DRDP (2015)
An Early Childhood Developmental Continuum

Infant/Toddler View Introduction and Appendices
For use with infants and toddlers

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Introduction to the DRDP (2015)

Welcome to the Desired Results Developmental Profile (2015) [DRDP (2015)]: An Early Childhood Developmental Continuum. The DRDP (2015) is a formative assessment instrument developed by the California Department of Education for young children and their families used to inform instruction and program development.

Key Features of the DRDP (2015):

- The DRDP (2015) is administered in natural settings through teacher observations, family observations, and examples of children's work. Ongoing documentation of children's knowledge and skills in everyday environments is a recommended practice for early childhood assessment.
- The DRDP(2015) represents a full continuum of development from early infancy up through early kindergarten. It has two views: the Infant/Toddler view for use with children in infant/toddler programs, and the Preschool View, for children in preschool programs.
- The Preschool View has two forms: The Comprehensive View containing domains related to all areas of the Preschool Learning Foundations; and the Fundamental View, associated with essential domains of school readiness.
- The DRDP (2015) is designed for use with all children from early infancy up to kindergarten entry, including children with Individualized Family Service Plans (IFSPs) and Individualized Education Programs (IEPs).
- The DRDP (2015) takes into consideration the specific cultural and linguistic characteristics of California's diverse population of young children, with specific consideration for children who are young dual language learners (see section below).
- The DRDP (2015) was developed with the goal of ensuring that all children have the opportunity to demonstrate their knowledge and skills. To enable access to the assessment for diverse populations, the principles of Universal Design were followed.
- The DRDP (2015) includes domains that meet the federal Office of Special Education Programs (OSEP) child outcome reporting requirements for children with Individualized Family Service Plans (IFSPs) or Individualized Education Programs (IEPs).

Information about Selected Key Features

Three of these key features: (1) consideration of young children who are dual language learners, (2) universal design and adaptations for children with IFSPs and IEPs, and (3) a detailed description of the developmental domains that make up the instrument, are described in more detail to help teachers and service providers better understand and rate the measures of the DRDP (2015).

Young Dual Language Learners and the DRDP (2015)

Dual language learners are children learning two or more languages at the same time, as well as those children learning a second language while continuing to develop their first (or home) language. A child's experience with one or more languages is an asset to build on in the early childhood setting. It is critical to consider the child's communication in all the languages that he or she is learning in order to have an accurate picture of a child's knowledge and skills. Young children, including children with disabilities, can successfully learn two or more languages. Learning two or more languages has linguistic, social, cognitive, academic, and cultural benefits. The path to learning one language shares many similarities with the path to learning two or more languages. There are also differences that must be taken into consideration when assessing young children who are dual language learners. Children may have vocabulary for concepts in one language and vocabulary for other concepts in another language. So it is important to assess children in all of the languages he or she understands and uses. The DRDP (2015) addresses cultural and linguistic responsiveness in two primary ways:

1. Teachers and service providers observe and document children's behavior in both the home language and English to obtain a more accurate profile of the children's knowledge and skills across developmental domains.

2. Teachers and service providers rate children's progress on two language development domains. The Language and Literacy Development (LLD) domain assesses all children's progress in developing foundational language and literacy skills where ratings should be based on skills in all languages. The English-Language Development (ELD) domain assesses current knowledge and skills and progress in learning to communicate in English.

Universal Design and the DRDP (2015)

In the context of assessment, "Universal Design" refers to the development of assessments that are appropriate for all children to the greatest extent possible. Universal Design allows children the opportunity to demonstrate their knowledge and skills in a variety of ways. All young children are entitled access to, and meaningful participation in, age-appropriate, individually-appropriate and culturally-appropriate early childhood curricula and assessments. Teachers and service providers support children's access and participation by identifying and providing learning opportunities, materials, and teaching strategies in flexible and individualized ways and through a variety of learning modalities. DRDP (2015) assessors apply universal design when they carefully consider the various ways young children can demonstrate knowledge or skills that reflect mastery of a developmental level.
The Eight Domains of the DRDP (2015)
The DRDP (2015) is made up of eight domains. The focus of each domain is on the acquisition of knowledge, skills, or behaviors that reflect each domain’s developmental constructs. The domains and sub-domains of the Fundamental View, essential to school readiness, are marked with an asterisk (*).

Approaches to Learning–Self-Regulation* (ATL-REG)
The ATL-REG domain assesses two related areas that are recognized as important for young children’s school readiness and success: Approaches to Learning and Self-Regulation. These areas have been combined into one domain because of the strong connections between them. The Approaches to Learning skills include attention maintenance, engagement and persistence, and curiosity and initiative. The Self-Regulation skills include self-comforting, self-control of feelings and behavior, imitation, and shared use of space and materials.

Social and Emotional Development* (SED)
The SED domain assesses children’s developing abilities to understand and interact with others and to form positive relationships with nurturing adults and their peers. The knowledge or skill areas in this domain include identity of self in relation to others, social and emotional understanding, relationships and social interactions with familiar adults, relationships and interactions with peers, and symbolic and sociodramatic play.

Language and Literacy Development* (LLD)
The LLD domain assesses the progress of all children in developing foundational language and literacy skills. These skills can be demonstrated in any language and in any mode of communication. Language and literacy skills in a child’s first language form the foundation for learning English. Therefore, dual language learners may demonstrate knowledge and skills in their home language, in English, or in both languages. LLD measures should be completed for all infants, toddlers, and preschool-age children, including those who are dual language learners.

English-Language Development* (ELD)
The ELD domain assesses the progress of children who are dual language learners in learning to communicate in English. The developmental progression described in the four ELD measures is related to the child’s experiences with English, not the child’s age. Keep in mind that children acquire English in different ways and at different rates. Factors that affect English acquisition include degree of exposure to English, level of support provided in their home/first language, and individual differences such as age of exposure to English or the structure of the child’s home/first language. The ELD measures should be completed only for preschool-age children whose home language is other than English.

Cognition, Including Math* and Science (COG)
The COG domain focuses on observation, exploration of people and objects, and investigation of objects and concepts. The knowledge or skill areas in this domain include spatial relationships, cause and effect, classification, number sense of quantity, number sense of math operations, measurement, patterning, shapes, inquiry through observation and investigation, documentation and communication of inquiry, and knowledge of the natural world.

Physical Development–Health* (PD-HLTH)
The PD-HLTH domain assesses motor development and the development of routines related to personal care, safety, and nutrition. The knowledge or skill areas in this domain include perceptual-motor skills and movement concepts, gross locomotor movement skills, gross motor manipulative skills, fine motor manipulative skills, active physical play, nutrition, safety, and personal care routines (hygiene, feeding, dressing).

History-Social Science (HSS)
The HSS domain focuses on learning about the expectations of social situations, how to participate within a group, and the relationship between people and the environment in which they live. The knowledge or skill areas in this domain include sense of time, sense of place, ecology, conflict negotiation, and responsible conduct.

