Project TaCTICS
Therapists as Collaborative Team members for Infants/Toddler Community Services

Welcome to TaCTICS

TaCTICS continues to grow and welcomes new readers to our faxletter and new staff to the project.

New TaCTICS staff with new ideas:

Shubha Kashinath, MS-CCC-SLP
Shubha is a doctoral student in the Department of Communication Disorders. She has experience as a speech-language pathologist providing home-based intervention services to families and children with disabilities in California and Arizona. Her research interests include studying outcomes of family-centered intervention practices with families and children with developmental disabilities, especially those with Pervasive Developmental Disabilities (PDD). She is currently involved in providing routines-based intervention services to children and families and in training interventionists to provide effective early intervention services for children with special needs.

Geoff Petrie
Geoff is the Program Manager for TaCTICS. He served the last four years as the Assistant Project Manager for the National Institute on Aging research grant entitled, “Increasing Effective Communication in Nursing Homes”. His experience of directing a communication study, along with ten years of working with children of all ages at a children’s hospital in St. Petersburg, Florida give him a unique understanding of the operation of an outreach training project for children and families. Please feel free to contact Geoff with any questions you may have about TaCTICS.

Ehren Allen, PT
Ehren is the physical therapy outreach trainer for the TaCTICS outreach training project. He will also be providing routine-based physical therapy and early intervention services in the natural environments of children in the north Florida area. He received his Bachelor of Science degree in physical therapy from Florida A&M University.

Catherine Knickerbocker, PT
Catherine is the pediatric coordinator of rehabilitation at Archbold Medical Center, with a variety of facilities in six rural counties in south Georgia. She has specialized in working with children as a physical therapist for over 25 years. She is adjunct faculty for the Physical Therapist Assistant program at Thomas Technical Institute, a member of local and state ICC committees, and served on various advisory boards for Special Projects developing training for occupational and physical therapists working in early intervention and in school based practice.

“Accomplishing more is not a matter of working harder, it’s a matter of thinking differently”

Think differently with us as we explore...
- The many uses of everyday materials!
- NE in Nebraska!
- Household materials as therapy equipment!
- Naturally Wonderful Routine!
Ways to increase knowledge and skills in using everyday materials...

Identify an outcome frequently included on IFSPs and write a list of the materials you typically use on the left hand side of a page. Across from each item write down something else that would work also.

For example:

**Turn taking with actions**

- Grasp and release of object
- Functional use of objects

- Rolling a ball back and forth
- Pushing cars
- Dropping blocks in bucket
- Stacking blocks

**“Shop” for substitutes**

Walk through your home and stop in each room. Look around for the everyday materials you see there. Identify the routines and activities that you (and your family) complete while in that room and the materials you use. Think about the skills you need and how the materials are used. Begin thinking about functionality from a personal perspective.

- Roll cans of soup, Push cans of soup
- Push boxes
- Put trash in waste basket
- Laundry in hamper
- Put videos or books on shelf
- Stack groceries

Relax in your favorite chair, jacuzzi, or hammock. Do a visual replay of common objects and routines you’ve identified on your inventory. Match the commonalities from your home and life to the families you see. Imagine other possibilities as you complete your daily chores.

- Feeding the family pets, putting leaves or pine cones in the garbage, or talking on a disconnected phone all present teaching and learning opportunities with everyday materials.

**Survey the family environment for special interests or activities**

Common objects are good but uncommon materials can be even more fun! Look and listen for families’ preferences when you’re visiting them. If music is always playing, try to incorporate it in a dance or singing routine. If the family talks about working in the yard, identify ways the child can be involved.

**Contributions:**

The faxletter is intended to be a sharing document, so please share! Ever want to see your program highlighted, have a question or problem about intervention within routines that you want answered, or have a favorite web site or resource? Let us know! We’re looking for contributors for the newsletter. Simply contact Geoff at gpetrie@mailer.fsu.edu or fax a copy of your suggestion, question, or proposed contribution to (850) 644-3644.
NE represents a double challenge to some service providers...it’s Natural Environments in Nebraska. Changing existing programs and practices is generally recognized as more difficult than establishing new ones, but that’s exactly what early interventionists in west Omaha and adjoining rural counties decided to do. Some of the barriers to change identified by the team members last year included the long and successful history of school based special education programs (NE is a birth mandate state), the incredible growth of population in Omaha concurrent with the shortage of early care and education programs, especially in rural areas, and a strong tradition of direct rather than consultative education and therapy services.

Service providers and administrators initiated the change process by changing their process...from the first point of contact with the program by the family. At the referral and intake, families are providing the service coordinator and evaluation team with valuable information about the concerns they have for their child in relationship to the child and family’s daily routines and activities. Information is gathered about the child and family’s preferences, typical activities and the places they go. Assessment becomes more individualized. As a result, the family and providers develop IFSP outcomes that are meaningful to the family and child. The interventionists first understand the family concerns, priorities, the child’s daily activities and routines, and are writing an assessment report before writing the IFSP. The assessment report is the road map to writing a meaningful and effective IFSP.

