Implementation of recommended practices continues to be a struggle for early interventionists.

Brady, Peters, Gamel-McCormick, & Venuto, 2004; Brorson, 2005; Bruder, 2007; Bruder & McWilliam, 2010; Campbell & Sawyer, 2007; McWilliam & Bruder, 2007; Stremel & Campbell, 2007; Woods & Kashinath, 2007; Woods, Kashinath, & Goldstein, 2004

Even if your practices are on the “family routines” end, do you still find yourself sitting on the living room floor most of the time when supporting families? How do you get off the floor?

Consider this: most family routines DO NOT happen on the floor. Caregiving routines and play in other contexts offer rich opportunities for learning. How do you move from the floor to joining families in other activities?

Routines are not activities that the professional implements with the family. Instead, they are naturally occurring activities happening with some regularity, including caregiving events and simply hanging out times.

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Routines-Based Early Intervention McWilliam, 2010

"The child's outcomes must reflect the skills necessary to function in the routines and activities identified as important to the family."

Family Guided Routines-Based Intervention http://fgrbi.fsu.edu/model.html

SO HOW DO WE WEAVE intervention into what we do with families on visits?

• Ask good questions at the intake and early visits
• Gather functional information about everyday life at the assessment
• Develop a meaningful IFSP that is unique to the child’s and family’s interests & routines
• Continue to explore and join routines throughout your interactions with families

BEGIN BY FINDING OUT ABOUT FAMILY ROUTINES

WHERE ARE YOUR PRACTICES ON THE CONTINUUM?? TRADITIONAL of IN FAMILY ROUTINES?

Intervention Visits IN FAMILY ROUTINES

• On the FLOOR
  • Provider works with child
  • Shows parent what to do while parent watches
  • SKILL-BASED - Teaches skills child is missing using toys
  • Talks about strategies parent can use
  • Visits follow similar framework across families and time
  • Visits happen at same day/time each week

Interventions in family routines actually begin with the first contacts with families and continues throughout the IFSP development process.

VA EI Professional Development Center www.eipd.vcu.edu
EI Strategies for Success Blog www.eipd.vcu.edu/earlyintervention

WHICH 3 STRATEGIES ARE YOU PLANNING TO TRY WHEN YOU RETURN TO THE REAL WORLD??

• Using what they have
• Following the child/family’s lead
• Asking good questions
• Observing THEN joining in!

GET UP OFF THE FLOOR!

Where are YOUR practices on the continuum?? TRADITIONAL or IN FAMILY ROUTINES?

Are routine-based practices on the continuum??

Traditional method of “home” visiting persists. Previous studies report that a majority of the EI participants used a traditional service approach with families and children.

Campbell & Sawyer, 2009

WHERE IS IT IMPORTANT?

The gap between recommended practice in early intervention and what actually happens during intervention visits persists, despite the many intervention approaches (i.e., natural environments, participation-based intervention, family-guided routines-based intervention) described in the literature (Bruder, 2010; Sawyer & Campbell, 2009). Several reasons have been suggested for this gap, including difficulty in changing practitioners’ beliefs (Sawyer & Campbell, 2009) and a lack of operationalized descriptions of practices that help providers know what to do with different families and in different situations (Bruder, 2010). There has also been a misplaced view that professional standards do not support this approach. Without effective adoption of recommended practices, early intervention visits continue to look clinical in nature, occurring “on the floor” (McBride & Peterson, 1997) with the practitioner providing a child-focused intervention session while the parent observes. In an effort to address this gap, this poster session will focus on helping practitioners consider how to integrate routines-based intervention practices into their current work with children and families.