AFIRM
FOR TODDLERS

PII
for
Toddlers

EBP Brief Packet:
Parent-Implemented Intervention for Toddlers In Home Settings

UNC Frank Porter Graham Child Development Institute
Autism Focused Intervention Resources & Modules for Toddlers
Nowell, S., Sam, A., Waters, V., Dees, R., Amsbary, J., & AFIRM for
Toddlers Team, 2022

The National Professional
Development Center on Autism

The National Clearinghouse on
Autism Evidence & Practice
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OVERVIEW OF CONTENT

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PARENT-IMPLEMENTED INTERVENTION

WHAT IS PII FOR TODDLERS?

Parent-Implemented Intervention (PII) is when parents are coached to deliver an intervention to their toddler within daily routines that promotes the toddler's target skills/behaviors. With a focus on improving child skills and/or the quality of parent-child interactions, PII involves modeling, coaching, and collaborating with parents in the process of training parents to implement evidence-based practices (EBPs) throughout daily routines and activities with their toddler. PII may be used to address toddler behaviors and skills specifically by training and coaching parents to deliver EBPs during everyday routines and activities.

Use novel materials and change things up in familiar routines and activities: To set up the environment and to engage a learner if he/she does not seem interested in playing with you or seems to be bored during an activity[5-7]

Respond to and comment on what the learner is saying/doing: To help the learner engage with you while playing[5-8]

Imitate what the learner is saying/doing: To draw the learner's attention to you[12]

Expand on what the learner is saying/doing: To keep the learner engaged following the start of an activity[5]

Give the learner choices: To encourage learner engagement and communication[8, 11]

Follow the learner's lead: To help the learner remain engaged and interested in the activity[7, 9-10]

Exaggerate your sounds and movements: To draw the learner's attention to you[5]

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EVIDENCE-BASE

The National Clearinghouse on Autism Evidence and Practice has adopted the following criteria to determine if a practice is evidence-based. The 2020 EBP report (Steinbrenner et al., 2020) provides more information about the systematic review process.

Efficacy must be established through high-quality, peer-reviewed research in scientific journals using:
- At least 2 randomized or quasi-experimental group design studies, or
- At least 5 single subject/case design studies, or a
- Combination of evidence of 1 randomized or quasi-experimental group design study and 3 single subject/case design studies

OVERVIEW:

Based upon the 2020 systematic review conducted by the National Clearinghouse on Autism Evidence and Practice (NCAEP), parent-implemented interventions for toddlers are focused interventions that meet the evidence-based practice criteria with over 20 single case design and 30 group design studies. These practices have been effective for early intervention (0-2 years) and preschoolers (3-5 years) on the spectrum. Studies included the 2020 EBP report (Steinbrenner et al., 2020) detail how parent-implemented intervention for toddlers can be used to effectively address the following outcomes for a target goal/behavior/skill: academic/pre-academic, adaptive/self-help, challenging/interfering behavior, cognitive, communication, joint attention, mental health, motor, play, school readiness, and social.

In the table below, the instructional outcomes identified by the evidence base are shown by age of participants.

Age	Academic*	Adaptive	Behavior	Cognitive	Communication	Joint Attention	Mental Health	Motor	Play	School readiness	Social
0-2	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
3-5	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

*The NCAEP review classified practices into domains for an age range of 0-22. The focus of early intervention should be on pre-academic skills and the social and emotional well-being of children. AFIRM for Toddlers does not recommend working on academic goals/outcomes with children in early intervention.

Note: New studies since 2011 (2012 till 2017) are denoted in **bold**

EARLY INTERVENTION (0-2 YEARS) & PRESCHOOL (3-5 YEARS):

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Note: **New studies since 2011 (2012 until 2017) are denoted in bold**

IMPLEMENTATION CHECKLIST: FOR EI PROVIDER

	Observation:	1	2	3	4	5
	Date:					
	Observer's initials:					
STEP 1: JOINT PLANNING FOR PARENT-IMPLEMENTED INTERVENTION						
1.1	Select target skill/behavior for toddler with autism with parent					
1.2	Collect baseline on target skill/behavior with parent					
1.3	Discuss Parent-Implemented Intervention basics and using steps with parent					
1.4	Select activity that Parent-Implemented Intervention will be used with					
1.5	Plan other EBPs to use, if needed					
1.6	Have materials ready and available					
STEP 2: COACHING USE OF PARENT-IMPLEMENTED INTERVENTION						
2.1	Model using Parent-Implemented Intervention for the parent (Live and/or video):					
2.1a	Introduce the Parent-Implemented Intervention Implementation Checklist to the parent					
2.1b	Model PII while the parent observes					
2.1c	Have the parent complete the parent PII Implementation Checklist					
2.2	Answer parent's questions, if needed					
2.3	Support parent's use of Parent-Implemented Intervention Implementation Checklist to practice using Parent-Implemented Intervention strategies					
2.4	Facilitate parent reflection and provide feedback following their practice use of Parent-Implemented Intervention					
2.5	Discuss with the parent how the reinforcer will be thinned (reduced) once the toddler is regularly accomplishing the target skill/behavior					
2.6	Discuss with the parent use of Parent-Implemented Intervention in daily routines and activities					
STEP 3: MONITORING USE OF PARENT-IMPLEMENTED INTERVENTION						
3.1	Plan for and support parent's data collection on the toddler's progress toward the target skill/behavior					
3.2	Monitor parent fidelity using the Parent-Implemented Intervention Implementation Checklist					
3.3	Review data collected on the toddler's target skill/behavior					
3.4	Support use of Parent-Implemented Intervention for other skills/behaviors					
3.5	Collaborate with parent about next steps					

IMPLEMENTATION CHECKLIST: FOR PARENT

JOINT PLANNING

❑ Discuss Parent-Implemented Intervention with your provider:
❑ View models (live and/or video) of Parent-Implemented Intervention
❑ Practice using Parent-Implemented Intervention with reflection, support, and feedback from your provider

WHILE USING PARENT-IMPLEMENTED INTERVENTION

❑ Have materials ready and available
❑ Prepare the toddler for the activity to target the skill/behavior
❑ Transition into the activity
❑ Let the toddler know what is going to happen
❑ Engage the toddler in the activity
❑ Provide reinforcement when toddler attempts/completes skill/behavior (depending on your individualized plan)
❑ Record what happened by collecting data during use of Parent-Implemented Intervention to share with provider at next session

CHECK-INS WITH YOUR PROVIDER

❑ Share what happened using Parent-Implemented Intervention (successes, challenges, concerns, etc.)
❑ Discuss and problem solve with your provider
❑ Determine next steps based on the toddler's progress

SELECT A TARGET GOAL

Toddler's Name: _____   **Date/Time:** _____
Observer(s): _____
Target Skill/Goal/Behavior: _____
Directions: Use this form to select a target behavior that is measurable and observable by addressing the when, what, and how in collaboration with the parent.

DETERMINE GOAL:

1. In our service evaluation, you said your top concern(s) about your toddler was/is _____. Is that still true? What is your biggest goal or priority for your toddler right now?

2. Tell me more about your toddler. What is your toddler really good at doing? What are their favorite things to play with and what does that play look like? How does it go when you join in your toddler's play with their favorite things?

3. Tell me about the best interaction you had with your toddler recently. Where were you and what were you doing that made it go well?

4. I want to hear about times things do not go well between you and your toddler. Does this happen at a certain time of day or during particular activities? What do you and your toddler do when this happens?

5. When you really need your toddler to do something, how do you get them to do it? What are things that motivate your toddler?

6. In three months, what do you hope will have changed as a result of our early intervention sessions?

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CREATE A MEASURABLE AND OBSERVABLE GOAL:

1. **WHAT** is the target goal/behavior/skill?