The proof of the effectiveness is with the families feedback. “I feel as though I am an active member of the team”. “I always thought my child’s intervention team was very good, but now that I am included in developing strategies for my child with the SLP and teacher, I feel confident that I am giving my child the best he can have.” “I didn’t know we could talk about doing things with my child outside of my home, I guess I really didn’t ever think of his learning when we went places.” “They don’t bring their toy bags anymore. We use Mary’s toys and I don’t feel bad that I don’t have all the latest toys.”

This year, the Millard Public Schools and Education Service Unit #3 Early Intervention teams have requested permission from the State to pilot a modified version of the state IFSP document. This modified document will assist families and early intervention teams to develop outcomes for the child and family that will be functional, meaningful and within the child’s daily routines and natural environments. The document will further support the service providers implementation of natural environments the NE way!

Another change for the process has been to serve children in community programs to further develop community program options, early intervention teams have hosted several focus groups to build partnerships with community childcare/daycare providers by learning from the providers their point of view of EI services and needs within their daycare center. Identifying routines, activities, beliefs and preferences with childcare providers is very similar to working within family routines, and has resulted in similar positive outcomes.

Team members from Millard and ESU#3 presented an overview of the activities at the spring 2000 Harmony Conference in Lincoln, NE. For more information or questions contact Rita Hammitt, rhammitt@mpsomaha.org, 402-895-8307 or Kathy Williams, kwilliams@esu3.org.

Take a peek at Nebraska’s links!

http://nncf.unl.edu/ifspweb

IFSPWeb is a self-paced tutorial designed to help Nebraska parents and professionals create better Individual Family Service Plans (IFSPs) for young children with disabilities.

http://firstconnections.nde.state.ne.us

First Connections is an internet-based training project for teachers and caregivers working with infants and toddlers. An interactive website allows providers access to training via the internet.
Thinking Differently about Therapy Materials
Catherine Knickerbocker, P.T.

Have you ever been in a child’s home providing therapy and wished silently you had that piece of equipment you always used at the clinic? You know, the nesting benches that were so versatile (but like nothing the parent had at home to follow through with) or that perfect little shape sorter or half-roll? But wait, look around, there probably are some great things in that child’s home to integrate into therapy if we think outside the lines.

We’ll give you some ideas to get started, then you can email us with your favorite ideas for a future newsletter. The differences in our various cultures and geographic settings should make this interesting.

Try:
• the sofa without the cushions, use it to pull to stand (lower surface), sit on (lower), jump off use the cushion to walk on uneven surface, different texture, jump on (ask Mom first!)
• diaper box or package (with diapers in it): as a bench seat, a chair for the coffee table, step-up, step down, jump off, etc.
• the remote control: great for finger isolation, motivation to roll, reach, crawl or walk to, etc.
• rolling chair: some dining room chairs have wheels-use it as a “walker”
• window sills: pull up and hold-look out and “talk”, make kisses on the glass (after offering to wash them off, of course!)
• need another ball? crumple a full sheet of newspaper, magazine page, advertising flyer into a “ball”, or roll a sock into a ball, secure if needed with a rubber band, hair band, shoe lace. You can throw or kick it and if it’s lost? No problem.
• want to do some threading? use a shoe string or a straw to string objects onto-rings, pasta, milk carton caps, etc.
• want a shape sorter just the right size? use plastic lids from Pringles can or powder drink container, cut shape of circle in one for lids off drink containers, use a second lid with square cut-out for blocks.
• borrow one of mom’s spice jars for screw/unscrewing lids, pouring, smelling, yummmm!
• magnets and pictures on the refrigerator: to point to, reach for, talk about, name,...
• ”talk”: about the various objects on the coffee table, book shelf, curio shelf, wall, in the fridge while in a practice position - it’s great to engage the child and supports transdisciplinary goals.

• the kids all time favorite: my name tag! No matter the kind or how it is worn, it works great as a visual aid, to reach, roll, sit, reach, turn, crawl, walk - it gets washed more than any toy and it’s always available!

Still stumped? - problem solve with Mom, Grandma, Dad, about what you are trying to do. Give a good description of what you might need - they often are very creative and good problem solvers, especially some whom you don’t give enough credit to! Often the child will teach you how to use an object “differently,” keep your eyes and thoughts open!

Have fun! We’ll have more ideas next time!

100% NATURALLY WONDERFUL
ROUTINE

From Waupaca, Wisconsin: Families identify many different activities that occur on a regular basis which are teaching and learning opportunities. The challenge is up to the team to recognize the activity’s potential. Nicole heard Linda describe interest in listening to music on headphones before bedtime each day. This activity became a wonderful opportunity to promote interaction and communication. Putting headphones on mom’s head instead of Rebecca’s embedded teaching outcomes in this routine. Mom waits for Rebecca to ask for the headphones using words and gestures. When she asks for them, Linda also encourages her to pull them off her head, thus strengthening Rebecca’s ability to maintain her grasp of objects for a longer time. This routine involved many opportunities for embedding practice on making requests, following directions, and increasing her ability to grasp objects. Just listening to mother about her daily routine and expanding on a game that was enjoyable to both helped create a routine that addressed many different outcomes.

Nicole Laurentzen, Early Intervention Waupaca, Wisconsin

Please send us your favorite “100% Naturally Wonderful Routine” to share with participants.

See you in January!