Visual and Performing Arts (VPA)
The VPA domain focuses on awareness and engagement in four areas of artistic expression. The knowledge or skill areas in this domain include visual art, music, drama, and dance.

About the Measures of the DRDP (2015)
The levels for each DRDP (2015) measure describe a developmental continuum, ranging from earlier developing to later developing competencies. The DRDP (2015) includes three types of continua:

- **Full Continuum Measures**: describe development from early infancy to early kindergarten. These measures should be used with all infants, toddlers, and preschool-age children.
- **Earlier Development Measures**: describe development that typically occurs from early infancy through early preschool ages and may be used with preschool-age children under specific conditions (identified as Conditional measures).
- **Later Development Measures**: describe development that typically occurs from early preschool ages to early kindergarten. These measures should be used with all preschool-age children.
Conditional Measures for Preschool-Age Children

Some measures in the DRDP Preschool View are considered conditional measures that are only assessed when certain conditions are met. These measures should be used if they assist teachers and service providers in planning a child’s learning activities and supports, and documenting progress.

Conditional measures are used in three instances:

- If a preschool child has not developmentally moved beyond the four earlier-development measures.
- If a language other than English is spoken in the child’s home.
- If the child is still working on the health measures (required for all children with IEPs).

Please note that the Earlier Development Measures, and the Physical Development and Health measures are required for children with IEPs.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Conditions Under Which to Assess</th>
</tr>
</thead>
<tbody>
<tr>
<td>Earlier Development Measures</td>
<td></td>
</tr>
<tr>
<td>ATL-REG 1: Attention Maintenance</td>
<td>- Required for all infants and toddlers</td>
</tr>
<tr>
<td>ATL-REG 2: Self-Comforting</td>
<td>- Required for all preschool-age children with IEPs</td>
</tr>
<tr>
<td>ATL-REG 3: Imitation</td>
<td>- Recommended for a preschool-age child whose development is not beyond the latest developmental level</td>
</tr>
<tr>
<td>COG 1: Spatial Relationships</td>
<td>- If useful, select any or all of these four measures to assess</td>
</tr>
<tr>
<td>English-Language Development Measures</td>
<td></td>
</tr>
<tr>
<td>ELD 1: Comprehension of English (Receptive English)</td>
<td>- Used if a language other than English is spoken in the child’s home as indicated on the Information Page</td>
</tr>
<tr>
<td>ELD 2: Self-Expression in English (Expressive English)</td>
<td>- Used only with preschool-age children</td>
</tr>
<tr>
<td>ELD 3: Understanding and Response to English Literacy Activities</td>
<td>- Not used with children who are deaf or hard of hearing and not learning spoken language</td>
</tr>
<tr>
<td>ELD 4: Symbol, Letter, and Print Knowledge in English</td>
<td>- If rated, complete all of the measures in the ELD domain*</td>
</tr>
<tr>
<td>Physical Development and Health Measures</td>
<td></td>
</tr>
<tr>
<td>PD-HLTH 5: Safety</td>
<td>- Required for all infants and toddlers except PD-HLTH 9 and 10 which are for preschool children only</td>
</tr>
<tr>
<td>PD-HLTH 6: Personal Care Routines: Hygiene</td>
<td>- In the Comprehensive View, PD-HLTH 7 and 8 are conditional. In the Fundamental View, PD-HLTH 5-8 and PD-HLTH 10 are conditional.</td>
</tr>
<tr>
<td>PD-HLTH 7: Personal Care Routines: Feeding</td>
<td>- Required for all preschool-age children with IEPs</td>
</tr>
<tr>
<td>PD-HLTH 8: Personal Care Routines: Dressing</td>
<td>- Recommended for preschool children when this information would be useful for documenting progress or planning this child’s learning activities and supports</td>
</tr>
<tr>
<td>PD-HLTH 10: Nutrition</td>
<td></td>
</tr>
</tbody>
</table>

*Guidance for rating ELD measures for children who are dual language learners is provided in the section, “Young Dual Language Learners and the DRDP (2015)” on page Intro-2. 

The Developmental Levels

The number of levels in a measure varies depending on the competencies that are appropriate for that measure’s developmental continuum. The levels are organized under four categories from early infancy up to kindergarten entry: Responding, Exploring, Building, and Integrating:

**Responding (Earlier, Later)**

Knowledge, skills, or behaviors that develop from basic responses (through using senses and through actions) to differentiated responses. Children generally engage in back-and-forth interactions with familiar adults and communicate through nonverbal messages.

**Exploring (Earlier, Middle, Later)**

Knowledge, skills, or behaviors that include active exploration including purposeful movement, purposeful exploration and manipulation of objects, purposeful communication, and the beginnings of cooperation with adults and peers. Children generally begin this period by using nonverbal means to communicate and, over time, grow in their ability to communicate verbally or use other conventional forms of language.

**Building (Earlier, Middle, Later)**

Knowledge, skills, or behaviors that demonstrate growing understanding of how people and objects relate to one another, how to investigate ideas, and how things work. Children use language to express thoughts and feelings, to learn specific early literacy and numeracy skills, and to increasingly participate in small group interactions and cooperative activities with others.

**Integrating (Earier)**

Knowledge, skills, or behaviors that demonstrate the ability to connect and combine strategies in order to express complex thoughts and feelings, solve multi-step problems, and participate in a wide range of activities that involve social-emotional, self-regulatory, cognitive, linguistic, and physical skills. Children begin to engage in mutually supportive relationships and interactions.

Note that the developmental levels for the ELD domain differ from the above format as they represent the developmental progression for the acquisition of English as a second language during the early childhood years.
Definitions of Terms in the Navigation Maps

Developmental Domain: A crucial area of learning and development for children.

Measure: The developmental continuum along which a child’s observed behavior is assessed. Measures are the individual assessment items in the DRDP.

- Full Continuum Measure: Describes development from early infancy to early kindergarten.
- Early Development Measure: Describes development that typically occurs in infancy/toddler and early preschool years.
- Later Development Measure: Describes development that typically occurs in the preschool years and early kindergarten.

Definition: Specifies the aspects of development to be observed.

Developmental Level: A point along a developmental progression for a particular measure that ranges from earlier to later levels of development.

Descriptor: Defines the behaviors that would be observed for a child at that developmental level.

Example: Specific behaviors you might see that would demonstrate that a child has reached mastery of a particular developmental level. Note that the examples provided in the DRDP are not the only way a child can demonstrate mastery of a developmental level.