2. **WHEN** and **WHERE** should the target goal/behavior/skill occur?

3. **HOW** will team members/observers know the target goal/behavior/skill has been mastered?

GOAL:

DATA COLLECTION: BASELINE

Toddler's Name: _____   **Date/Time:** _____
Observer(s): _____
Target Skill/Goal/Behavior: _____
Directions: Use this sheet to collect baseline data on the toddler's and parent's behaviors on the target behavior/goal/skill across daily routines and settings.

Setting/ Routine	Parent Behavior	Toddler Behavior	Notes

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REINFORCER SAMPLING & CHECKLIST

Toddler's Name: _____   **Date/Time:** _____

Observer(s): _____

Target Goal/Behavior/Skill: _____

Directions: Use this worksheet and checklist to identify and select reinforcers/rewards based on the toddler's preferred items, interests, and activities for **Positive Parent-Implemented Intervention** and **Token Economy**.

CONDUCT A REINFORCER SAMPLING:

1. Sit in front of the toddler and hold up two items. Ask the toddler to "Pick one."
2. Wait 10 seconds for the toddler to indicate selection in manner that is appropriate for the toddler (e.g., verbalization, pointing, using an augmentative communication device).
3. Place the selected object in a container for toddler's selection and non-selected item in the not selected container.
4. Repeat steps 1 through 3 until half of the objects presented are selected.

Item 1	Selected?	Item 2	Selected?
	Yes No		Yes No
	Yes No		Yes No
	Yes No		Yes No
	Yes No		Yes No
	Yes No		Yes No
	Yes No		Yes No
	Yes No		Yes No

LIST SELECTED REINFORCERS:

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LIST POTENTIAL REINFORCERS:

AGE APPROPRIATE?

1. What natural reinforcers could be used?

Yes   No

2. What activities, objects, and/or foods does the toddler select independently?

Yes   No

3. What phrases or gestures seem to produce a pleasant response from the toddler?

Yes   No

4. What does the toddler say they would like to work for (if appropriate)?

Yes   No

5. What reinforcers were identified by parents/family members and/or team members as being successful in the past?

Yes   No

6. Does the toddler require additional adaptations/ modifications/supports? Such as visual supports or a communication device?

Yes   No

7. Have reinforcers/rewards for the toddler been identified based on the toddler's interests/preferred items and/or activities?

Yes   No

8. Are additional materials and/or resources for using Functional Behavior Assessment ready and available?

Yes   No

FOODS FOR SNACKS/MEALTIME ROUTINES:

❑ Cheese	❑ Fruit	❑ Pretzels
❑ Chicken Nuggets	❑ Goldfish	❑ Other:
❑ Chips	❑ Ice Cream	❑ Other:
❑ French Fries	❑ Pizza	❑ Other:

GAMES FOR PLAY/RECESS ROUTINES:

❑ Burrito games with a blanket	❑ Peek-a-Boo	❑ Other:
❑ Chase	❑ Tickles	❑ Other:
❑ Pat-a-Cake	❑ Other:	❑ Other:

TOYS FOR PLAY/RECESS ROUTINES:

❑ Books	❑ Legos	❑ Remote controlled toys
❑ Cars/Trains/Trucks	❑ Noisy toys	❑ Other:
❑ Computer	❑ Phones	❑ Other:
❑ Doll house	❑ Puzzles	❑ Other:

SPECIAL INTERESTS FOR ACTIVITIES/ROUTINES:

❑ Book Character:	❑ Movie Character:	❑ TV Show:
❑ Book:	❑ Movie:	❑ Video Game:
❑ Cars, Trains, Trucks	❑ Music	❑ Other:
❑ Computers/Technology	❑ Numbers	❑ Other:
❑ Dinosaurs	❑ Real-Life Person:	❑ Other:
❑ Letters	❑ TV Show Character:	❑ Other:

FAMILY DAILY ROUTINES/ACTIVITIES PLAN

Toddler's Name: _____   **Date/Time:** _____
Observer(s): _____
Target Goal/Behavior/Skill: _____
Directions: Use this form as a guide support the family member using reinforcement for toddlers in daily routines and activities.

Morning Routine/ Activity	Enjoyment Level	Barriers/ Struggles	Transitions	Good fit for EBP?
Waking up	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Getting dressed	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Eating breakfast	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Brushing teeth	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Other	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No

Afternoon Routine/ Activity	Enjoyment Level	Barriers/ Struggles	Transitions	Good fit for EBP?
Napping	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Playing	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Eating lunch/ snack	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Brushing teeth	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Other	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No

Evening Routine/ Activity	Enjoyment Level	Barriers/ Struggles	Transitions	Good fit for EBP?
Going to sleep	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Changing clothes	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Reading story	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Eating dinner	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Brushing teeth	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Bathing	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Other	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No

Other Routines	Enjoyment Level	Barriers/ Struggles	Transitions	Good fit for EBP?
Playdates/ Playgroups	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
School/ Childcare	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Playing Outside	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Other	☹ 😐 ☺		Into: NA rough so-so smooth Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No

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Outings	Enjoyment Level	Barriers/ Struggles	Transitions		Good fit for EBP?
Playground /Park	☹ 😐 ☺		Into: NA rough so-so smooth	Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Store	☹ 😐 ☺		Into: NA rough so-so smooth	Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Church	☹ 😐 ☺		Into: NA rough so-so smooth	Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Pool	☹ 😐 ☺		Into: NA rough so-so smooth	Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Restaurant	☹ 😐 ☺		Into: NA rough so-so smooth	Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Doctor	☹ 😐 ☺		Into: NA rough so-so smooth	Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Family	☹ 😐 ☺		Into: NA rough so-so smooth	Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No
Other	☹ 😐 ☺		Into: NA rough so-so smooth	Out: NA rough so-so smooth	❑ Yes ❑ Maybe ❑ No

ADDITIONAL NOTES:

ADDITIONAL EBPs

Toddler's Name: _____   **Date/Time:** _____

Observer(s): _____

Target Skill/Goal/Behavior: _____

Directions: Identify additional evidence-based practices that can be used to address the target goal/behavior/skill.

ANTECEDENT-BASED INTERVENTION (ABI):
Arrangement of events or circumstances that precede an activity or demand in order to increase the occurrence of a behavior or lead to the reduction of the challenging/interfering behaviors.
- AFIRM's Antecedent-Based Intervention (ABI) module

MODELING (MD):
Involves the learner observing someone correctly performing a target behavior.
- AFIRM's Modeling module

PROMPTING (PP):
Any verbal, gestural, or physical assistance given to learners to support them in acquiring or engaging in a targeted behavior or skill.
- AFIRM's Prompting module
- AFIRM for Paras: Prompting: Introduction & Practice module
- AFIRM for Toddlers: Prompting module

REINFORCEMENT (R):
Provides feedback to the learner that increases the learner's use of a strategy or target behavior/skill in the future.
- AFIRM's Reinforcement module
- AFIRM for Paras: Reinforcement: Introduction & Practice module
- AFIRM for Toddlers: Reinforcement module

VISUAL SUPPORTS (VS):
Any visual display that supports the learner engaging in a desired behavior or skills independent of additional prompts.
- AFIRM's Visual Supports module
- AFIRM for Paras: Visual Cues module
- AFIRM for Toddlers: Visual Supports

NCEAP's Domain Matrix (0-5 Years)

Toddler's Name: _____ **Date/Time:** _____
Observer(s): _____
Target Skill/Goal/Behavior: _____
Directions: Use the domain matrix (Steinbrenner et al., 2020) to select an appropriate evidence-based practice to use with a learner. Definitions for the EBPs are located on the following pages.

