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To order HELP materials, please visit the following:
http://www.vort.com/HELP-0-3-years-Hawaii-Early-Learning-Profile/

Let’s Keep in Touch!

**Send mail:** EITP at the University of Illinois, 51 Gerty Drive, Room 105, Champaign, IL 61820  
**Visit our website:** [https://eitp.education.illinois.edu](https://eitp.education.illinois.edu)  
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*Updated 2/2016; Eval 8/2019*
The Principles of Early Intervention

Adopted by the Illinois Interagency Council on Early Intervention (IICEI) - October 4, 2001

1. The primary goal of EI is to support families in promoting their child's optimal development and to facilitate the child's participation in family and community activities.

2. The focus of EI is to encourage the active participation of families in the therapeutic process by imbedding intervention strategies into family routines. It is the parents who provide the real early intervention by creatively adapting their child care methods to facilitate the development of their child, while balancing the needs of the rest of their family.

3. EI requires a collaborative relationship between families and providers, with equal participation by all those involved in the process. An on-going parent-professional dialogue is needed to develop implement, monitor, and modify therapeutic activities.

4. Intervention must be linked to specific goals that are family-centered, functional, and measurable. Intervention strategies should focus on facilitating social interaction, exploration, and autonomy.

5. Intervention shall be integrated into a comprehensive plan that encourages transdisciplinary activities and avoids unnecessary duplication of services. The plan shall be built around family routines, with written home activity programs to encourage family participation in therapeutic activities on a daily basis.

6. Intervention should be monitored periodically to assure that the strategies implemented are successful in achieving outcomes.

7. Children and their families in the Early Intervention System deserve to have services of highest quality possible. High standards will be set for the training and credentialing of administrative and intervention staff. Training, supervision, and technology will be focused to achieve excellence.
1-3 Sound Awareness, Hearing, and Localization

1.03 0-1 Responds to sounds
1.04 0-2.5 Responds to voice
1.10 2-3.5 Searches with eyes for sound
1.16 3-7 Turns eyes and head to sound of hidden voice
1.19 3.5-5 Localizes sound with eyes
1.41 7-10 a. Finds hidden sound from below after turning head to side
         9-13 b. Finds hidden sound from below by looking directly
1.16 3-7 c. Finds hidden sound from above after turning head to side
1.19 3.5-5 d. Finds hidden sound from above by looking directly
36 e. Finds hidden sound directly above and behind

Family Friendly Interpretation of Strand Concepts, Assessment, & Purpose

We will be observing how your child responds to different sounds and if he can figure out where a sound is coming from. Locating or turning to the source of sound is sometimes termed “auditory localization” by professionals. The ability to locate sounds develops gradually. At first, a child learns to find a sound that is coming from his side. Later, he learns to locate sounds that come from below; for example, if a spoon hits the floor he looks down to the floor to find it. The most difficult sounds to locate are those that occur directly above or behind him when he is sitting or standing. Being able to localize sounds helps your child learn to associate sounds with objects and events, and helps him develop an awareness of where things are located around him (spatial awareness).

Professional FYI

- Delays or inconsistent response in this area may signal hearing loss in one or both ears, or may be a symptom of sensory processing problems, i.e., the child is able to hear the sounds but he hears or responds to them in a disorganized manner because he does not have the spatial awareness needed to locate them.
- The primary emphasis of this strand is auditory localization abilities. This strand provides only a cursory screening of the child’s auditory acuity and it does not assess auditory discrimination, i.e., the ability to discriminate one sound from another.
- Although many children with hearing loss have no identifiable risk factors, one or more of the following factors does place the child at risk for hearing loss and thus should be followed more closely. Assess these risk factors through parent interview and review of medical records:
  - family history of childhood hearing impairment;
  - congenital infection, e.g., cytomegalovirus (CMV), rubella, herpes, toxoplasmosis, syphilis;
  - anatomic malformations of head and neck, e.g., cleft palate, abnormal appearance of outer ear, atypical appearance;
  - birth weight less than 1500 grams;
  - hyperbilirubinemia at such a high level that it required medical intervention;
  - meningitis, especially H. influenza;
  - severe asphyxia;
  - significant history or prolonged incident of middle ear fluid (more than three months);
  - prolonged untreated ear infections.
- Skill #1.41 has been adapted and expanded from the original HELP Charts/Checklist to include localization skills at developmentally higher age ranges.
Parent Questions  
(General Examples - see Skills for specific questions)

- How does your baby let you know that he seems to hear your voice or the sound of a toy?
- Does your child seem to like or dislike certain sounds or voices more than others? If so, Which sounds? How can you tell, or how does he let you know this?
- Does your child have any toys that make sounds, such as a rattle, music box or squeak toy? Does he seem to deliberately shake or squeeze them to hear the sound? Does he move to the music of his music box or let you know that he wants to hear it again when the music stops?
- Has your child had any ear infections or fluid in his ears? If so, About how many? Was it treated by a doctor? What is the longest ear infection your child had that you can remember? Do you know if he has an ear infection or fluid now? Has a doctor treated the infection?
- Have you noticed if your child looks for sounds or voices that he can’t see, such as turning his head when he hears the phone ring? If so, Can you give me some examples?

To help identify family resources, priorities and concerns related to the child’s development in this area:
- Do you have, or have you ever had any concerns about your child’s hearing?
- Has your child’s hearing ever been tested?

If concerns have been identified
- Are you interested in getting information about community resources that can check your child’s hearing?
- Does anyone in your child’s family have a hearing loss which started in childhood?

Are there any other important aspects about your child’s hearing or the way he reacts to sounds that you feel are important?

Sample Functional Outcome Statements which may be generated by the Family

[Will be dependent upon identified individual child and family needs, and should incorporate objectives and activities from other domains]

My child will:
- Know I’m nearby or coming to help him when he hears me talking;
- Be aware of sounds during play and daily activities: his sound-making toys, vacuum, telephone, tub water, blender;
- Enjoy hearing and playing with his rattle and squeak toys;
- Not startle or become upset with general household sounds, such as the telephone, door bell, door closing or opening;
- Associate the sounds he hears with the object;
- Be able to figure out where a sound is coming from.

We will know which types of sounds our child likes best.

Transactional Assessment

May assess through observation and interview.