Example of an Earlier Developmental Measure

Mark the latest developmental level the child has mastered:

Developmental Domain: ATL-REG — Approaches to Learning—Self-Regulation

Measure: Attention Maintenance

Conditioned Measure: No Later Levels

No Later Levels

Examples

Child is emerging to the next developmental level

Unable to rate this measure due to extended absence

Example of a Later Developmental Measure

Mark the latest developmental level the child has mastered:

Developmental Domain: PD-HLTH 2: Gross Locomotor Movement Skills

Measure: Developmental Levels

Conditioned Measure: Examples

Not Yet at the Earliest Developmental Level

Examples

Child is not yet at the earliest developmental level on this measure

Child is emerging to the next developmental level

Unable to rate this measure due to extended absence

Example of an Earlier Developmental Measure

Mark the latest developmental level the child has mastered:

Developmental Domain: PD-HLTH 2: Gross Locomotor Movement Skills

Measure: Developmental Levels

Conditioned Measure: Examples

Not Yet at the Earliest Developmental Level

Examples

Child is not yet at the earliest developmental level on this measure

Child is emerging to the next developmental level

Unable to rate this measure due to extended absence

Example of a Later Developmental Measure

Mark the latest developmental level the child has mastered:

Developmental Domain: PD-HLTH 2: Gross Locomotor Movement Skills

Measure: Developmental Levels

Conditioned Measure: Examples

Not Yet at the Earliest Developmental Level

Examples

Child is not yet at the earliest developmental level on this measure

Child is emerging to the next developmental level

Unable to rate this measure due to extended absence
The 3 Steps to Completing the DRDP (2015)

Step 1: Observation and Documentation

The DRDP (2015) focuses on the child’s behavior, knowledge, and skills. To capture a child’s behavior, the DRDP (2015) incorporates observation in natural settings.

While observing and collecting documentation, remember that words, phrases, and sentences can be communicated and understood in a variety of ways, including spoken in the child’s home language, signed, and through other communication modes (e.g., via a communication device). The teacher’s and service provider’s direct observations of a child are the primary method used to inform ratings and they should also use other sources of evidence to capture a more complete picture of a child’s knowledge and skills. Other sources of evidence include the following:

- **Observations by others** – including teachers, family members/caregivers, and other service providers or caregivers, obtained through interview or conversations
- **Other documentation** – including samples of children’s work, photographs, and video/audio recordings of children’s communication and behavior

Observations should occur over time, in typical settings:

- In the child’s typical program or settings such as child care, classrooms, or home;
- As the child interacts in familiar environments and routines with people he or she knows; and
- As the child engages in typical activities and routines.

The Important Role of Families in the Documentation Process

Family members have repeated opportunities to observe their child’s activities and interactions over time and in a variety of situations. Their perspectives, combined with teachers’ and service providers’ observations, provide a more complete and reliable picture of a child’s typical behaviors. Inviting family members to share observations of their child’s development and behavior is a recommended practice for the DRDP (2015). The opportunity to observe a child’s level of mastery is greatest when the child is interacting with a familiar adult. Because of this, it is helpful to observe a child interacting with family members. This is especially true for children who are new to a program or at the earliest levels (Responding Earlier and Responding Later). These observations can inform assessment decisions for all domains. They are particularly important for the SED and LLD domains since social interaction and communication skills are learned through repeated interactions with familiar adults.

Observation and Documentation for Young Dual Language Learners

Young dual language learners may demonstrate knowledge and skills in their home language, in English, or in both languages. They may also code-switch, which is using more than one language within a conversation. Therefore, communication in all languages the child uses should be considered when collecting documentation and completing the measures in all domains. The adult who is conducting observations and collecting documentation should speak the child’s home language. If not, the adult must receive assistance from another adult, who does speak the child’s home language. This may be an assistant teacher, director, parent, or other adult who knows the child.

Dual Language Learners’ Use of Code Switching

- Code switching is the use of multiple languages within a single conversation. It is a typical feature of learning two or more languages.
- As early as three years of age, children code switch to playfully experiment with the two languages and to serve their own social and communication goals. For example, children may code switch to emphasize or elaborate a point.
- Children might code switch when speaking with one person, or may use one language exclusively with one person and another language with another person.
- When children mix their two languages they use the grammatical rules of each language. For example, “I want leche” (“I want milk”) is an example of inserting a Spanish noun into a grammatically correct English sentence.

Using Adaptations

Adaptations are changes in the environment or differences in observed behavior that allow children with IFSPs or IEPs to demonstrate their knowledge and skills in typical environments. Seven broad categories of adaptations have been identified for children with IFSPs and IEPs for the DRDP (2015).

- The adaptations listed in the table below have been developed so that the assessment will more accurately measure a child’s abilities rather than the impact of a child’s disability (a more detailed description of the adaptations appears in Appendix D). Adaptations must be in place for the child during the normal course of the day, and they should also be in place during observations for the DRDP (2015). Everyone working with the child should be informed of any adaptations the child uses.
- New adaptations must not be introduced solely for the purpose of conducting the DRDP (2015) assessment.
- Consideration of adaptations should be made on a regular basis from early infancy and as the child develops and grows.
Seven Categories of Adaptations

**Augmentative or Alternative Communication System**
Methods of communication other than speech that allow a child who is unable to use spoken language to communicate with others.

**Alternative Mode for Written Language**
Methods of reading or writing used by a child who cannot see well enough to read or write or cannot hold and manipulate a writing utensil (e.g., pencil, pen) well enough to produce written symbols.

**Visual Support**
Adjustments to the environment that provide additional information to a child who has limited or reduced visual input.

**Assistive Equipment or Device**
Tools that make it possible or easier for a child to perform a task.

**Functional Positioning**
Strategic positioning and postural support that allow a child to have increased control of his body.

**Sensory Support**
Increasing or decreasing sensory input to facilitate a child's attention and interaction in the environment.

**Alternative Response Mode**
Recognition that a child might demonstrate mastery of a skill in a unique way that differs from the child's typically developing peers.

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**Step 2: Rating the Measures**

**Determining the Child’s Latest Level of Mastery**
For each of the measures, determine the latest developmental level the child has mastered, and mark it appropriately.

**The Descriptors and Examples**
Consider the descriptors first, and then the examples, to determine which developmental level is most consistent with your observations and other documentation of the child's typical behavior. A child may demonstrate behaviors at more than one developmental level. Choose the level that most closely represents the knowledge, skills, or behaviors the child demonstrates most consistently.

**Descriptors:**
The descriptors define the knowledge, skills, or behaviors expected at each level along the developmental continuum of the measure (see Navigation Maps). Each descriptor is illustrated by several examples of behaviors that are consistent with that developmental level.

Most of the descriptors define discrete knowledge, skills, or behaviors. However, some include more than one behavior or skill, separated by “and,” “or,” or a semicolon (;) followed by “and.”

**If the descriptor includes “or”:**
The child only needs to demonstrate the behavior in one of the listed ways to demonstrate mastery for the developmental level. Either part of the descriptor may be observed to rate mastery at that level.

- For example, the descriptor for Exploring Later in LLD 5: Interest in Literacy is:
  
  **Looks at books on own briefly or** Chooses to join reading, singing, or rhyming activities led by an adult

If the child EITHER looks at books on own briefly OR chooses to join reading, singing, or rhyming activities led by an adult, mastery can be rated at this level.