	Academic		Adaptive		Behavior		Cognitive		Communication		Joint Attention		Mental Health		Motor		Play		School-Readiness		Social	
	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9	0-2.9	3-5.9
ABI		■	□Y	■	□Y	■			□Y	■							□Y	■		■		■
AAC		■				■			□Y	■	□Y	■					□Y	■			□Y	■
ASI		■						■								■		■				
BMI																				■		
DR		■	□Y	■	□Y	■			□Y	■						■				■		■
DI		■																				
DTT		■		■				■		■	□Y	■						■		■	□Y	■
EXM		■				■				■						■						
EXT		■	□Y	■						■												
FBA		■			□Y	■																
FCT						■																
MD		■							□Y	■		■			□Y	■		■		■	□Y	■
MMI			□Y	■		■			□Y	■												
NI	□Y	■	■	■	□Y	■			□Y	■	□Y	■	□Y	■			□Y	■	□Y	■	□Y	■
PII	□Y	■	■	■	■	■	□Y	■	■	■	■	■	■	■	□Y	■	■	■	■	■	■	■
PBII																				■		
PP		■		■		■			□Y	■	□Y	■			□Y	■	□Y	■		■	□Y	■
R		■	□Y	■	□Y	■			■	■	■	■			□Y	■	■	■	□Y	■	□Y	■
RIR		■				■																■
SM		■																				■
SN		■				■				■		■										
SST						■		■	□Y	■							□Y	■			□Y	■
TA				■																		
TAII		■	□Y	■		■	□Y	■		■				■	□Y	■		■		■		■
TD		■									□Y	■									□Y	■
VM		■								■							□Y	■				■
VS		■													□Y	■		■				

EVIDENCE-BASED PRACTICES FOR EARLY INTERVENTION (0-2.9):

	ACADEMIC	ADAPTIVE	BEHAVIOR	COGNITIVE	COMMUNICATION	JOINT ATTENTION	MENTAL HEALTH	MOTOR	PLAY	SCHOOL-READINESS	SOCIAL
Antecedent-Based Interventions (ABI)		Yes	Yes		Yes				Yes		
Augmentative & Alternative Communication (AAC; includes PECS)					Yes	Yes			Yes		Yes
Differential Reinforcement (DR)		Yes	Yes		Yes						
Discrete Trial Training (DTT)						Yes					Yes
Extinction (EXT)		Yes									
Functional Behavior Assessment (FBA)			Yes								
Modeling (MD)					Yes		Yes				Yes
Music-Mediated Interventions (MMI)		Yes			Yes						
Parent-Implemented Interventions (PII; includes ImPACT, JASPER, Milieu, PRT)	Yes	Yes	Yes		Yes	Yes	Yes		Yes	Yes	Yes
Parent-Implemented Interventions (PII; includes Stepping Stones)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Prompting (PP; includes prompt-based Scripting)					Yes	Yes		Yes	Yes		Yes
Reinforcement (R)		Yes	Yes		Yes	Yes		Yes		Yes	Yes
Social Skills Training (SST; includes PEERS)					Yes				Yes		Yes
Technology-Aided Instruction & Intervention (TAII; includes MindReading, FaceSay)		Yes		Yes	Yes			Yes			
Time Delay (TD)						Yes					Yes
Video Modeling (VM)					Yes	Yes			Yes		
Visual Supports (VS; includes visual-based Scripting)								Yes			

EVIDENCE-BASED PRACTICES FOR PRESCHOOL (3-5.9):

	ACADEMIC	ADAPTIVE	BEHAVIOR	COGNITIVE	COMMUNICATION	JOINT ATTENTION	MENTAL HEALTH	MOTOR	PLAY	SCHOOL-READINESS	SOCIAL
Antecedent-Based Interventions (ABI)	Yes	Yes	Yes		Yes				Yes	Yes	Yes
Augmentative & Alternative Communication (AAC; includes PECS)	Yes		Yes		Yes	Yes			Yes		Yes
Ayres Sensory Integration (ASI)		Yes	Yes		Yes				Yes	Yes	Yes
Behavior Momentum Intervention (BMI)	Yes	Yes	Yes		Yes			Yes	Yes	Yes	Yes
Differential Reinforcement (DR)	Yes				Yes						
Direct Instruction (DI)	Yes	Yes		Yes	Yes	Yes			Yes	Yes	Yes
Discrete Trial Training (DTT)	Yes		Yes	Yes	Yes			Yes	Yes	Yes	Yes
Exercise & Movement (EXM; includes ECE)		Yes	Yes		Yes					Yes	Yes
Extinction (EXT)	Yes		Yes							Yes	
Functional Behavior Assessment (FBA)		Yes	Yes		Yes				Yes	Yes	Yes
Functional Communication Training (FCT)	Yes	Yes	Yes		Yes	Yes		Yes	Yes	Yes	Yes
Modeling (MD)			Yes		Yes			Yes	Yes	Yes	Yes
Music-Mediated Interventions (MMI)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Parent-Implemented Intervention (PII; includes ImPACT, JASPER, Milieu, PRT)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Parent-Implemented Intervention (PII; includes Stepping Stones)					Yes	Yes			Yes	Yes	Yes
Peer-Based Instruction & Intervention (PBII; includes SPG, PMII)	Yes	Yes	Yes		Yes	Yes		Yes	Yes	Yes	Yes
Prompting (PP; includes prompt-based Scripting)	Yes	Yes	Yes		Yes	Yes		Yes	Yes	Yes	Yes
Reinforcement (R)	Yes	Yes	Yes		Yes				Yes	Yes	Yes
Response Interruption & Redirection (RIR)	Yes		Yes							Yes	Yes
Self-Management (SM)	Yes	Yes	Yes	Yes	Yes			Yes			Yes
Social Narratives (SN; includes Social Stories)	Yes	Yes	Yes		Yes	Yes			Yes		Yes
Social Skills Training (SST; includes PEERS)			Yes	Yes	Yes				Yes		Yes
Task Analysis (TA)		Yes			Yes	Yes					
Technology-Aided Instruction & Intervention (TAII; includes MindReading, FaceSay)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Time Delay (TD)	Yes	Yes	Yes	Yes	Yes	Yes		Yes	Yes	Yes	Yes
Video Modeling (VM)	Yes	Yes	Yes		Yes	Yes		Yes	Yes	Yes	Yes
Visual Supports (VS; includes visual-based Scripting)	Yes	Yes	Yes	Yes	Yes	Yes			Yes	Yes	Yes

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DEFINITIONS OF EVIDENCE-BASED PRACTICES:

1. **Antecedent-Based Interventions (ABI)** Arrangement of events or circumstances that precede an activity or demand in order to increase the occurrence of a behavior or lead to the reduction of the interfering behaviors.

2. **Augmentative & Alternative Communication (AAC)** Interventions using and/or teaching the use of a system of communication that is not verbal/vocal which can be aided (e.g., device, communication book) or unaided (e.g., sign language)

3. **Ayres Sensory Integration® (ASI®)** Interventions that target a person's ability to integrate sensory information (visual, auditory, tactile, proprioceptive, and vestibular) from their body and environment in order to respond using organized and adaptive behavior.

4. **Behavioral Momentum Intervention (BMI)** The organization of behavior expectations in a sequence in which low probability, or more difficult, responses are embedded in a series of high probability, or less effortful, responses to increase persistence and the occurrence of the low probability responses.

5. **Differential Reinforcement of Alternative, Incompatible, or Other Behavior (DR)** A systematic process that increases desirable behavior or the absence of an undesirable behavior by providing positive consequences for demonstration/non-demonstration of such behavior. These consequences may be provided when the learner is: a) engaging in a specific desired behavior other than the undesirable behavior (DRA), b) engaging in a behavior that is physically impossible to do while exhibiting the undesirable behavior (DRI), or c) not engaging in the undesirable behavior (DRO).