Assessment of the Child’s Environment

1. Supportive:
[Example environments that support/facilitate development in this area]

The child’s caregiving environments usually:
- Provide a variety of interesting sounds that match the child’s auditory preferences and needs, e.g., a variety of toys that make sounds, people who talk to him, play areas that are accessible to daily activities and routine sounds.

2. Compromising:
[Example environments that may restrict, compromise, inhibit or be unsupportive toward development in this area]

The child’s caregiving environments are frequently:
- Over- or under-stimulating for the child’s auditory interests and needs, e.g., loud television or stereo usually playing; or, child is typically isolated from daily activities and sounds.
Assessment of Caregiver Interactions with the Child

1. Supportive:
[Example interactions that support/facilitate child's development in this area]
The child's caregivers usually:
- Show and name the source of interesting sounds;
- Recognize when toys sound are overstimming and remove or adjust the sound accordingly;
- Make interesting sounds to attract the child's attention;
- Talk to their child using varied and animated expressions and voice tones;
- Identify and buffer environmental sounds that are irritating to the child;
- Pause for the child to respond after saying a short phrase or making a sound with a toy.

2. Compromising:
[Example interactions that may restrict, compromise, inhibit or be unsupportive of the child's development in this area]
The child's caregivers frequently:
- Over-stimulate the child when showing him a sound toy, e.g., squeaks toy too close to face continuously without pausing;
- Provide minimal verbal interactions;
- Do not recognize or respond to child's responses to sounds.

Identifying and Interpreting Needs for Intervention

If a child displays delayed, inconsistent, or atypical development in this area, he may have a hearing impairment in one or both ears or may be having difficulty with sensory organization.
Refer the child for further medical and audiological evaluation if the:
1. Parent has concerns about child's hearing;
2. Child's responses to items in this strand are delayed, inconsistent, or absent.

Refer the child for further evaluation from a therapist trained in sensory organization principles if the child's hearing acuity is determined to be normal but the child does not localize sounds. He may appear confused and disorganized or display hypereactive or soft sounds.

However, before targeting hearing or sensory processing as the primary need for referral and intervention, consider, rule out, or adapt for other causes that may interfere with a true assessment of the child's hearing or localization abilities. These may include:
- **Motor Impairment**: which makes it difficult for the child to turn his head to find a sound, or the child's motor responses may be distorted or delayed;
- **Visually Impaired**: vision reinforces the location of sounds when a child turns to find it. Infants who are blind do not experience this automatic verification. Responses to sound may thus be delayed or not always present;
- **Current ear infection or middle ear fluid**;
- **Competing environment**, e.g., child is too intent looking at a novel toy or there are other competing sounds.

Assessment Adaptations  (Examples)

[Note any adaptations needed to qualify credit and help plan interventions]

- **Motor Impaired**: consult with a P.T. or O.T. to ensure maximal stability and ability to turn head. Adaptive seating or positioning may be indicated. Provide extra time for the child to turn his head, or position the sound source so that it is out of the child's immediate sight but can still be located by eye searching only.

- **Visually Impaired**: expect delayed or more subtle responses to sounds, as well as delays in localization abilities. Always let the child touch the sound stimulus and name it for him after the sound has started. Additional specific adaptations include:
  #1.10 “Searches for sounds with eyes.” Omit and mark N/A.
  #1.16 “Turns eyes and head to sound of hidden voice”: Credit orientation responses to sound, i.e., any head or body adjustment toward the source of sound.

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Assessment Adaptations  (continued)
help select appropriate stimuli and functional goals and objectives. Mark N/A for items that require localization.

- Current ear infection or middle ear fluid: if the child has an ear infection or fluid, be sure to reassess when ears are clear.

General Assessment Procedures & Processes  (apply to all items in this Strand)
1. Items in this strand are developmentally sequenced. If a child passes an item in this strand, all items that precede it can be credited without specifically testing them.
2. Be sure to repeat the assessment procedures toward child's left and right ears on multiple occasions. The child must respond without question at least twice with each ear to be certain of his localization abilities.
3. Do not credit if the child is already looking at source of sound before the sound is made.
4. If a child has any identified risk factors listed in the Professional FYI, #3 above, periodic monitoring of the child's sound auditory awareness and localization skills should occur even if the child displayed appropriate responses on the initial screening.
5. Be sure to let the child see, play with or touch the source of sound after you have given him time to search for it. Repeat the sound while he is attending.
6. When assessing localization skills, it is important that the child is in a position that allows him to freely move his head to find the source.
7. When presenting a sound-producing toy, be careful to avoid giving visual cues to the object's location. Make the sound while the child is looking away, e.g., while looking at parent.
8. Assess in a room that has minimal visual or auditory distractions.
9. Make the sound intermittently rather than continuously; e.g., shake rattle several times, pause a few seconds and shake again.
10. Describe the skill or eliciting procedures and invite family members to help observe and/or assess. Help family members recognize their child's sound preferences and unique or more subtle responses to sounds.

Credit Notes:
+ child consistently responds as defined.
- no response or child was already displaying the response before the onset of sound.
A atypical response, e.g., cries, continues to startle after listening to the sound, appears very confused; takes more than several seconds to find, not due to motor or visual impairment.
N/A not able to assess due to child's disability.
O circle any credit if environment or interactions compromise or restrict child's optimal auditory awareness skills (refer to interactional assessment above)

Note any adaptations used to credit.

Assessment Materials
Safe rattle, squeak toy, bell, closed can containing coins, pebbles or rocks; tissue paper to "rustle"; small wind-up music box; sound toys the family may have.