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**What is Mastery?**
A developmental level is mastered if the child demonstrates the knowledge, skills, and behaviors defined at that level:

- Consistently over time
- In different situations or settings

**Important notes about mastery:**
- Children may demonstrate mastery of knowledge and skills through a variety of communication modes, languages, and behaviors.
- Many of the behaviors that you observe in determining a child’s mastery level may not appear on the list of examples, although they are consistent with the descriptor.
If a descriptor includes “and”:

All parts of the descriptor are required for mastery and need to be observed together.

• For example, the descriptor for Building Earlier in ATL-REG 2: Self-Comforting is:
  Anticipates need for comfort and prepares self by asking questions, getting a special thing, or in other ways.

The child needs to demonstrate both anticipating a need for comfort and preparing self during the same observation.

If a descriptor includes a semi-colon (;) followed by “and”:

The child must demonstrate all the behaviors listed to rate the level as mastered, but not necessarily during the same observation within a DRDP rating period.

• For example, the descriptor for Exploring Later in SED 3: Relationships and Social Interactions with Familiar Adults is:
  Initiates activities with familiar adults; and Seeks out assistance or support from familiar adults.

To be rated as mastered at this level, the child must BOTH initiate activities with familiar adults AND seek out assistance or support from familiar adults. The assessor does not have to observe both behaviors during the same observation within a DRDP rating period.

Please note that key terms and phrases in the descriptors that may be new or have specific meaning to the measures are defined in the Glossary at the end of the instrument.

Examples:

Keep in mind these important points about examples:

• The examples are not a checklist of what the child must demonstrate to be rated at mastery of the knowledge, skills, or behaviors that reflect a developmental level.
• An example is one of many possible ways a child might demonstrate mastery of a developmental level. Teachers and service providers will identify other examples as they conduct their observations.
• Mastery is determined over time and across situations or settings.
• A child may not demonstrate any of the specific examples provided for a developmental level, but may demonstrate mastery in other ways that are consistent with the intent of the descriptor.
• Children demonstrate mastery in diverse and sometimes unique ways.
• Examples have not been written to include all areas of disability. Universal design is intended to support the inclusion of children with disabilities on the DRDP (2015). However, it is important to review the adaptations as well as understand the construct being measured when assessing children with disabilities.

Additional Rating Options

Emerging to the Next Developmental Level:
If your observations indicate that the child has demonstrated mastery for a developmental level and is also beginning to demonstrate knowledge, skills, or behaviors described for the next level (although not yet consistently across situations or settings), the child may be emerging to the next level.

To indicate emerging:

• First, mark the developmental level the child has mastered.
• Then, mark “emerging” if the child also demonstrates behaviors described for the next developmental level.

Notes about Emerging:

• You may mark emerging when rating full-continuum measures with infants and toddlers if the child has mastered the last level that can be rated and the child demonstrates some behaviors in the level that follows.
• Do not mark emerging if the child has mastered the latest level on a measure.
• Marking that the child is emerging to the next level does not affect the rating of mastery for the measure.

Child is Not Yet at the Earliest Developmental Level on a Later Development Measure:
If, after careful consideration, you determine that a preschool-age child is not yet demonstrating mastery of the earliest level of a later development measure, mark “Child is not yet at the earliest developmental level on this measure.”

Unable to Rate due to extended absence:

• This is used only when the child is absent from the program for such an extended period of time during the four to six weeks prior to submitting your DRDP data that you could not gather information to rate the measures.
• The following are NOT valid reasons to indicate Unable to Rate:
  o Not having enough time or enough information
  o The nature of a child’s disability or the severity of a child’s disability

The Responding Earlier level is designed to be inclusive of all children. Mark this earliest level unless the child demonstrates skills at a later level. Do not use Unable to Rate because you feel a child does not demonstrate the skills for the earliest level.
### Rating Conditional Measures

If you are using the conditional measures for a preschool-age child, mark them on the Rating Record according to the following guidance:

<table>
<thead>
<tr>
<th>Measure</th>
<th>How to Mark the DRDP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Earlier Development Measures</strong></td>
<td></td>
</tr>
<tr>
<td>ATL-REG 1: Attention Maintenance</td>
<td>• These measures are required for all preschool-age children with IEPs</td>
</tr>
<tr>
<td>ATL-REG 2: Self-Comforting</td>
<td>• If the measure is rated, determine the child’s latest level of mastery and mark accordingly</td>
</tr>
<tr>
<td>ATL-REG 3: Imitation</td>
<td>• If the measure is not rated, mark the box, “Measure not rated: this child’s development is beyond the latest developmental level”</td>
</tr>
<tr>
<td>COG 1: Spatial Relationships</td>
<td></td>
</tr>
<tr>
<td><strong>English-Language Development Measures</strong></td>
<td></td>
</tr>
<tr>
<td>ELD 1: Comprehension of English (Receptive English)</td>
<td>• If these measures are rated, determine the child’s latest level of mastery and mark accordingly</td>
</tr>
<tr>
<td>ELD 2: Self-Expression in English (Expressive English)</td>
<td>• Check the box on the Information Page about the child’s home language</td>
</tr>
<tr>
<td>ELD 3: Understanding and Response to English</td>
<td>• Not required for children who are deaf or hard of hearing who are not learning a spoken language</td>
</tr>
<tr>
<td>Literacy Activities</td>
<td>• If these measures are not rated, mark the box, “Measure not rated: English is the only language spoken in this child’s home”</td>
</tr>
<tr>
<td>ELD 4: Symbol, Letter, and Print Knowledge in English</td>
<td></td>
</tr>
<tr>
<td><strong>Physical Development and Health Measures</strong></td>
<td></td>
</tr>
<tr>
<td>PD-HLTH 5: Safety</td>
<td>• These measures are required for preschool-age children with IEPs</td>
</tr>
<tr>
<td>PD-HLTH 6: Personal Care Routines: Hygiene</td>
<td>• In the Comprehensive View, PD-HLTH 7 and 8 are conditional. In the Fundamental View, PD-HLTH 5-8 and PD-HLTH 10 are conditional.</td>
</tr>
<tr>
<td>PD-HLTH 7: Personal Care Routines: Feeding</td>
<td>• If these measures are rated, determine the level of mastery and mark accordingly</td>
</tr>
<tr>
<td>PD-HLTH 8: Personal Care Routines: Dressing</td>
<td>• If these measures are not rated, check the box, “I did not rate this measure because it is not used for documenting progress or planning this child’s learning activities and supports”</td>
</tr>
<tr>
<td>PD-HLTH 10: Nutrition</td>
<td></td>
</tr>
</tbody>
</table>

### Step 3: Finalize the Assessment

To finalize, simply review the assessment to make sure that you have entered a rating for all of the measures and that the Information Page is complete and up-to-date:

- For EESD programs: enter your ratings into DRDPtech,
- For SED programs: enter your ratings into your MIS system for your SELPA’s CASEMIS submission. Check with your administrator for when and to whom your Rating Records are due.
### Child Information