6. **Direct Instruction (DI)** A systematic approach to teaching using a sequenced instructional package with scripted protocols or lessons. It emphasizes teacher and student dialogue through choral and independent student responses and employs systematic and explicit error corrections to promote mastery and generalization.

7. **Discrete Trial Training (DTT)** Instructional approach with massed or repeated trials with each trial consisting of the teacher's instruction/presentation, the child's response, a carefully planned consequence, and a pause prior to presenting the next instruction.

8. **Exercise & Movement (EXM)** Interventions that use physical exertion, specific motor skills/ techniques, or mindful movement to target a variety of skills and behaviors.

9. **Extinction (EXT)** The removal of reinforcing consequences of a challenging behavior in order to reduce the future occurrence of that behavior.

10. **Functional Behavioral Assessment (FBA)** A systematic way of determining the underlying function or purpose of a behavior so that an effective intervention plan can be developed.

11. **Functional Communication Training (FCT)** A set of practices that replace an interfering behavior that has a communication function with more appropriate and effective communication behaviors or skills.

12. **Modeling (MD)** Demonstration of a desired target behavior that results in use of the behavior by the learner and that leads to the acquisition of the target behavior.

13. **Music-Mediated Intervention (MMI)** Intervention that incorporates songs, melodic intonation, and/or rhythm to support learning or performance of skills/behaviors. It includes music therapy, as well as other interventions that incorporate music to address target skills.

14. **Parent-Implemented Intervention (PII)** A collection of techniques and strategies that are embedded in typical activities and/or routines in which the learner participates to naturally promote, support, and encourage target skills/behaviors.

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15. **Parent-Implemented Intervention (PII)** Parent delivery of an intervention to their child that promotes their social communication or other skills or decreases their challenging behavior.
16. **Peer-Based Instruction & Intervention (PBII)** Intervention in which peers directly promote autistic children's social interactions and/or other individual learning goals, or the teacher/other adult organizes the social context (e.g., play groups, social network groups, recess) and when necessary provides support (e.g., prompts, reinforcement) to the autistic children and their peer to engage in social interactions.
17. **Prompting (PP)** Verbal, gestural, or physical assistance given to learners to support them in acquiring or engaging in a targeted behavior or skill.
18. **Reinforcement (R)** The application of a consequence following a learner's use of a response or skills that increases the likelihood that the learner will use the response/skills in the future.
19. **Response Interruption & Redirection (RIR)** The introduction of a prompt, comment, or other distractors when an interfering behavior is occurring that is designed to divert the learner's attention away from the interfering behavior and results in its reduction.
20. **Self-Management (SM)** Instruction focusing on learners discriminating between appropriate and inappropriate behaviors, accurately monitoring, and recording their own behaviors, and rewarding themselves for behaving appropriately.
21. **Social Narratives (SN)** Interventions that describe social situations in order to highlight relevant features of a target behavior or skill and offer examples of appropriate responding.
22. **Social Skills Training (SST)** Group or individual instruction designed to teach learners ways to participate in their interactions appropriately and successfully with others.
23. **Task Analysis (TA)** A process in which an activity or behavior is divided into small, manageable steps in order to assess and teach the skill. Other practices, such as reinforcement, video modeling, or time delay, are often used to facilitate acquisition of the smaller steps.
24. **Technology-Aided Instruction & Intervention (TAII)** Instruction or intervention in which technology is the central feature and the technology is specifically designed or employed to support the learning or performance of a behavior or skill for the learner.
25. **Time Delay (TD)** A practice used to systematically fade the use of prompts during instructional activities by using a brief delay between the initial instruction and any additional instructions or prompts.
26. **Video Modeling (VM)** A video-recorded demonstration of the targeted behavior or skill shown to the learner to assist learning in or engaging in a desired behavior or skill.
27. **Visual Supports (VS)** A visual display that supports the learner engaging in a desired behavior or skills independent of additional prompts.

PLANNING CHECKLIST

Toddler's Name: _____   **Date/Time:** _____

Observer(s): _____

Target Skill/Goal/Behavior: _____

Directions: Complete this checklist to determine if this is an appropriate practice to use with the toddler on the spectrum as well as if PII for Toddlers is ready to be implemented.

PLANNING:

❑ Has the target goal/behavior/skill been identified?

❑ Has baseline data and/or a functional behavior assessment been collected through direct observation of the toddler?

❑ Is the target goal/behavior/skill measurable and observable? Does it clearly state **what** the target goal/behavior/skill is, **when** it will occur, and **how** team members/observers will know it has been mastered?

❑ Is Parent-Implemented Intervention appropriate for the toddler's target goal/behavior/skill?

❑ Does the toddler have needed prerequisite skills/abilities?

❑ Does the toddler require additional adaptations/modifications/supports? Such as visual supports or a communication device?

❑ Have reinforcers/rewards for the toddler been identified based on the toddler's interests/preferred items and/or activities?

❑ Are additional materials and/or resources for using Parent-Implemented Intervention ready and available?

ANECDOTAL NOTES:

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SELECT PARENT-IMPLEMENTED INTERVENTION STRATEGY:

❑ Use novel materials and change things up in familiar routines and activities

❑ Respond to and comment on what the learner is saying/doing

❑ Imitate what the learner is saying/doing

❑ Expand on what the learner is saying/doing

❑ Give the learner choices

❑ Follow the learner's lead

❑ Exaggerate your sounds and movements

SELECT ADDITIONAL EBPS:

❑ Antecedent-Based Intervention

❑ Modeling

❑ Prompting

❑ Reinforcement

❑ Visual Supports

❑ Other:

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Parent-Implemented Intervention for Toddlers in Home Settings
For more information, please visit: **https://afirm.fpg.unc.edu/**

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COACHING GUIDE
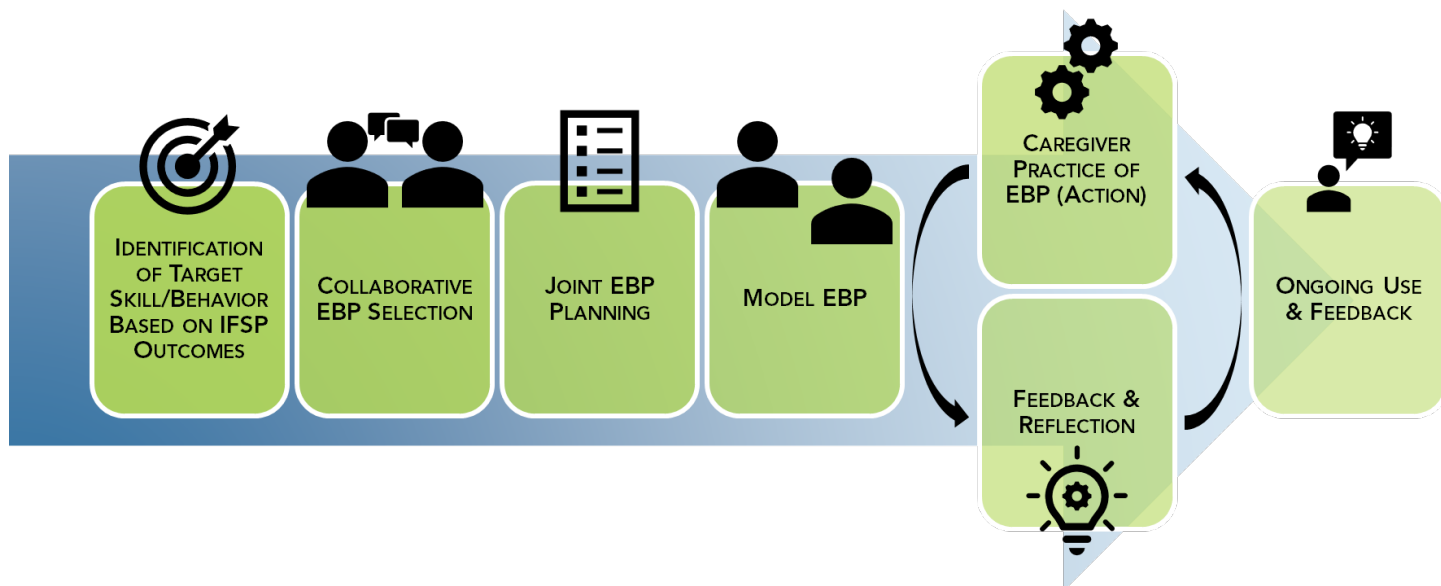
MODEL: Model use of Parent-Implemented Intervention for the parent. Have the parent note any questions or observations that they have as you model.
- Introduce the parent Implementation Checklist to the parent.
- Mode use of Parent-Implemented Intervention with the toddler while the parent observes you.
- Have the parent complete the parent Implementation Checklist.