1.03 Responds to sounds  0-1
Definition: The child displays an awareness of sounds through generally reflexive responses. These responses may include one or more of the following: startle, increase or decrease in respiration and/or activity, change in expression, eyes widening or shifting, body tensing, frown.
Example Observation Opportunities: Incidental: Observe child's responses to sudden, fairly loud sounds that occur naturally in the environment throughout the observation period, e.g., telephone ringing, door slam, knock on door, ball bouncing, vacuum cleaner, book or toy dropping on floor. Note responses to different sounds. Structured: (1) Observe the child's responses to two or three different musical sounds, e.g., bell, xylophone, maraca, drum, tambourine, music boxes. Make the sound 1 to 3 feet from the child's ear. (2) Observe the child's responses to two or three different sound-producing toys: different types of rattles, a Happy Apple or other chime ball.
Credit: (see also Credit Notes in this strand's preface)
+ clearly displays any of the defined responses to all sudden environmental, musical and toy sounds. Reflexive responses should diminish within a few moments of the sound.
A over 1 month continues to startle and/or cry to most sounds.
(see also in Strand 0.0 "Regulatory/Sensory Organization")
1.04 Responds to Voice 0-2.5
Definition: The child displays one or more of the following responses when he hears someone begin to talk: facial expression brightens or becomes intent; looks for speaker; smiles; slowly turns toward voice; quiet; stops or increases sucking.
Example Observation Opportunities: Quietly observe while the parent talks to the child out of his direct line of vision. [Discuss or demonstrate using a higher-pitched voice and pausing to wait for child's response as needed] Note clarity of child's cues and how hard parent had to work to elicit if significant.
Credit: (see also Credit Notes in this strand's preface)
+ consistently displays one or more of the defined responses after hearing a voice.

1.10 Searches with eyes for sound 2-3.5
Definition: The child's responses to sounds at this stage, are less reflexive than in #1.03 "Responds to sounds." At this level, the child displays more intentional alerting and attention responses, such as moving his head toward the source of sound, searching with his eyes, and/or smiling.
Example Observation Opportunities: Same as #1.03.
Credit: (see also Credit Notes in this strand's preface)
+ displays definite eye searching, smilling, or moving head toward source of sound; he does not need to actually find the source of sound.

1.16 Turns eyes and head to sound of hidden voice 3-7
Definition: The child deliberately and successfully turns his head to find the person who is talking to him.
Example Observation Opportunities: Approach, or have parent approach, the child toward one side, within 1 to 3 feet of the child’s shoulder. Use conversational level speech and call the child’s name or say a “catchy” phrase, such as “Hi there!”
Credit: (see also Credit Notes in this strand's preface)
+ localizes and directly looks at speaker within a few seconds of hearing the phrase.

1.19 Localizes sound with eyes 3.5-5
Definition: The child localizes sounds that occur on a lateral plane about 1 to 3 feet from his ear. In contrast to #1.10 "Searches with eyes for sound," the child actually finds the source of sound, rather than just searching.
Example Observation Opportunities: When the child is not looking at the bell, shake it two to three times, 1 to 3 feet from his left ear. Wait a few seconds for his response. Repeat the procedure to child's right side. After letting the child see and touch the bell, repeat the procedure with two to three different rattle toys, and then a high-pitched squeak toy.
Credit: (see also Credit Notes in this strand's preface)
+ turns head to correct side to find the source of each sound (bell, two different toned rattle toys, high-pitched squeak toy) that occurs on a lateral plane, 1 to 3 feet from the child’s ear; this should be displayed with his left and right ear.

1.41a Finds hidden sound from below, after turning head to side 7-10
Definition: The child localizes sounds that occur from below on either side of him. At this stage he initially searches by first turning his head to the correct side and then looking downward.
Example Observation Opportunities: Incidental - may be observed when something is dropped on the floor within 1 to 3 feet, e.g., spoon, book, toy. Structured - when the child is standing or sitting in a seat or in an adult's lap, ring a bell when he is not looking to his left side at about his waist level. Wait a few seconds for his response. Repeat the procedure to child's right side. After letting the child play with the bell, repeat the procedure with two to three different rattle toys, and a high-pitched squeak toy.
Credit: (see also Credit Notes in this strand's preface)
+ turns head to side and then looks down to find source of each sound (bell, two different-toned rattle toys, high-pitched squeak toy) located to the side at or below his waist level.
1.41b. **Finds hidden sound from below by looking directly**  9-13

Definition: The child looks directly downward to find the source of sound that occurred from below on either side of him.

Example Observation Opportunities: Same as #1.41a.

Credit: (see also Credit Notes in this strand's preface)
  + looks directly down to locate the source of each sound; this should be displayed on the left and right.

1.41c **Finds hidden sound from above after turning head to side**  13-16

Definition: The child localizes sounds that occur above him from either side, about 1 to 3 feet above his shoulder. He does so by first turning his head correctly to one side and then looking upward.

Example Observation Opportunities: Same as #1.41a, but present the sound out of sight, 1 to 3 feet above his left and then his right shoulder.

Credit: (see also Credit Notes in this strand's preface)
  + turns head to correct side and then looks upwards to find source of each sound (bell, two different-toned rattle toys, high-pitched squeak toy); this should be displayed on the left and right.

1.41d **Finds hidden sound from above by looking directly**  16-21

Definition: The child looks directly upward to find the source of sound that occurred from above on either side, about 1 to 3 feet above his shoulder.

Example Observation Opportunities: Same as #1.41a, but present the sound out of sight, 1 to 3 feet above his left and then his right shoulder.

Credit: (see also Credit Notes in this strand's preface)
  + looks directly upwards to locate source of each sound, on each side.

1.41e **Finds hidden sound directly above and behind**  36

Definition: The child localizes sounds that occur directly above his head and directly behind his back.

Example Observation Opportunities: Same as #1.41a, but present the sound 1 to 3 feet directly over his head at midline, and then, 1 to 3 feet directly behind his back at midline.

Credit: (see also Credit Notes in this strand's preface)
  + child looks directly upwards to locate source of each sound and turns around to locate source of each sound.
Guidelines for Determining Approximate DALs from the HELP® Strands

Developmental Age Levels (DALs)

Developed by: Stephanie Parks Warshaw

October, 2007
(Replaces Version: December 2006)

Purpose:
These Guidelines (also referred to as the “Rules”) were developed as a quick reference to help determine approximate developmental age levels (DALs) when assessing children with the HELP Strands. They are a supplement to Inside HELP, the administration and reference manual for using the HELP Strands as a birth to three, curriculum-based assessment. The “Rules” provide a set of procedures and clarifications to enhance consistent reporting across staff and programs.

Reporting approximate DALs for individual Strands can assist in developing individualized intervention plans, and, in efforts to quantify and track progress of infants and toddlers at the Local, State, and Federal Level.