2. **Statewide Student Identifier (10-digit SSID):**

3. **Agency Identifier:**
   (agency identifier and statewide student identifier can be the same)

4. **Child's classroom or setting:**

5. **Birth date** (mm/dd/yyyy): _____ / _____ / ______

6. **Gender**
   - □ Male
   - □ Female

7. **Initial date of enrollment in early childhood program** (mm/dd/yyyy): _____ / _____ / ______

8a. **What is this child's ethnicity?**
   - □ Yes, Hispanic or Latino
   - □ No, not Hispanic or Latino

8b. **What is this child's race?**
   - □ Asian Indian
   - □ Black or African-American
   - □ Cambodian
   - □ Chinese
   - □ Filipino
   - □ Guamanian
   - □ Hawaiian
   - □ Hmong
   - □ Japanese
   - □ Intentionally left blank
   - □ Korean
   - □ Laotian
   - □ Native American
   - □ Other Asian
   - □ Other Pacific Islander
   - □ Samoan
   - □ Tahitian
   - □ Vietnamese
   - □ White

### Observer Information

9. **Agency:** ________________________ **Site:** ________________________

10. **Your name:** ________________________ **Title:** ________________________

11. **Are you the primary teacher working with this child?**
   - □ Yes
   - □ No (specify your relationship to the child):

12. **Did another adult assist you with assessing this child?**
   - □ Yes (role/relation):
   - □ No
   - □ Not applicable (I understand and use the child's home language)

### Child’s Language Information

13. **Child's home language(s):**

14. **What language(s) do you speak with this child?**

15. **Did someone who understands and uses the child's home language assist you with completing the observation?**
   - □ Yes, role/relation:
   - □ No
   - □ Not applicable (I understand and use the child's home language)

16. **Child is enrolled in:**
   - □ State Infant/Toddler Program
   - □ State Preschool
   - □ Head Start
   - □ Early Head Start
   - □ Child Care Center
   - □ Other

### Child’s Tuition Fees

- □ Subsidized (tuition assistance)
- □ Not subsidized (full fee)
- □ Don't know
# Child Information

5. **Student ID** (issued by district for reporting to CASEMIS): 

6. **Statewide Student Identifier** (10-digit SSID): 

7. **Gender**
   - [ ] Male
   - [ ] Female

8. **Birth date** (e.g., 03/05/2012)
   - [ ] month
   - [ ] day
   - [ ] year

9. **Special education enrollment. Check one.**
   - [ ] Individualized Family Service Plan (IFSP)
   - [ ] Individualized Education Program (IEP)

# Child’s Language Information

10. **Child’s home language(s):**
   - [ ] English
   - [ ] Spanish
   - [ ] Vietnamese
   - [ ] Cantonese
   - [ ] Hmong
   - [ ] Tagalog/Pilipino
   - [ ] Other (specify) 

11. **Language(s) used with this child:**
   - [ ] English
   - [ ] Spanish
   - [ ] Vietnamese
   - [ ] Cantonese
   - [ ] Hmong
   - [ ] Tagalog/Pilipino
   - [ ] Other (specify)

12. **Is a language other than English spoken in the child’s home?**
   - [ ] Yes
   - [ ] No

If yes, complete the ELD measures for a preschool-age child.

If the child is Deaf or Hard of Hearing and not learning a spoken language, mark “No” and do not complete the ELD measures.

# Child’s Ethnicity

13a. **Is this child Hispanic or Latino? Check one.**
   - [ ] Yes, Hispanic or Latino
   - [ ] No, not Hispanic or Latino
   - [ ] Intentionally left blank

13b. **What is the race of this child? Check up to three.**
   - [ ] Asian Indian
   - [ ] Black or African-American
   - [ ] Cambodian
   - [ ] Chinese
   - [ ] Filipino
   - [ ] Guamanian
   - [ ] Hawaiian
   - [ ] Hmong
   - [ ] Japanese
   - [ ] Korean
   - [ ] Laotian
   - [ ] Native American
   - [ ] Other Asian
   - [ ] Other Pacific Islander
   - [ ] Samoan
   - [ ] Tahitian
   - [ ] Vietnamese
   - [ ] White
   - [ ] Intentionally left blank

# Special Education Information

14. **Special education eligibility. Check one.**
   - [ ] Autism
   - [ ] Deaf-Blindness
   - [ ] Deafness
   - [ ] Emotional Disturbance
   - [ ] Established Medical Disability
   - [ ] Hard of Hearing
   - [ ] Intellectual Disability
   - [ ] Multiple Disability
   - [ ] Orthopedic Impairment
   - [ ] Other Health Impairment
   - [ ] Speech or Language Disability
   - [ ] Specific Learning Disability
   - [ ] Traumatic Brain Injury
   - [ ] Visual Impairment

15. **Adaptations used in the assessment. Check all that apply.**
   - [ ] Augmentative or alternative communication system
   - [ ] Alternative mode for written language
   - [ ] Visual support
   - [ ] Assistive equipment or device
   - [ ] Functional positioning
   - [ ] Sensory support
   - [ ] Alternative response mode
   - [ ] None

# Program Information

16. **SELPA** 

17. **District of service**

# Assessment Information

18. **Name of person completing the assessment**

19. **Role of person completing the assessment:**
   - [ ] Early Intervention Specialist
   - [ ] Speech/Language Pathologist
   - [ ] Occupational/Physical Therapist
   - [ ] Teacher of the Deaf/Hard of Hearing
   - [ ] Program Specialist or Administrator
   - [ ] Teacher of the Visually Impaired
   - [ ] Special Education Teacher
   - [ ] Other

20. **Assistance completing the assessment?**
   - [ ] Yes
   - [ ] No

If yes, what is that person’s relationship to the child?
Quick Guide to Rating the Measures

1. Review your documentation/evidence.
   Review your own observation notes, observations from others (including teachers, family members/caregivers, and other service providers or caregivers, obtained through interview or conversations), and other documentation, including samples of children's work, photographs, and video/audio recordings of children's communication and behavior.

2. Carefully read the definition and the descriptors, looking for mastery.
   Read the descriptors before you read the examples. As you read the descriptors, try to narrow down which one is most consistent with your observations and other documentation of the child's typical behavior. A developmental level is mastered if the child demonstrates the knowledge, behaviors, and skills defined at that level:
   - Consistently over time
   - In different situations or settings

3. After you read the descriptors, consider the examples.
   The examples represent only some of the possible ways a child might demonstrate mastery. They are not a checklist of what the child must demonstrate. It is possible that a child does not demonstrate any of the specific examples provided, but does demonstrate mastery in other ways that are consistent with the intent of the descriptor.

4. Based on your careful reading of the descriptors and examples and a review of your documentation, determine the child's level of mastery.
   Once you've determined the latest developmental level the child has mastered, mark it appropriately.

5. Indicate if the child is emerging to the next level (when the option to mark emerging is available).
   If your observations indicate that the child has demonstrated mastery for a developmental level and is also beginning to demonstrate knowledge, skills, or behaviors described for the next level (although not yet consistently across situations or settings), the child may be emerging to the next level.