PARENT PRACTICE: Coach the parent as they practice using Parent-Implemented Intervention, using the parent Implementation Checklist as a guide. Video record them if they are comfortable.

FEEDBACK AND REFLECTION: Watch the video of the parent practicing Parent-Implemented Intervention with the parent. Ask the parent to reflect on their own use of Parent-Implemented Intervention and offer feedback for the next time they use it.

REPEAT CYCLE: Repeat the cycle of parent practice and reflection until the parent has mastered implementation of that EBP in that setting. Monitor the parent's on-going use of Parent-Implemented Intervention while also monitoring the toddler's progress toward the target skill/behavior.

ON-GOING USE AND FEEDBACK: Re-assess once the parent has mastered Parent-Implemented Intervention in one routine/activity and with one target skill, consider other routines and activities where Parent-Implemented Intervention could be used or other goals that may be targeted by that EBP. Discuss with the parent if they would like to target another goal and begin evidence-based practice selection and collaborative planning cycle again.

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FAQ GUIDE

What is an evidence-based practice? What makes parent-implemented intervention an evidence-based practice?

An evidence-based practice is an instructional/intervention procedure or set of procedures for which researchers have provided an acceptable level of research that shows the practice produces positive outcomes (NPDC, n.d.). Based upon the 2020 systematic review conducted by the National Clearinghouse on Autism Evidence and Practice (NCAEP), parent-implemented interventions for toddlers are focused interventions that meets the evidence-based practice criteria (Steinbrenner et al., 2020).

Why is parent-implemented intervention important? Why should I use it with my toddler? What will it help my toddler with?

Parent-implemented Intervention allows you to address goals that are meaningful to your family and build successful interactions with your toddler. PII can turn routines from stressful to playful. PII strategies can be used to address a wide range of toddler goals.

What steps are involved with using parent-implemented intervention?

Using PII involves working together to select a target skill, discussing PII strategies and selecting everyday routines in which to use the strategies. Then I will model PII for you, and you will have the chance to ask any questions. You will then have the chance to practice and reflect on your practice before using PII on your own.

Are there any challenges to using parent-implemented intervention for toddlers?

Consistency and practice are important when using PII. We will work together while you practice using the selected strategies and reflect on how you think things are going. We will also discuss how the strategies fit into your everyday routines with your toddler to be sure they can be used consistently.

How/When will I know it is working?

We will work together to monitor the use of PII strategies. We will plan for and collect data on your toddler's progress in a way that works best for you. Together we will look at the data to determine if the strategies are working for you and your toddler.

Where can I learn more?

The *Family Guide to PII* provides an overview of this practice for families. The *Parent PII Implementation Checklist* outlines the steps of using PII in your home. In addition, I will be supporting your use of PII and can answer any questions you have.

Can I use this practice in other routines?

Yes, our goal is ultimately to use the practice in several routines as long as it is effective for you and your toddler. Since this is the first time, we are using this practice, it is important that we focus on this one routine and get you and the toddler used to it before expanding to other routines.

What if it does not go well?

Interactions between parents and toddlers rarely go perfectly. It is important to keep practicing. If using the practice does not go well one day, try again the next day and things may be different. If the practice does not seem effective after a while, we can work together to select another practice.

What if I do the steps wrong?

It is completely ok to mess up some steps while you are learning the practice. You are a human and some days you will do this better than others. The important thing is to keep trying. I am here if you have any questions.

What if I cannot remember all the steps?

You may want to keep the steps next to you while using the practice the first few times you use it, either on paper or on your phone. What do you think would work best for you? It is ok and even expected that you will forget steps from time to time. Just keep trying.

REFLECTION GUIDE

Toddler's Name: _____   **Date/Time:** _____

Observer(s): _____

Target Skill/Goal/Behavior: _____

Directions: Use this as a guide to facilitate the parent's reflection on their use of Parent-Implemented Intervention with their toddler.

REFLECTION:

1. How do you think that went?

2. Did you encounter any challenges implementing Parent-Implemented Intervention with your toddler?

3. At which points did you see Parent-Implemented Intervention working for your toddler?

4. What could you have done differently?

5. Did you feel comfortable implementing Parent-Implemented Intervention with your toddler?

6. Did your toddler respond positively to Parent-Implemented Intervention?

7. Did your toddler enjoy the activity?

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END OF SESSION REFLECTION:

1. How are you feeling about what we practiced today?

2. Does this target skill/behavior still feel important for us to work on?

3. Does the Parent-Implemented Intervention we selected feel like it could be helpful?

4. Does the routine we selected seem like a good fit for this practice?

5. How do you feel about doing this with your toddler this week without me here?

6. How do you think your toddler will respond to using this practice during the week?

7. Do you anticipate any issues with using this practice?

8. How do you think other caregivers will respond to learning about this practice?

DATA COLLECTION: PARENT LOG

Toddler's Name: _____   **Date/Time:** _____

Observer(s): _____

Target Skill/Goal/Behavior: _____

Directions: Use this sheet to collect data on using Parent-Implemented Intervention with your toddler.

Date: _____ Setting/ Routine	Implementer	Additional EBPs Used?	Successful?
❑ Mealtime ❑ Outing ❑ Dressing ❑ Sleep/Naptime ❑ Playtime ❑ Bath time ❑ Toothbrushing ❑ Handwashing ❑ Storytime ❑ Other	❑ Family ❑ Parent ❑ Child Care Provider ❑ Other	❑ Prompting ❑ Modeling ❑ Visual Supports ❑ Video Modeling ❑ Other:	❑ Yes ❑ No
What was happening before?	**What happened while using EBP? Did toddler display target skill?**	**What happened after? Impact on target skill?**	**Results/Outcomes**

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Date: _____ Setting/ Routine	Implementer	Additional EBPs Used?	Successful?
❑ Mealtime ❑ Outing ❑ Dressing ❑ Sleep/Naptime ❑ Playtime ❑ Bath time ❑ Toothbrushing ❑ Handwashing ❑ Storytime ❑ Other	❑ Family ❑ Parent ❑ Child Care Provider ❑ Other	❑ Prompting ❑ Modeling ❑ Visual Supports ❑ Video Modeling ❑ Other:	❑ Yes ❑ No
What was happening before?	**What happened while using EBP? Did toddler display target skill?**	**What happened after? Impact on target skill?**	**Results/Outcomes**

1. Overall impression to discuss with EI Provider (What is going well? What is difficult?):

2. Questions to ask EI Provider:

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DATA COLLECTION: TIME SAMPLING

Learner's Name: _____   **Date/Time:** _____

Observer(s): _____

Target Skill/Goal/Behavior: _____

Directions: Collect data on the frequency of the learner demonstrating the target goal/behavior/skill at time intervals (light green cells) to determine if the learner is making progress.