Development:
The “Rules” are considered an ongoing work in progress. They were included based upon need for clarification as identified by HELP inservice trainings, questions submitted to VORT and the author of HELP Strands, and, from a detailed review of completed HELP Strands submitted by the field. Check for updates on VORT’s website at: http://www.vort.com/osep/Guidelines_for_Determining_Approximate_DALs_forHELP_Strands.pdf

Important Notes:

1. HELP is a curriculum-based assessment process. The “Rules” cannot provide exact “scores” or age equivalents. Approximate DALs derived from the “Rules” are:
   
   • Considered approximate or estimated levels of development compared to the general birth-three population; and,
   
   • Best understood if shared with families and other team members within a framework of:
     - qualitative descriptions of the child’s unique strengths and needs, and,
     - explanation that all children develop at varying rates, and,
     - understanding that any month levels reported are approximate, not exact, and are for quantification purposes only.

2. The term “Rules” is used in this document as a quick name for “General guidelines”. “Rules” are really about what make sense for this child, at this time, to reflect this child’s functioning. The “Rules” should not be rigid - they are guidelines!
**Guidelines for Determining Approximate DALs from the HELP® Strands**

**The “Rules”**

**Instructions:**

1. The “Rules” are only applicable to the HELP Strands. They provide a guide to determine an approximate DAL for individual Strands within a Domain, e.g., Strand 1-1 ‘Development of Symbolic Play’, which is a strand within the broader Cognitive domain.

2. The “Rules” should only be used by professionals who use Inside HELP with the HELP Strands within the context of the stated “Purpose” and “Important Notes” on page 1.

3. If you are viewing the “Rules” online, click the blue underlined example links to view samples of completed HELP Strands that demonstrate the “rule”.

4. Individual skill items must be credited and recorded correctly prior to determining approximate DALs for the Strands. Use the “Credit key”, skill definitions, and credit criteria from Inside HELP and HELP Strands to insure proper recording and consistent and accurate skill crediting.

5. Sometimes a child may display persistent atypical or dysfunctional skills and behaviors that are not typical or appropriate at any age, e.g., pervasive repetitive behaviors, self destructive behavior, obligatory abnormal posturing. A description of these patterns is usually more appropriate to report than approximate DALs.

| Most important rule: | Since each situation, circumstance, and child is unique, there will always be exceptions to the “rules” |

**“Rules”**

1. **General rule - Plus, plus, minus, minus:**
   Report the last age range with a “+” credit after two consecutive “+” credits followed by two “-” credits, unless the Strand ends before two “-” can be observed. [Link to example for “Rule” 1.](#)

   *Rationale:* If a child displays two consecutive “+” (observed or reported) skills or behaviors in a strand with good quality, you can generally assume earlier skills have been achieved because of the hierarchical nature of the Strands.

   *Exceptions & Clarifications:*
   1.1 **This “Rule” does NOT apply to Strands 0.0 or 1-5.** Skills in these Strands are conceptually based and in consecutive age order, but are not hierarchical, i.e., one skill is not necessarily dependent upon the other. Use clinical judgment if assigning age levels for Strand 1-5. It is not appropriate to assign age levels to Strand 0-0; instead report descriptions of appropriate, hyper, or hypo reactions.
   1.2 If any skills or behaviors are credited with “A”, you should check earlier skills.
   1.3 If something “just doesn’t seem right”, check earlier skills.
   1.4 If the child’s chronological age (CA) falls within the final age range credited, report the child’s CA, or OK, rather than the age range.

2. **Age gaps within a Strand.** Sometimes there is a several month gap between skills within a Strand. If so, and, if the child’s CA is higher than the last skill credited “+”, but lower than the highest age on the next skill, report approximate DAL as “OK”, or as the child’s CA.
Guidelines for Determining Approximate DALs from the HELP® Strands

3. Add “A” atypical to, or in place of the Strand approximate DAL, whenever skills in a strand are recorded as “A” because of quality concerns. This is very important to help insure that needs are identified regardless of DAL, appropriate interventions are planned, and, progress is measured. Criteria for “A” is listed for each applicable skill in Inside HELP.

3.1 If a child displays atypical behaviors for most skills in a Strand or behaviors that are not typical at any age for most items, do not assign an age range, only “A”.

Link to example for “Rule” 3.1: In Strand 3-4, ‘Weight-bearing in Standing’, a 6 month old displays abnormal muscle tone & postures. Although he demonstrated some weight-bearing skills up to 6 months, he does so with abnormal patterns and postures. Record “A” for this strand rather than an approximate DAL. When writing reports or planning interventions describe child’s motor patterns and needs rather than noting a DAL.

3.2 If only one or two skills in a Strand were assessed as “A”, add “A” to the approximate DAL.

Link to example for “Rule” 3.2 In Strand 5-4, ‘Learning Rules and Expectations’, a 15 month old displayed skills and behaviors up to 15 months but a few are extreme. Record “15 A” for data collection or other quantification purpose, however, a report for planning and evaluation would say something like, “Johnny displays many behaviors in this area that are typical for a child his age, however, some of his behavior is extreme and is interfering with daily activities for him and his family (list examples)”.

3.3 Add “A” to the DAL for a Strand that assesses, “Left” and “Right” (e.g., left and right grasp or reach) when skills are observed on one side but not on the opposite side.

Link to example for “Rule” 3.3 10 month old child displays reaching skills up to 10 months but only using his left arm. For data entry or other quantification purposes Approximate DAL = 10 A. However, a curriculum planning and assessment report would say something like, “Johnny displays reaching skills (give examples) appropriate for age with his left arm, but he avoids or stiffens right arm”.

4. Always assess, and consider skills highlighted with an * (asterisk) when assigning an approximate DAL to a Strand, even if the skill is far below the child’s age. These are considered foundational lifetime core skills, and should always be evaluated regardless of age. If the skill is missing or atypical, record “A” for that skill, and add “A” to the approximate DAL assigned to the Strand.

Link to example for “Rule” 4: Skill 5.04 “Establishes eye contact”, under Strand 5-1 ‘Attachment/Separation/Autonomy’: If the child rarely looks at people, record “A” for that item and add an “A” to the approximate DAL for Strand 5-1.

5. Recording N/A. Do not include individual skills/behaviors assessed as “N/A” in your computations to determine approximate developmental age level nor to measure progress.