**Important Note:** When reading the descriptors, be sure you understand and pay attention to semicolons and the words “or” and “and.” Most descriptors define a single skill or behavior, but some include more than one. If the descriptor includes:

- The word “or,” the child only needs to demonstrate the behavior in one of the ways listed for the developmental level to be considered mastered.
- The word “and,” all parts of the descriptor are required for mastery and need to be observed together.
- A semi-colon (;) followed by the word “and,” the child must demonstrate all the behaviors listed to master the level, but not necessarily during the same observation.

Remember, the examples illustrate only some of the many ways a child may demonstrate mastery.
## DRDP (2015) Infant/Toddler View Rating Record

An Early Childhood Developmental Continuum

For use with infants and toddlers in Early Care and Education Programs and Special Education Programs

The Rating Record is to be used with the DRDP (2015) Instrument to keep track of each child’s developmental levels as you complete the assessment. Mark the developmental level the child has mastered for every measure.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Measure Name</th>
<th>Responding</th>
<th>Exploring</th>
<th>Building</th>
<th>Integrating</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Earlier</td>
<td>Later</td>
<td>Earlier</td>
<td>Middle</td>
</tr>
<tr>
<td>ATL-REG 1</td>
<td>Attention Maintenance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATL-REG 2</td>
<td>Self-Comforting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATL-REG 3</td>
<td>Imitation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATL-REG 4</td>
<td>Curiosity and Initiative in Learning</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATL-REG 5</td>
<td>Self-Control of Feelings and Behavior</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SED 1</td>
<td>Identity of Self in Relation to Others</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SED 2</td>
<td>Social and Emotional Understanding</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SED 3</td>
<td>Relationships and Social Interactions with Familiar Adults</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SED 4</td>
<td>Relationships and Social Interactions with Peers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SED 5</td>
<td>Symbolic and Sociodramatic Play</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>LLD 1</td>
<td>Understanding of Language (Receptive)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>LLD 2</td>
<td>Responsiveness to Language</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LLD 3</td>
<td>Communication and Use of Language (Expressive)</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>LLD 4</td>
<td>Reciprocal Communication and Conversation</td>
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</tr>
<tr>
<td>LLD 5</td>
<td>Interest in Literacy</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COG 1</td>
<td>Spatial Relationships</td>
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<td>COG 2</td>
<td>Classification</td>
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<tr>
<td>COG 3</td>
<td>Number Sense of Quantity</td>
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<td></td>
</tr>
<tr>
<td>COG 4</td>
<td>Cause and Effect</td>
<td></td>
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</tr>
<tr>
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<td>Inquiry Through Observation and Investigation</td>
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</tr>
<tr>
<td>COG 6</td>
<td>Knowledge of the Natural World</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PD-HLTH 1</td>
<td>Perceptual-Motor Skills and Movement Concepts</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>PD-HLTH 2</td>
<td>Gross Locomotor Movement Skills</td>
<td></td>
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<tr>
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<td>Gross Motor Manipulative Skills</td>
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<tr>
<td>PD-HLTH 4</td>
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<td></td>
<td></td>
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<tr>
<td>PD-HLTH 5</td>
<td>Safety</td>
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</tr>
<tr>
<td>PD-HLTH 6</td>
<td>Personal Care Routines: Hygiene</td>
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<tr>
<td>PD-HLTH 7</td>
<td>Personal Care Routines: Feeding</td>
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<tr>
<td>PD-HLTH 8</td>
<td>Personal Care Routines: Dressing</td>
<td></td>
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</tr>
</tbody>
</table>

Note: COG 4 - COG 7 and COG 10 are only for use for preschool-age children

---

Child’s Name (First and Last): ________________________________
EESD: Agency ID or SSID: ____________________________________
SED: Student ID or SSID: ____________________________________
Assessment Period (e.g., Fall 2016): ____________________________
Date DRDP (2015) was completed (e.g., 09/07/2016): ___________ / ___________ / ___________
## Measures at-a-Glance
### Infant/Toddler View

<table>
<thead>
<tr>
<th>Domain Name</th>
<th>Domain Abbreviation</th>
<th>Number within Domain</th>
<th>Measure Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approaches to Learning</td>
<td>ATL-REG</td>
<td>1</td>
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<td></td>
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<td>2</td>
<td>Self-Comforting</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
<td>Imitation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>Curiosity and Initiative in Learning</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Self-Control of Feelings and Behavior</td>
</tr>
<tr>
<td>Social and Emotional Development</td>
<td>SED</td>
<td>1</td>
<td>Identity of Self in Relation to Others</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Social and Emotional Understanding</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
<td>Relationships and Social Interactions with Familiar Adults</td>
</tr>
<tr>
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<td>4</td>
<td>Relationships and Social Interactions with Peers</td>
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<tr>
<td></td>
<td></td>
<td>5</td>
<td>Symbolic and Sociodramatic Play</td>
</tr>
<tr>
<td>Language and Literacy Development</td>
<td>LLD</td>
<td>1</td>
<td>Understanding of Language (Receptive)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Responsiveness to Language</td>
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<tr>
<td></td>
<td></td>
<td>3</td>
<td>Communication and Use of Language (Expressive)</td>
</tr>
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<td></td>
<td></td>
<td>4</td>
<td>Reciprocal Communication and Conversation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Interest in Literacy</td>
</tr>
<tr>
<td>Cognition, Including Math and Science</td>
<td>COG</td>
<td>1</td>
<td>Spatial Relationships</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Classification</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
<td>Number Sense of Quantity</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8</td>
<td>Cause and Effect</td>
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<td></td>
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<td>9</td>
<td>Inquiry Through Observation and Investigation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11</td>
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</tr>
<tr>
<td>Physical Development–Health</td>
<td>PD-HLTH</td>
<td>1</td>
<td>Perceptual-Motor Skills and Movement Concepts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Gross Locomotor Movement Skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
<td>Gross Motor Manipulative Skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>Fine Motor Manipulative Skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Safety</td>
</tr>
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<td></td>
<td></td>
<td>6</td>
<td>Personal Care Routines: Hygiene</td>
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<td></td>
<td></td>
<td>7</td>
<td>Personal Care Routines: Feeding</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8</td>
<td>Personal Care Routines: Dressing</td>
</tr>
</tbody>
</table>

Note: COG 4 - COG 7 and COG 10 are only for use for preschool-age children.
Glossary of Terms and Phrases Used in the DRDP (2015)

**Assemblage:** An artistic composition made from scraps, junk, or odds and ends.
Appears in VPA 1: Visual Art

**Investigates/Investigation:** In the process of scientific inquiry, asking a question and conducting systematic observations or simple experiments to find an answer.
Appears in:
COG 9: Inquiry Through Observation and Investigation
COG 10: Documentation and Communication of Inquiry