	Time Intervals (generally every 5 minutes)						
Date						**Total**	**Before, During, OR After R**

ANECDOTAL NOTES:

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DATA COLLECTION: EVENT SAMPLING

Learner's Name: _____   **Date/Time:** _____
Observer(s): _____
Target Skill/Goal/Behavior: _____
Directions: Collect data on the frequency of the toddler demonstrating a behavior that is interfering with their learning.

Date	Tally (each occurrence of the interfering behavior)	Total Tally

ANECDOTAL NOTES:

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DATA COLLECTION: DURATION

Learner's Name: _____   **Date/Time:** _____

Observer(s): _____

Target Goal/Behavior/Skill: _____

Directions: Collect data on the duration of the learner demonstrating the target goal/behavior/skill to determine if the toddler is making progress.

Date	Start Time	Stop Time	Total Time (min)	Prompts Needed	Before, During, or After Parent-Implemented Intervention
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After
					❑ Before ❑ During ❑ After

Prompt Key: VB = Verbal; VS = Visual; G = Gestural; M = Model; P = Physical; I = No prompts needed/Independent

MONITORING PROGRESS CHECKLIST

Toddler's Name: _____   **Date/Time:** _____

Observer(s): _____

Target Skill/Goal/Behavior: _____

Directions: Complete this checklist to determine if the toddler is making progress with using Parent-Implemented Intervention.

MONITORING PROGRESS:

❑ Has the toddler achieved the target goal/behavior/skill?

❑ Is the target goal/behavior/skill measurable and observable? Does it clearly state what the target goal/behavior/skill is, when it will occur, and how team members/observers will know it has been mastered?

❑ Is the target goal/behavior/skill too difficult/complex? Does it need to be broken down into smaller steps?

❑ Has enough time been devoted to using Parent-Implemented Intervention for Toddlers (frequency, intensity, and/or duration)?

❑ Has the parent implemented Parent-Implemented Intervention for Toddlers with fidelity?

❑ Does the toddler require additional adaptations/modifications/supports? Such as visual supports or a communication device?

❑ Are the selected reinforcers preferred items/activities for the toddler?

❑ Has monitoring data been collected?

❑ Has using Parent-Implemented Intervention been reflected on?

ANECDOTAL NOTES:

GENERALIZATION PLAN

Toddler's Name: _____   **Date/Time:** _____
Observer(s): _____
Target Skill/Goal/Behavior: _____
Directions: se this form to plan for supporting generalization of your toddler's skills across settings.

Time	Activity	Setting	Notes

STEP-BY-STEP GUIDE FOR EI PROVIDER

This step-by-step practice guide outlines how to plan for, coach use, and monitor Parent-Implemented Intervention for Toddlers so that you can be sure this selected evidence-based practice is likely to be used by the parent to address the target goal/behavior/skill of the toddler.

STEP 1: JOINT PLANNING FOR PARENT-IMPLEMENTED INTERVENTION

The planning step details the initial steps and considerations involved to prepare the parent for using Parent-Implemented Intervention with a toddler.

📄 Use the EI Provider Implementation Checklist to coach caregivers to use Parent-Implemented Intervention.

📄 Give the Parent-Implemented Intervention Implementation Checklist to caregivers for them to use to follow the steps of using Parent-Implemented Intervention with the toddler.

1. **Select target skill/behavior for toddler with parent (e.g., family member, childcare provider)**
   • Invite the parent's expert input on the toddler's needs, culture, and priorities
   📄 Use the Selecting a Target Goal form as a guide to select a target skill/behavior with the parent.

2. **Collect baseline on target goal with parent**
   Observe the toddler in their natural environment interacting with the parent.
   📄 Use the Data Collection: Baseline with the parent to collect data on the toddler.

3. **Discuss Parent-Implemented Intervention basics and using steps with parent**
   Effective discussions about Parent-Implemented Intervention include both informing caregivers about how to use Parent-Implemented Intervention and also empowering them as the expert about the toddler.
   • Review baseline data with the parent.
   • Introduce the main principles of Parent-Implemented Intervention and discuss how using Parent-Implemented Intervention can be used to address the toddler's target skill/behavior.
   • Ask the parent if they have any questions about using Parent-Implemented Intervention.
   • End with a discussion of parent strengths and how those can enhance their use of Parent-Implemented Intervention to address the toddler's target skill/behavior.
   📄 Use the Family Guide to provide basic information about the practice to parents or family members about the practice they are using with their child.
   📄 Use the Coaching Guide when coaching the parent to use PII during daily routines with the toddler.

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4. **Select activity that this Parent-Implemented Intervention will be used with**
   When discussing activities in which to use Parent-Implemented Intervention refer to the target skill/behavior discussion and the baseline data you collected with the parent. Consider the family or center schedule and caregivers' preferences for when to target the skill/behavior with Parent-Implemented Intervention.
   📄 Use the Routines Determination: Center-Based when selecting activities/setting for using Parent-Implemented Intervention.

6. **Determine supports that may be needed for toddler to use target skill/behavior**
   Consider using other EBPs to support the toddler's skill/behavior within the chosen routine. Foundational EBPs that are commonly used with Parent-Implemented Intervention include:
   - Modeling
   - Prompting
   - Reinforcement
   - Visual Supports
   📄 Use the Additional EBPs form to identify additional evidence-based practices to use.
   📄 Use the Domain Matrix 0-5 to select an appropriate EBP to use with a toddler.
   📄 Use the R+ Checklist & Sampling Form to select reinforcers/rewards based on the toddler's preferences.

7. **Have materials ready and available**
   Additional materials may include:
   - Motivating reinforcers
   - Natural reinforcers
   - Data collection sheet
   - Materials for other EBPs (if needed)
   📄 Use the Planning Checklist to determine if ready to implement Parent-Implemented Intervention

STEP 2: COACHING USE OF PARENT-IMPLEMENTED INTERVENTION

The coaching step details the using steps and considerations involved to prepare the parent for using Parent-Implemented Intervention for Toddlers with a toddler.
📄 Use the Coaching Guide when coaching the parent to use Parent-Implemented Intervention during daily routines with the toddler.

1. **Model using the evidence-based practice for the parent:**
   a. Introduce the Parent-Implemented Intervention Implementation Checklist
   Review the Parent-Implemented Intervention Implementation Checklist with the parent, explaining the steps of using Parent-Implemented Intervention and how it will be used within the selected routines or activities.
   📄 Provide this Parent-Implemented Intervention Implementation Checklist to the parent to support their use of Parent-Implemented Intervention

b. Model PII while the parent observes
- Model using the EBP with the toddler and encourage the parent to observe you using the strategy.
- Talk through the steps while you model, pointing out what went well or did not go well.

2.1c Have the parent complete the parent PII Implementation Checklist
- While you model using the EBP, have the parent check off items on the parent Implementation Checklist as they observe.
- Highlight the toddler's responses and discuss the importance of consistency when using the EBP.

2. **Answer parent's questions, if needed**
Take a moment to allow the parent to ask you questions about using Parent-Implemented Intervention and respond accordingly.

📄 Use the FAQ Guide for Parent-Implemented Intervention to answer any questions the parent has about Parent-Implemented Intervention

3. **Support parent's use of Parent-Implemented Intervention Implementation Checklist to practice using Parent-Implemented Intervention for Toddlers**
- Encourage the parent to use the Parent-Implemented Intervention Implementation Checklist as a guide as they practice Parent-Implemented Intervention while you observe and support them to use it.
- Prompt and encourage the parent as needed.