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Guidelines for Determining Approximate DALs from the HELP® Strands

a. “N/A” at the Skill level:
   (1) Some HELP Skills/behaviors are for anticipatory guidance only. For these skills and behaviors, mark “N/A” rather than “-”.
   These skills and “N/A” instructions are noted in the definition of applicable skills listed in the HELP Strands assessment booklet.
   Link to example for “Rule” 5a(1) Strand 3-2 ‘Supine’, skill 3.35 “Raises hips …in supine”.
   (2) Since most skills within a Strand are in hierarchal order, skills build into more complex or difficult skills with age. Therefore, when applicable, if a child does not appropriately display an earlier skill, record “N/A” rather than “-” so that it is not considered when determining an approximate DAL.
   Link to example for “Rule” 5a(2) Strand 1-4C, ‘Cause and Effect’: if child displays skill 1.50 “Guides action on toy manually”, you can assume the child can accomplish prior skill 1.24 “Touches toy or adult hand to restart an activity”. Therefore, if you do not see the child do this, do not mark “-”. Leave blank or record “N/A”.

b. “N/A” at the Strand level:
   Record “N/A” for an entire Strand when the Strand is not appropriate to assess due to age, disability or circumstance. In these situations, do not consider the Strand when determining approximate DALs, but provide explanation.
   (1) Some areas of development may be inappropriate to assess due to a child’s disability, e.g. Strand 1-6 A. "Picture Concepts" for a child who is blind, or "Advancing Postural Control and Motor Planning" skills for a child who is non-ambulatory. If however you are able to adapt skills in a Strand to accommodate a child’s disability (see Strand Prefaces in Inside HELP), continue with determining approximate DAL and add a notation about the adaptation (see Rule 12)
   (2) Some areas of development may be inappropriate to assess due to a child’s age or circumstance. Link to examples for "Rule" 5b(2), example 1, example 2

6. Usually you do not need to consider isolated “-” credits when determining approximate DALs. All skills are not necessary, appropriate, or relevant to all children. It is normal not to demonstrate all skills. Use clinical judgment when an isolated “-“ should be considered.
   Link to example for “Rule” 6 Strand 1-7 A, ‘Matching and Sorting’: Although this child did not match black and white colors (skill 1.137) he demonstrated other matching and sorting skills. His mother reported that her child’s toys are mostly primary colors. Skill 1.139, “Matches identical simple pictures”, was marked “N/A” because it was not assessed since materials were not available, and, since this child displayed a higher level skills, i.e., “Can match similar pictures” (skill 1.145), per “Rule” 1. Exception: Skills marked with * (asterisk) are considered foundational core skills. They are always relevant and should always be assessed, per “Rule” 4.

7. ‘Aging-out’: If the child is older than, but within a few months of, the age of the last skill in the strand (which the child displayed with good quality), record “OK” for the approximate DAL.
   Link to example for “Rule” 7 9 month old displays final skill in Strand 4-1 ‘Visual responses and tracking’, which ends at 5-6 months. Record “OK” rather than 5-6 mo. for this strand since that could imply a delay in visual tracking.
8. If the last skill credited “+” in a Strand has an age range that includes the child’s age, record “OK” rather than reporting the skill’s age range.

Link to examples for “Rule” 8, example 1, example 2

9. If the child’s age (e.g., 14 mo.) is less than the last skill credited with a “+” in a Strand (e.g., 18-24 mo), report the lowest of the highest age in the range for the approximate DAL, (e.g., 18 mo. for data recording purposes).

Link to example for “Rule” 9

10. If the age range of the last skill accomplished for a child in a strand is greater than the age range of the next skill in the strand (that the child could not accomplish), do not report the child’s DAL as the full age range listed for the last skill accomplished.

Link to view example for “Rule” 10

If the child is 12 mo. and the highest skill accomplished in Strand 1-4B. ‘Means-ends’ is 1.26 “Works for desired, out of reach object” that has an age range of 5-9 months, and, the next skill in the Strand (which the child did NOT accomplish), 1.40 “Retains two of three objects” has age range of 6.5-7.5, the approximate DAL for this child would be about 5-7 mo. rather than 5-9 mo.

11. It is not appropriate to determine an approximate DAL for Section 0.0 - Regulatory/Sensory Organization. The purpose of this section is to look for patterns of preferences, capacities, and difficulties related to regulatory and sensory organization issues. Instead of determining DALs, child responses can be described as “Typical,” “Over-reactive” or “Under-reactive.”

12. When you adapt skills in a Strand to accommodate a child’s disability or other special needs determine the approximate DAL with adaptations and add a notation or description to qualify the credit and help plan interventions. Suggested adaptations are available for each Strand Preface in Inside HELP:

Assessment Adaptations

The “Rules” are an extension of Inside HELP’s ‘Assessment Notes’ included in each Strand Preface and, ‘Instructions’, pages 1.23-i.26. They are considered an ongoing work in progress. Check for updates on VORT’s website at:

Important Reminders:

• No child is expected to display all HELP skills listed nor display all skills for an age range. Be sure to consider individual, environmental, or cultural differences per child.

• The age ranges reported in HELP are the ages at which a skill or behavior (for children who do not have disabilities) typically begins according to the literature. These age ranges are not when a skill begins and ends! Some skills are time-limited and emerge into more complex skills, while others are lifetime skills. Literature varies regarding the age at which a skill emerges, for example, one source may have reported 9 month, another source 10 months, and another source 12 months. HELP would list that skill at the 9-12 month age range.

• HELP is a curriculum-based assessment, not a standardized test. As such, there is no validity or reliability data available for HELP. It will not yield a definitive single age level or score. The major purpose of HELP as a curriculum assessment is to identify curriculum outcomes, strategies and activities.

• If your program requires standardized scores for eligibility purposes, HELP can be used in conjunction with a standardized test (see page i.34) to help pinpoint strengths and needs, and to help develop outcomes, strategies, and activities.

The following instructions and examples provide general "rule of thumb" guidelines for determining approximate developmental levels. There are no exact rules or formulas that will apply for every child or every assessment to derive developmental levels. Use clinical judgment and item analysis in this process.

Each Strand Preface in Inside HELP provides specific strand-related information for determining and reporting developmental levels under "General Assessment Procedures."

Using the HELP Strands (see examples 1 - 5 below) to Determine Approximate Levels of Development

1. The highest skill in each strand.
The highest skill in each strand that the child can accomplish with good quality is, generally, the approximate developmental level of the child for that strand when he has accomplished at least two consecutive skills. If a child displays two or more skills in a row with good quality, you can generally assume that he has achieved earlier skills because of their hierarchical relationship within the strand. Conversely, after a child misses more than two skills or behaviors in a sequence, you can generally assume the child has not yet accomplished higher skills in that particular strand. See the examples below.