**Locomotor Skills:** The ability to project the body into or through space.
Appears in:
PD-HLTH 2: Gross Locomotor Movement Skills
PD-HLTH 3: Gross Motor Manipulative Skills

**Manipulative Skills:** Also known as object-control skills in which the arms, hands, legs, and feet are used to give force to an object (for example, throwing a ball) or to receive and absorb the force from an object (for example, catching a ball).
Appears in PD-HLTH 3: Gross Motor Manipulative Skills

**Observes / Observation:** Gathering information about objects and events by using the senses of sight, smell, sound, touch, and taste and noticing specific details or phenomena that ordinarily might be overlooked.
Appears in:
COG 9: Inquiry Through Observation and Investigation
COG 10: Documentation and Communication of Inquiry

**Onset:** The first consonant or consonant cluster in a syllable (e.g., the *h* in the one-syllable word *hat*; the *m* and *k* in the two syllables in the word *monkey*).
Appears in LLD 8: Phonological Awareness

**Rime:** A linguistic term that refers to the portion of a syllable that starts with a vowel. In the word *big*, the rime unit is /ig/. In the word *bring*, the rime unit is /ing/.
Appears in LLD 8: Phonological Awareness
Appendix

The following resources provide additional information for use of the DRDP (2015)

Appendix A: Requirements of the DRDP (2015) Assessment ......................................................... 17
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Appendix C: Strategies for Observation and Documentation................................................................. 20
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Appendix E: Resources for Working in Partnership with Families ..................................................... 23
Appendix F: Collaboration to Complete the DRDP (2015) .............................................................. 25
# Appendix A: Requirements of the DRDP (2015) Assessment

<table>
<thead>
<tr>
<th>Early Education and Support Division (EESD) Programs</th>
<th>Special Education Division (SED) Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Preschool Views as of July 1, 2016</strong></td>
<td><strong>The Fundamental View will be submitted to CASEMIS. The Comprehensive View is available for special educators as an instructional resource.</strong></td>
</tr>
<tr>
<td>• The Preschool View has two forms:</td>
<td></td>
</tr>
<tr>
<td>o The Comprehensive View, containing all of the</td>
<td></td>
</tr>
<tr>
<td>domains related to the Preschool Learning</td>
<td></td>
</tr>
<tr>
<td>Foundations.</td>
<td></td>
</tr>
<tr>
<td>o The Fundamental View, containing only the</td>
<td></td>
</tr>
<tr>
<td>domains essential to school readiness.</td>
<td></td>
</tr>
<tr>
<td>• Program administrators will determine which Preschool View will be utilized.</td>
<td></td>
</tr>
<tr>
<td>• Programs should use the same Preschool View for at least one school year in order to measure progress.</td>
<td></td>
</tr>
<tr>
<td><strong>Which children are assessed</strong></td>
<td></td>
</tr>
<tr>
<td>• All infants, toddlers and preschool age children receiving care in direct service programs, and other programs choosing to use a developmental assessment.</td>
<td></td>
</tr>
<tr>
<td>• If a child receives services for less than ten hours per week, a DRDP assessment is not required.</td>
<td></td>
</tr>
<tr>
<td>• All infants and toddlers with Individualized Family Service Plans (IFSPs) who are reported in the CASEMIS system.</td>
<td></td>
</tr>
<tr>
<td>• All preschool-age children (3 - 5-year-olds not enrolled in transitional kindergarten or kindergarten) who have Individualized Education Programs (IEPs).</td>
<td></td>
</tr>
<tr>
<td>• To be included in the fall assessment, children must begin services before <strong>October 1</strong>.</td>
<td></td>
</tr>
<tr>
<td>• To be included in the spring assessment, children must begin services before <strong>March 1</strong>.</td>
<td></td>
</tr>
<tr>
<td><strong>When children are assessed</strong></td>
<td></td>
</tr>
<tr>
<td>Child assessments are completed within the first 60 days of enrollment and then at six month intervals thereafter.</td>
<td></td>
</tr>
<tr>
<td>Children are assessed twice a year, fall and spring. Plan to submit data by December 1 for the fall and June 1 for the spring assessment.</td>
<td></td>
</tr>
<tr>
<td>Assessment should be conducted at six month intervals.</td>
<td></td>
</tr>
<tr>
<td>Check with local administrators as to how, when, and to whom DRDP data will be submitted.</td>
<td></td>
</tr>
<tr>
<td><strong>How children are assessed</strong></td>
<td></td>
</tr>
<tr>
<td>All children are assessed with the DRDP (2015):</td>
<td></td>
</tr>
<tr>
<td>• Children birth to three years of age are assessed with the Infant/toddler View</td>
<td></td>
</tr>
<tr>
<td>• Children three to five years of age are assessed with the Preschool View</td>
<td></td>
</tr>
<tr>
<td><strong>Where to submit DRDP data</strong></td>
<td></td>
</tr>
<tr>
<td>Assessment data is input to DRDPtech for secure data storage and to obtain psychometrically valid reports.</td>
<td></td>
</tr>
<tr>
<td>Submit data files to CDE/SED in one of two ways:</td>
<td></td>
</tr>
<tr>
<td>• Into the SELPA’s MIS that will upload to CASEMIS</td>
<td></td>
</tr>
<tr>
<td>• Into the DRAccessReports secure data system to prepare data for SELPA upload to CASEMIS</td>
<td></td>
</tr>
<tr>
<td><strong>How to obtain reports of results</strong></td>
<td></td>
</tr>
<tr>
<td>Psychometrically valid reports are available upon entry of assessment data into DRDPtech.</td>
<td></td>
</tr>
<tr>
<td>Psychometrically valid reports are available upon entry of assessment data from <a href="http://www.draccessreports.org">www.draccessreports.org</a></td>
<td></td>
</tr>
<tr>
<td>Coordination with local Management Information Systems is available. Contact <a href="mailto:reports@draccess.org">reports@draccess.org</a> for assistance.</td>
<td></td>
</tr>
</tbody>
</table>

The DRDP (2015) will be administered in both the California Department of Education’s Early Education and Support Division (EESD) programs and in Special Education Division (SED) early intervention and preschool programs. This table provides information about which children are assessed; and when, how, and where to submit the results of the DRDP (2015).

**For more information:**

- For CDE-funded Early Education programs: [www.cde.ca.gov/sp/cd/](http://www.cde.ca.gov/sp/cd/)
- For CDE-funded Special Education programs: [www.cde.ca.gov/sp/se/](http://www.cde.ca.gov/sp/se/)
- For EESD Training and Technical Assistance: Desired Results for Children and Families Project [www.desiredresults.us](http://www.desiredresults.us)
- For SED Training and Technical Assistance: Desired Results Access Project [www.draccess.org](http://www.draccess.org)
## Appendix B:
### Resources for Assessing Children who are Dual Language Learners with the DRDP (2015)

The DRDP (2015) takes into consideration the specific cultural and linguistic characteristics of California's diverse population of young children, with specific consideration for children who are young dual language learners. The introduction in the DRDP (2015) Assessment Manual provides information on completing the assessment with young children who are dual language learners. Keep in mind that young dual language learners may demonstrate knowledge and skills in their home language, in English, or in both languages. Communication in *all* languages the child uses should be considered when collecting documentation and completing the measures in all domains of the DRDP (2015).

