Faculty Training Institute, the Midwestern Consortium for Faculty Development (MCFD), and the Western Region Faculty Institute for Training (WRFIT). The projects were required to enhance faculty expertise through the utilization of state-of-the-art information related to the Individuals with Disabilities Education Act (IDEA) and innovative training resources. They were required to develop and evaluate curricula for use by faculty members, and these curricula were required to include discipline specific as well as multidisciplinary content related to Individualized Family Service Plans (IFSPs), service coordination, family-focused intervention, collaboration, and other relevant topics in early education. Each of the projects served a specific region of the country and each developed a unique model. This executive summary describes the projects, their accomplishments, and lessons learned. Lists of products for each project are included. (SG)

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