Example 1: Reporting for a 24 month-old child from
Strand I-4A. Object Performance (Cognitive Domain)

<table>
<thead>
<tr>
<th>Date</th>
<th>Credit</th>
<th>Skill #</th>
<th>Age</th>
<th>Skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/14/96</td>
<td>+</td>
<td>1.49</td>
<td>9-12</td>
<td>Finds hidden object under three superimposed screens</td>
</tr>
<tr>
<td>7/14/96</td>
<td>+</td>
<td>1.62</td>
<td>11-13</td>
<td>Hidden displacement one screen</td>
</tr>
<tr>
<td>7/14/96</td>
<td>+</td>
<td>1.78</td>
<td>13-14</td>
<td>Hidden displacement two screens</td>
</tr>
<tr>
<td>7/14/96</td>
<td>+</td>
<td>1.80</td>
<td>14-15</td>
<td>Hidden displacement three screens</td>
</tr>
<tr>
<td>7/14/96</td>
<td>+</td>
<td>1.81</td>
<td>14-15</td>
<td>Hidden displacement two screens alternately</td>
</tr>
<tr>
<td>7/14/96</td>
<td>-</td>
<td>1.94</td>
<td>17-18</td>
<td>Series of hidden displacements; object under last screen</td>
</tr>
<tr>
<td>7/14/96</td>
<td>-</td>
<td>1.113</td>
<td>21-22</td>
<td>Series of hidden displacements; object under first screen</td>
</tr>
</tbody>
</table>

Note: the Date and Credit are shown in italics to represent your assessment information for the child.

What is the developmental age level? _______ months
2. The age range listed for the highest skill is not always the developmental range that you will report. This situation can occur when:
   a. There is a wide age range listed for a skill, e.g., more than 3 months
   b. There is a several month gap between skills
   c. A child is older or developmentally higher than the age range listed for the last skill in a strand.

2a. If the age range of the skill which is the child's highest credit is greater than the age range of the next skill in that strand (which he could not accomplish), you would not report the child's developmental level as the full range reported for the skill accomplished.

Example 2a: Reporting for a 12 month-old child from Strand 1-4B. Means-Ends (Cognitive Domain):

<table>
<thead>
<tr>
<th>Date</th>
<th>Credit</th>
<th>Skill #</th>
<th>Age</th>
<th>Skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/14/96</td>
<td>+</td>
<td>1.25</td>
<td>5-6.5</td>
<td>Reaches for a second object purposefully</td>
</tr>
<tr>
<td>7/14/96</td>
<td>+</td>
<td>1.26</td>
<td>5.9</td>
<td>Works for desired, out-of-reach object</td>
</tr>
<tr>
<td>7/14/96</td>
<td>-</td>
<td>1.40</td>
<td>6.5-7.5</td>
<td>Retains two of three objects offered</td>
</tr>
<tr>
<td>7/14/96</td>
<td>-</td>
<td>1.47</td>
<td>8-10</td>
<td>Retains two and reaches for third object</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.46</td>
<td>8-11</td>
<td>Retrieves object using other material</td>
</tr>
</tbody>
</table>

In example 2a above, the "approximate" developmental level for the child on Strand 1-4B would be 5-7 months since the highest skill mastered in Means-Ends was #1.26 "Works for desired, out of reach object." This skill has an age range of 5-9 months. But since the child could not master higher skills in this strand with a lower age range, e.g., "Retains two of three objects offered," with an age range of 6.5-7.5, and "Retains two and reaches for 3rd object" with an age range 8-10 months, you would not report that the child displayed Means-Ends skills in the 5-9 month range. Instead, you could report e.g., "Johnny displayed Means-Ends skills at about the 5-7 month developmental level. He worked to attain an out-of-reach object, and purposely reached for a second object while holding one, but could not yet figure out how to obtain a third object."

2b. If there is a gap in age between skills within a strand, use clinical judgment to report the child's developmental level in that area, depending on the situation.

Example 2b: Reporting for a 17 month-old child from Strand 1-4C. Cause and Effect (Cognitive Domain)

<table>
<thead>
<tr>
<th>Date</th>
<th>Credit</th>
<th>Skill #</th>
<th>Age</th>
<th>Skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.30</td>
<td></td>
<td></td>
<td>5.5-8</td>
<td>Shows interest in sounds and objects</td>
</tr>
<tr>
<td>1.24</td>
<td></td>
<td></td>
<td>5-9</td>
<td>Touches toy or adult’s hand to restart activity</td>
</tr>
<tr>
<td>2/12/97</td>
<td>+</td>
<td>1.50</td>
<td>9-12</td>
<td>Guides action on toy manually</td>
</tr>
<tr>
<td>2/12/97</td>
<td>+</td>
<td>1.67</td>
<td>12-15</td>
<td>Hands toy back to adult</td>
</tr>
<tr>
<td>2/12/97</td>
<td>-</td>
<td>1.98</td>
<td>18-22</td>
<td>Attempts and then succeeds in activating mechanical toy</td>
</tr>
</tbody>
</table>

What is the developmental age level? ____ months
2c. If a child accomplishes the highest level skill in a strand which has an age range less than the child's actual age, and if he displays higher level skills in other strands, use the higher ranged strand as your point of reference.