📄 Provide this Parent-Implemented Intervention Implementation Checklist to the parent to support their use of Parent-Implemented Intervention

4. **Facilitate parent reflection and provide feedback following their practice use of Parent-Implemented Intervention for Toddlers**
- Using the Parent-Implemented Intervention Implementation Checklist, ask the parent to reflect on their use of Parent-Implemented Intervention with their toddler.
- Use parent responses to guide a discussion.
- Modify the plan for using Parent-Implemented Intervention based on parent feedback.

📄 Use the Facilitate Reflection on Parent-Implemented Intervention Use form to facilitate the parent's reflection on their use of Parent-Implemented Intervention.

5. **Discuss with the parent when they will use Parent-Implemented Intervention for Toddlers in daily routines and activities**
- Discuss times of day or routines/activities during which caregivers will use Parent-Implemented Intervention with their toddler.
- Start small with one routine and gradually add to this.
- Praise small successes of the parent

STEP 3: MONITORING USE OF PARENT-IMPLEMENTED INTERVENTION

The monitoring use step details how to monitor the parent's use of Parent-Implemented Intervention for Toddlers with a toddler and how to determine next steps based on the data.

1. **Plan for and support parent's data collection on toddler's progress towards the target skill/behavior**
   - Ask the parent to track their toddler's progress using the Data Collection Form and parent Log.
   - Continue to collect data both during sessions as you observe the parent and from the parent's data collected throughout the week.
   - Analyze trends and monitor progress in collaboration with the parent.
   - 📄 Provide this Parent Log & Data Collection Form to the parent to support their collection of monitoring data on the toddler.

2. **Collect and analyze fidelity of parent's use of Parent-Implemented Intervention for Toddlers**
   - Encourage the parent to keep the Parent-Implemented Intervention Implementation Checklist somewhere easy to reference throughout the week.
   - Monitor parent fidelity during sessions using the Parent-Implemented Intervention Implementation Checklist and discuss any questions the parent has.
   - 📄 Use this Parent-Implemented Intervention Implementation Checklist to collect the parent's fidelity of using Parent-Implemented Intervention

3. **Review data collected on the toddler's target skill/behavior**
   - Review data collected during sessions and by the parent during the week.
   - You and the parent should periodically self-reflect on use of Parent-Implemented Intervention.
   - 📄 Use this Monitoring Progress Checklist to guide the reflection discussion.

4. **Support parent's use of Parent-Implemented Intervention for Toddlers for other target skills/behaviors for the toddler**
   Once the target skill/behavior has been mastered during one activity, consider ways to generalize the skill in other activities or routines and with other caregivers.
   - 📄 Provide this Generalization Plan to parent to support use of Parent-Implemented Intervention with other target goals for their toddler across settings.

5. Determine next steps

Collecting data will help caregivers decide about the effectiveness of using Parent-Implemented Intervention for Toddlers and whether the toddler is making progress. If a toddler is making progress based upon data collected, then the parent should continue to use the selected strategies.

If caregivers determine that the toddler is not making progress, consider the following:

- Is the target goal/behavior/skill well defined?
- Is the target goal/behavior/skill measurable and observable?
- Is the target goal/behavior/skill too difficult/complex? Does it need to be broken down into smaller steps?
- Has enough time been devoted to using Parent-Implemented Intervention for Toddlers (frequency, intensity, and/or duration)?
- Was Parent-Implemented Intervention for Toddlers implemented with fidelity?
- Does the toddler need additional supports?
- Are the selected reinforcers preferred items/activities for the toddler?

If these issues have been addressed and the toddler continues not to show progress, consider selecting a different evidence-based practice to use with the toddler.

FAMILY GUIDE

WHAT IS PII?

- Parent-Implemented Intervention (PII) involves coaching parents to deliver an intervention to their toddler within daily routines
- Parent-Implemented Intervention focuses on improving child skills and/or positive parent-child interactions.
- PII encourages the use of toddler's skills across everyday environments.

WHY USE THIS PII MY TODDLER?

- PII is a versatile practice that can be used to address a variety of outcomes.
- PII is designed to be used within natural family routines.
- PII strategies capitalize on the relationship between parents and toddlers to support the child's development.

WHAT ACTIVITIES CAN I DO AT HOME?

- Set up the environment to encourage communication by modeling the use of language and putting preferred items just out of reach.
- Follow your child's lead in play by being responsive to preferences and encouraging communication around play activities.
- Reinforce your toddler with praise and attention for displaying target outcomes and preferred behaviors.

Parent-Implemented Intervention (PII) for Toddlers
This parent introduction to PII for Toddlers was designed as a supplemental resource to help answer questions about Reinforcement.

To find out more about how this R for Toddlers is being used with your child, please talk with:

_____

For more information about this selected evidence-based practice, please visit https://afirm.fpg.unc.edu/.

CEC STANDARDS

INITIAL PRACTICE-BASED STANDARDS FOR EARLY INTERVENTIONISTS/EARLY CHILDHOOD (0-5 YEARS; CEC, 2020)

STANDARD 1: CHILD DEVELOPMENT & EARLY LEARNING
1.1 Demonstrate an understanding of the impact that different theories and philosophies of early learning and development have on assessment, curriculum, intervention, and instruction decisions.
1.3 Apply knowledge of biological and environmental factors that may support or constrain children's early development and learning as they plan and implement early intervention and instruction.

STANDARD 2: PARTNERING WITH FAMILIES
2.1 Apply knowledge of family-centered practices, family systems theory, and the changing needs and priorities in families' lives to develop trusting, respectful, affirming, and culturally responsive partnerships with all families that allow for the mutual exchange of knowledge and information.
2.2 Communicate clear, comprehensive, and objective information about resources and supports that help families to make informed decisions and advocate for access, participation, and equity in natural and inclusive environments.
2.3 Engage families in identifying their strengths, priorities, and concerns; support families to achieve the goals they have for their family and their young child's development and learning; and promote families' competence and confidence during assessment, individualized planning, intervention, instruction, and transition processes.

STANDARD 3: COLLABORATION & TEAMING
3.1 Apply teaming models, skills, and processes, including appropriate uses of technology, when collaborating and communicating with families; professionals representing multiple disciplines, skills, expertise, and roles; and community partners and agencies.
3.2 Use a variety of collaborative strategies when working with other adults that are evidence-based, appropriate to the task, culturally and linguistically responsive, and take into consideration the environment and service delivery approach.

3.3 Partner with families and other professionals to develop individualized plans and support the various transitions that occur for the young child and their family throughout the birth through 8 age-span.

STANDARD 4: ASSESSMENT PROCESSES
4.2 Develop and administer informal assessments and/or select and use valid, reliable formal assessments using evidence-based practices, including technology, in partnership with families and other professionals.
4.3 Analyze, interpret, document, and share assessment information using a strengths-based approach with families and other professionals.

4.4 In collaboration with families and other team members, use assessment data to determine eligibility, develop child and family-based outcomes/goals, plan for interventions and instruction, and monitor progress to determine efficacy of programming.

STANDARD 5: APPLICATION OF CURRICULUM FRAMEWORKS IN THE PLANNING OF MEANINGFUL LEARNING EXPERIENCE

5.1 Collaborate with families and other professionals in identifying an evidence- based curriculum addressing developmental and content domains to design and facilitate meaningful and culturally responsive learning experiences that support the unique abilities and needs of all children and families.

5.2 Use knowledge of early childhood curriculum frameworks, developmental and academic content knowledge, and related pedagogy to plan and ensure equitable access to universally designed, developmentally appropriate, and challenging learning experiences in natural and inclusive environments.

STANDARD 6: USING RESPONSIVE AND RECIPROCAL INTERACTIONS, INTERVENTIONS, & INSTRUCTION

6.1 In partnership with families, identify systematic, responsive, and intentional evidence-based practices and use such practices with fidelity to support young children's learning and development across all developmental and academic content domains.