Example 2c: Reporting for a 10 month-old child (Gross Motor Domain):

**Strand 3-1: Prone (lying on stomach)**

<table>
<thead>
<tr>
<th>Date</th>
<th>Credit</th>
<th>Skill #</th>
<th>Age</th>
<th>Skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>3.07</td>
<td>3-5</td>
<td>Holds head up 90 degrees in prone</td>
</tr>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>3.26</td>
<td>4-6</td>
<td>Bears weight on hands in prone</td>
</tr>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>3.43</td>
<td>6-7.5</td>
<td>Holds weight on one hand in prone</td>
</tr>
</tbody>
</table>

**Strand 3-2: Supine (lying on back)**

<table>
<thead>
<tr>
<th>Date</th>
<th>Credit</th>
<th>Skill #</th>
<th>Age</th>
<th>Skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>1.29</td>
<td>5-6</td>
<td>Brings feet to mouth</td>
</tr>
<tr>
<td>6/10/97</td>
<td>NA</td>
<td>3.35</td>
<td>5-6.5</td>
<td>Raises hips pushing with feet in supine</td>
</tr>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>3.42</td>
<td>6-8</td>
<td>Lifts head in supine</td>
</tr>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>5.27</td>
<td>6-12</td>
<td>Struggles against supine position</td>
</tr>
</tbody>
</table>

**Strand 3-3: Sitting**

<table>
<thead>
<tr>
<th>Date</th>
<th>Credit</th>
<th>Skill #</th>
<th>Age</th>
<th>Skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>3.33</td>
<td>5-6</td>
<td>Holds head erect when leaning forward</td>
</tr>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>3.34</td>
<td>5-8</td>
<td>Sits independently indefinitely but may use hands</td>
</tr>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>3.51</td>
<td>8-9</td>
<td>Sits without hand support for 10 minutes</td>
</tr>
</tbody>
</table>

**Strand 3-4: Weight bearing in Standing**

<table>
<thead>
<tr>
<th>Date</th>
<th>Credit</th>
<th>Skill #</th>
<th>Age</th>
<th>Skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/10/97</td>
<td>+</td>
<td>3.60</td>
<td>9.5-11</td>
<td>Stands momentarily</td>
</tr>
<tr>
<td>6/10/97</td>
<td>-</td>
<td>3.68</td>
<td>11-13</td>
<td>Stands a few seconds</td>
</tr>
<tr>
<td>6/10/97</td>
<td>-</td>
<td>3.71</td>
<td>11.5-14</td>
<td>Stands alone well</td>
</tr>
</tbody>
</table>

What is the developmental age level? _____ months
Crediting Practice

Maya: Report of Observed Behavior
Maya has lots of toys in her child care center to choose from, but she tends to gravitate towards the building blocks and animal figures. She often makes the animals stand on the blocks and make animal noises. While looking at books with animal pictures with her dad, she often touches the pictures and tries to make the animal sound. When her dad asked her to choose the toy animal figure pictured in the book from a few that were on the ground, she was able to match the horse, but did not match the other animals. When her parents or child care provider ask her “what’s this” while looking at pictures or real objects, she often smiles, but has not yet said the name of any of the objects.

How would you credit the following skill items for Maya?

- Skill item #5.47 (PAGE 25 of STRANDS 0-3Plus) “Shows toy preferences,” in Strand 5-2?
- Skill item #1.107 (PAGE 7 STRANDS 0-3Plus) “Matches objects to pictures,” in Strand 1-6?
- Skill item #1.82 (PAGE 7 STRANDS 0-3Plus) “Pats picture”, in Strand 1-6?

Jose’s Video Clip

How would you credit the following skills items for Jose?

- Skill item #4.38 “Transfers object,” in Strand 4-4
- Skill item #4.54 “Uses both hands freely,” in Strand 4-5
- Skill item #3.51 “Sits without hand support for 10 minutes,” in Strand 3-3
9 month-old baby boy

How would you credit the following skill items for this 9 month old baby boy?

- Skill item #1.15 “Uses hands and mouth for sensory exploration of objects”?
- Skill item #4.39 “Bangs object on the table”?
- Skill item #1.26 “Works for desired, out of reach object”?
- Skill item #1.53 “Uses locomotion to regain object, resumes play”?
- Skill item #2.14 “Vocalizes attitudes other than crying”?

18 month-old playing ball

How would you credit the following skill items for an 18 month old child playing ball?

- Skill item #1.56 “Responds to simple verbal requests”?
- Skill item #2.49 “Echoes prominent or last word spoken”?
- Skill item #3.102 “Picks up toy from floor without falling”?
- Skill item #3.103 “Squats in play”?
- Skill item #5.62 “Experiences a strong sense of self-importance – the “me” stage”? 
Assessment Adaptations

Visual Adaptations

Motor Adaptations

Auditory &/or Verbal Adaptations

Attention-related Adaptations
SECTION 1: Demographic Information

Child’s Name: Early Intervention #: CFC #:
Date of Birth: Chronological Age: Adjusted Age:
Parent’s Name: Language Spoken in Home:
Service Coordinator’s Name: Physician’s Name:

SECTION 2: Type of Report

Check One: Evaluation/Assessment (for Eligibility Determination) Assessment (if child already eligible)
Date of Evaluation/Assessment or Assessment:
Provider Name: Provider Phone Number:
Provider Discipline: OT PT DT SLP SW Other:
Location of Evaluation/Assessment: (check one) Home Other Setting (identify where):

SECTION 3: Referral Information

Please list reason for referral, who referred to Child & Family Connections, and Parent/Guardian Concerns:

SECTION 4: Instrument(s) Administered during Evaluation and/or Assessment

<table>
<thead>
<tr>
<th>Title of Instrument Used</th>
<th>Developmental Domain Addressed</th>
<th>Age Equivalent*</th>
<th>Percent of delay*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Required for Evaluation/Assessment. If completing Assessment only, provide if known.

SECTION 5: Evaluation and/or Assessment

A. Child’s developmental history and summary of parents’ concerns. Include information from other sources such as family members, other caregivers, social workers, and educators, as necessary to understand the full scope of the child’s unique strengths and needs.

B. Summary of medical history, including pregnancy, delivery, child’s health since birth, hearing and vision.

C. Behavioral Observations of the child (also include if observed behavior was viewed as typical or atypical as compared to child’s usual behavior).
D. Child’s level of functioning (identifying strengths and needs) in each of the developmental areas tested. As appropriate, include explanation of use of Clinical Opinion in determining eligibility. For annual reviews, also include information about the child’s progress towards IFSP outcomes.

E. Provide justification for annual re-determination for children not meeting original eligibility criteria:

SECTION 6: Summary and Interpretation
A. Brief summation of the child’s unique strengths and needs, ability to perform functional skills and how the child is able to participate in family routines. Include a statement about tool’s accuracy in portraying child’s development.

B. If applicable, recommendations for referrals for additional EI assessments and/or other resources outside of Early Intervention to be discussed at the IFSP meeting.