6.2 Engage in reciprocal partnerships with families and other professionals to facilitate responsive adult-child interactions, interventions, and instruction in support of child learning and development.

6.3 Engage in ongoing planning and use flexible and embedded instructional and environmental arrangements and appropriate materials to support the use of interactions, interventions, and instruction addressing developmental and academic content domains, which are adapted to meet the needs of each and every child and their family.

6.4 Promote young children's social and emotional competence and communication, and proactively plan and implement function-based interventions to prevent and address challenging behaviors.

6.5 Identify and create multiple opportunities for young children to develop and learn play skills and engage in meaningful play experiences independently and with others across contexts.

6.6 Use responsive interactions, interventions, and instruction with sufficient intensity and types of support across activities, routines, and environments to promote child learning and development and facilitate access, participation, and engagement in natural environments and inclusive settings.

6.7 Plan for, adapt, and improve approaches to interactions, interventions, and instruction based on multiple sources of data across a range of natural environments and inclusive settings.

STANDARD 7: PROFESSIONAL & ETHICAL PRACTICE

7.2 Engage in ongoing reflective practice and access evidence-based information to improve their own practices.

7.3 Exhibit leadership skills in advocating for improved outcomes for young children, families, and the profession, including the promotion of and use of evidence-based practices and decision-making.

DEC RECOMMENDED PRACTICES

ASSESSMENT:

A2. Practitioners work as a team with the family and other professionals to gather assessment information.

A4. Practitioners conduct assessments that include all areas of development and behavior to learn about the child's strengths, needs, preferences, and interests.

A6. Practitioners use a variety of methods, including observation and interviews, to gather assessment information from multiple sources, including the child's family and other significant individuals in the child's life.

A7. Practitioners obtain information about the child's skills in daily activities, routines, and environments such as home, center, and community.

A8. Practitioners use clinical reasoning in addition to assessment results to identify the child's current levels of functioning and to determine the child's eligibility and plan for instruction.

A9. Practitioners implement systematic ongoing assessment to identify learning targets, plan activities, and monitor the child's progress to revise instruction as needed.

A11. Practitioners report assessment results so that they are understandable and useful to families.

ENVIRONMENT:

E1. Practitioners provide services and supports in natural and inclusive environments during daily routines and activities to promote the child's access to and participation in learning experiences.

E3. Practitioners work with the family and other adults to modify and adapt the physical, social, and temporal environments to promote each child's access to and participation in learning experiences.

RECOMMENDED PRACTICE: FAMILY

F1. Practitioners build trusting and respectful partnerships with the family through interactions that are sensitive and responsive to cultural, linguistic, and socioeconomic diversity.

F2. Practitioners provide the family with up-to-date, comprehensive, and unbiased information in a way that the family can understand and use to make informed choices and decisions.

F3. Practitioners are responsive to the family's concerns, priorities, and changing life circumstances.

F4. Practitioners and the family work together to create outcomes or goals, develop individualized plans, and implement practices that address the family's priorities and concerns and the child's strengths and needs.

F5. Practitioners support family functioning promote family confidence and competence and strengthen family-child relationships by acting in ways that recognize and build on family strengths and capacities.

F6. Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family's preferences.

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F7. Practitioners work with the family to identify, access, and use formal and informal resources and supports to achieve family-identified outcomes or goals.

RECOMMENDED PRACTICE: INSTRUCTION

INS1. Practitioners, with the family, identify each child's strengths, preferences, and interests to engage the child in active learning.

INS2. Practitioners, with the family, identify skills to target for instruction that help a child become adaptive, competent, socially connected, and engaged and that promote learning in natural and inclusive environments.

INS3. Practitioners gather and use data to inform decisions about individualized instruction.

INS4. Practitioners plan for and provide the level of support, accommodations, and adaptations needed for the child to access, participate, and learn within and across activities and routines.

INS5. Practitioners embed instruction within and across routines, activities, and environments to provide contextually relevant learning opportunities.

INS6. Practitioners use systematic instructional strategies with fidelity to teach skills and to promote child engagement and learning.

INS7. Practitioners use explicit feedback and consequences to increase child engagement, play, and skills.

INS9. Practitioners use functional assessment and related prevention, promotion, and intervention strategies across environments to prevent and address challenging behavior.

INS10. Practitioners implement the frequency, intensity, and duration of instruction needed to address the child's phase and pace of learning or the level of support needed by the family to achieve the child's outcomes or goals.

INS13. Practitioners use coaching or consultation strategies with primary caregivers or other adults to facilitate positive adult-child interactions and instruction intentionally designed to promote child learning and development.

RECOMMENDED PRACTICE: INTERACTION

INT1. Practitioners promote the child's social-emotional development by observing, interpreting, and responding contingently to the range of the child's emotional expressions.

INT2. Practitioners promote the child's social development by encouraging the child to initiate or sustain positive interactions with other children and adults during routines and activities through modeling, teaching, feedback, or other types of guided support.

INT3. Practitioners promote the child's communication development by observing, interpreting, responding contingently, and providing natural consequences for the child's verbal and non-verbal communication and by using language to label and expand on the child's requests, needs, preferences, or interests.

INT4. Practitioners promote the child's cognitive development by observing, interpreting, and responding intentionally to the child's exploration, play, and social activity by joining in and expanding on the child's focus, actions, and intent.

INT5. Practitioners promote the child's problem-solving behavior by observing, interpreting, and scaffolding in response to the child's growing level of autonomy and self-regulation.

RECOMMENDED PRACTICE: TEAMING & COLLABORATION

TC1. Practitioners representing multiple disciplines and families work together as a team to plan and implement supports and services to meet the unique needs of each child and family.

TC3. Practitioners use communication and group facilitation strategies to enhance team functioning and interpersonal relationships with and among team members.

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GLOSSARY

Baseline data - information gathered from multiple sources to better understand the target behavior, before using an intervention or practice; data collected on current performance level prior to implementation of intervention

Fidelity - how well and how often the implementation steps for an evidence-based practice are followed

Generalization - the ability to use learned skills in new and different environments

Goal - throughout these modules, "goal" is used to refer to child and family goals and outcomes as indicated on an IFSP

Implementation checklist - the specific steps needed to accurately follow an evidence-based practice

Interfering behavior - a behavior that interferes with the learner's ability to learn

Modeling (MD) - an evidence-based practice that involves the learner observing someone correctly performing a target behavior

Naturalistic intervention (NI) - an evidence-based practice that integrates the principles of applied behavior analysis (ABA) into the natural environment or into a learner's everyday routines and activities

Parent-Implemented Intervention (PII) - an evidence-based practice that focuses on including parents in all steps of the implementation process while applying a cycle of coaching to ensure successful implementation

Prompting (PP) - an evidence-based practice in which the parent provides specific directions or arrangements of the context before the skill/behavior occurs to promote the toddlers use of the skill/behavior; prompts can be verbal, gestural, or physical

Prompting hierarchy - the continuum of prompting used to support a learner in acquiring new skills

Provider - throughout these modules, "provider" is used to refer to any early intervention provider including community-based rehabilitation service providers, early interventionists, developmental therapists, early intervention specialists, speech-language pathologists, occupational therapists, and physical therapists, among others

Reinforcement (R) - an evidence-based practice that provides feedback that increases the use of a strategy or target behavior/skill

Toddler - throughout these models, "toddler" is used to refer to a child with autism, language disorder, developmental delay, or social communication needs

Visual Supports (VS) - an evidence-based practice that provides concrete cues that are paired with, or used in place of, a verbal cue to provide the learner with information about a routine, activity, behavioral expectation, or skill demonstration

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