Evaluator Printed Name

Evaluator Signature                             Date
<table>
<thead>
<tr>
<th>Ring stack</th>
<th>Body parts</th>
<th>Pretend Play</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nesting cups</td>
<td>Animals</td>
<td>Wind Up Toy</td>
</tr>
<tr>
<td>Books</td>
<td>Colors</td>
<td>Picture ID</td>
</tr>
<tr>
<td>Crayons</td>
<td>Blocks</td>
<td>Container Play</td>
</tr>
</tbody>
</table>

**Sounds/Words Heard & Reported:**
Dear Training Participant,

We are conducting a study on the impact of our training program on practices of early intervention providers. This study is part of the work of the Early Intervention Training Program at the University of Illinois. For purposes of this study, we would like to invite you to participate by completing the training evaluation form related to this training as part of the study. By completing this evaluation, you are consenting to be a part of this research study.

The evaluation can be completed in approximately 5-10 minutes. You do not have to answer any of the questions that you do not wish to answer. You will not be required to include your name in the form. Furthermore, we will be aggregating the data from the completed evaluation and analyzing them as a group. Upon completion of the project, we will destroy all the individual data collected from this study. Results of this study will be used for a final report due to the Illinois Department of Human Services, journal articles, and conference presentations. In any publication or public presentations related to this study, pseudonyms will be substituted for any identifying information.

We want to assure you that information derived from your completed evaluation forms and artifacts will be held in strictest confidence, and that you may withdraw from the study at any time without penalty. Your participation in this project is completely voluntary and your choice to participate or not will not impact your current and future participation in any trainings offered by EITP, your job, and your status in our field. Faculty, students, and staff who may see your information will maintain confidentiality to the extent of laws and university policies. Personal identifiers will not be published or presented. We do not anticipate any risk to this study greater than normal life and we anticipate that this project will contribute to the improvement of training in the area of early intervention.

For questions about your rights as a participant in research involving human subjects, please feel free to contact the University of Illinois Institutional Review Board (IRB) Office at (217) 333-2670 or by email at irb@illinois.edu. You are welcome to call collect if you identify yourself as a research participant.

If you would like a copy of this consent form, one can be provided for your records. Thank you in advance for your consideration of this request. If you have any questions about this request, you may contact me by telephone at 217-300-9661 or toll free 866-509-3867 or via email at suec@illinois.edu

Sincerely,

Susan Connor
Early Intervention Training Program at the University of Illinois

Michaelene M. Ostrosky, PhD
Principal Investigator, Early Intervention Training Program at the University of Illinois
Training Evaluation Form for Assessment Tools

Please provide feedback on this event sponsored by the Early Intervention Training Program at the University of Illinois (EITP) around a global assessment, screening or evaluation tool. We appreciate your input and thank you for your time.

**Training Event:** ________________________________  **Date:** _______________________

**Presenter(s):** ____________________________________  **City:** _______________________

**CFC(s) you work with:** ________________________________  **Position/Role (check one):**  
☐ Billing/Admin/Support Staff
☐ CFC Manager  ☐ DT  ☐ DT-H  ☐ DT-V  ☐ Family Member  ☐ Interpreter/Translator  ☐ LIC Coordinator  ☐ Nurse/Nutritionist
☐ OT/OTA  ☐ PL  ☐ PT/PTA  ☐ SC  ☐ Lead SC  ☐ SES  ☐ SLP/SLPA  ☐ SW/Psych/LCPC  ☐ TA Rep.  ☐ Other: _______________________

**Length of Time in Profession:**  
☐ Not Yet in EI System  ☐ < 1 Year  ☐ 1-3 Years  ☐ 3-5 Years  ☐ 5-10 Years  ☐ >10 Years

**Length of Time in EI System:**  
☐ Not Yet in EI System  ☐ < 1 Year  ☐ 1-3 Years  ☐ 3-5 Years  ☐ 5-10 Years  ☐ >10 Years

---

<table>
<thead>
<tr>
<th>Highly Relevant</th>
<th>Largely Relevant</th>
<th>Somewhat Relevant</th>
<th>Barely Relevant</th>
<th>Not Relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Please rate the relevancy of the presented information and activities to your understanding of this screening, evaluation or assessment tool.</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Please rate the relevance of this tool in the process of screening, evaluation and assessment in early intervention.</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**Please rate your ability to do the following:**

<table>
<thead>
<tr>
<th>Great Skills 5</th>
<th>Good Skills 4</th>
<th>Moderate Skills 3</th>
<th>Few Skills 2</th>
<th>No Skills 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) implement the administration and scoring of this assessment tool in early intervention – BEFORE taking this training.</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) implement the administration and scoring of this assessment tool in early intervention – AFTER taking this training.</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) discuss the results from this tool for the purpose of making referrals or determining eligibility – BEFORE taking this training</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) discuss the results from this tool for the purpose of making referrals or determining eligibility – AFTER taking this training</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>(7) Content was presented in an organized, easily understood manner.</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) Content included explanation and illustration of specific content knowledge and practice to be learned.</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) This event provided opportunities to practice and/or problem solve.</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
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</tr>
<tr>
<td>(10) This event provided opportunities to engage in reflection of the material and/or practices.</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
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</tr>
<tr>
<td>(11) I felt a sense of belonging throughout this training (e.g. you felt accepted and your contributions were valued as a participant.)</td>
<td>☐ ☐ ☐ ☐</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TURN OVER for more
I have increased my knowledge, awareness and/or understanding of the following:

<table>
<thead>
<tr>
<th>Item</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>(12) the assessment tool’s purpose and how they support the child and family.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>(13) the assessment tool’s key components and objectives.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>(14) how to explain the administration and results of this tool to a family member or other individual who may be unfamiliar with this tool</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>(15) the history, background and/or research to support the use of this tool</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>(16) the guidelines for the administration of this tool</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>(17) deriving an accurate score/result using this tool</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>(18) accurately interpreting the results from this tool</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>(19) utilizing data from this tool and other sources to make a referral, identify a delay, determine eligibility, or establish next steps</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>(20) applying recommended assessment strategies</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

(21) Please describe one new thing you will try to incorporate into your practice as a result of participating in this training.

(22) What aspects of the training (e.g., goals, format, interactions, activities, trainer, materials) were particularly strong?

(23) If there were aspects of the training that could be improved, what could we do better?

(24) What additional information, skills or training would be most helpful for you using this tool and what you learned in this training?

(25) Please share any additional comments/suggestions.