The following resources will increase your knowledge and help you better complete the DRDP (2015) for young children who are dual language learners.

<table>
<thead>
<tr>
<th>From the California Department of Education</th>
<th>California's Best Practices for Young Dual Language Learners: Research Overview Papers</th>
<th><a href="http://www.cde.ca.gov/sp/cd/ce/documents/dllresearchpapers.pdf">www.cde.ca.gov/sp/cd/ce/documents/dllresearchpapers.pdf</a></th>
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<tbody>
<tr>
<td>Understanding Dual Language Development</td>
<td>Two papers in this series are particularly relevant:</td>
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<tr>
<td>Assessing Young Dual Language Learners</td>
<td>“Assessment of Young Dual Language Learners in Preschool” focuses on the need</td>
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<tr>
<td>English Language Development (ELD) Foundations</td>
<td>for accurate and valid assessment of young dual language learners. It includes</td>
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<tr>
<td>Supporting Dual Language Learners</td>
<td>a decision tree for practitioners to determine in which language to assess young</td>
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<td></td>
<td>DLLs, a matrix of language and literacy assessment for use with preschool-age</td>
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<td></td>
<td>children, and a sample family interview protocol to learn about families’</td>
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<td>language practices. “Early Intervention and Young Dual Language Learners with</td>
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<td></td>
<td>Special Needs” addresses the language development of young dual language</td>
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<td></td>
<td>learners with special needs and key considerations when choosing the</td>
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<td>language for intervention.</td>
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<tr>
<th>California Department of Education web pages:</th>
<th><a href="http://www.desiredresults.us/dll/index.html">www.desiredresults.us/dll/index.html</a></th>
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<tr>
<td>Understanding Dual Language Development</td>
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<td>Assessing Young Dual Language Learners</td>
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<tr>
<td>English Language Development (ELD) Foundations</td>
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<tr>
<td>Supporting Dual Language Learners</td>
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| Assessing Children with Disabilities who are Dual Language Learners | This document provides guidance in assessing children with disabilities from linguistically diverse backgrounds with the DRDP (2015) including information on second language acquisition in young children, suggestions for communicating with children who are English Learners, and information about cultural influences on learning. | draccess.org/DLLGuidance.html |
### From the Office of Head Start National Center on Cultural and Linguistic Responsiveness

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<thead>
<tr>
<th>Topic</th>
<th>Description</th>
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<tbody>
<tr>
<td>Gathering and Using Language: Information that Families Share</td>
<td>One-third of the children in Early Head Start and Head Start are Dual Language Learners (DLLs). Recent research provides insights into dual language development and key ways to support children’s progress.</td>
<td><a href="eclkc.ohs.acf.hhs.gov/hslc/tta-system/cultural-linguistic/fcp/docs/dll_background_info.pdf">eclkc.ohs.acf.hhs.gov/hslc/tta-system/cultural-linguistic/fcp/docs/dll_background_info.pdf</a></td>
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<tr>
<td>Code Switching: Why It Matters and How to Respond (Workbook for Early Head Start/Head Start Programs)</td>
<td>This easy to use workbook defines and describes code switching. It identifies which children code switch and explains why code switching matters. It also includes numerous examples of how adults can provide strong language models for children when they code switch.</td>
<td><a href="eclkc.ohs.acf.hhs.gov/hslc/tta-system/cultural-linguistic/code-switching.html">eclkc.ohs.acf.hhs.gov/hslc/tta-system/cultural-linguistic/code-switching.html</a></td>
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### From the National Association for the Education of Young Children (NAEYC)

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### From the Center for Early Care and Education Research – Dual Language Learners (CECER-DLL)

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<tr>
<th>Topic</th>
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<tbody>
<tr>
<td>Development of Infants and Toddlers Who Are Dual Language Learners</td>
<td>This paper reviews empirical research about the development of infants and toddlers who are dual language learners (DLLs) looking at formation of attachment relationships; development of motor skills; the foundation for executive functioning skills to regulate behaviors; huge advances in detection, comprehension, and production of language; and many more developmental accomplishments.</td>
<td><a href="fpg.unc.edu/resources/working-paper-2-development-infants-and-toddlers-who-are-dual-language-learners">fpg.unc.edu/resources/working-paper-2-development-infants-and-toddlers-who-are-dual-language-learners</a></td>
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### From the Council for Exceptional Children/Division for Early Childhood (DEC)

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<tr>
<td>YEC Monograph 14: Supporting Young Children who are Dual Language Learners with or at-risk for Disabilities</td>
<td>Considers contemporary perspectives about strategies to support young children who are dual language learners served in inclusive early childhood settings. Information included in this monograph will be immediately useful for practitioners and families and will demonstrate the value of thoughtfully and systematically approaching assessment, interventions, and services for the benefit of children who are dual language learners and their families.</td>
<td><a href="www.dec-spied.org/dll">www.dec-spied.org/dll</a></td>
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### From the Educational Testing Service (ETS)

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<th>Topic</th>
<th>Description</th>
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<tbody>
<tr>
<td>Enhancing Young Hispanic Dual Language Learners’ Achievement: Exploring Strategies and Addressing Challenges</td>
<td>This education policy report explores issues related to improving instruction in programs serving preschool-aged children focusing on young Hispanic dual language learners. Assessment is addressed in the section titled: Improving Teachers’ Practice through the Assessment of Young Dual Language Learners</td>
<td><a href="onlinelibrary.wiley.com/enhanced/doi/10.1002/ets2.12045/">onlinelibrary.wiley.com/enhanced/doi/10.1002/ets2.12045/</a></td>
</tr>
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Appendix C: Strategies for Observation and Documentation

The DRDP (2015) is administered through observation in natural settings by teachers and other service providers in the classroom or center and by family members in home and community settings. Observations are embedded into typical, ongoing routines and activities throughout the day. The process of observation requires planning in advance on the part of teachers and service providers. As you review the measures of the DRDP (2015), consider specific routines or activities during the day where you would be able to observe more than one measure or more than one child.

Strategies for Effective Observation

Observation should be ongoing throughout the year. The assessment windows for the DRDP (2015) provide a period of time to make sure teachers and service providers have sufficient documentation for each of the measures in time to submit DRDP data. To rate a child’s behavior, teachers and service providers should use naturalistic, or authentic, observation strategies. Below are several key points to support naturalistic observations. You will find additional information about naturalistic assessment by viewing the short video, What is Authentic Assessment at draccess.org/guidancefordrdp. Many observation and documentation job aids can be found at desiredresults.us/teachers. You will also find a training DVD, Getting to know You Through Observation, at desiredresults.us/observation-resources that can be used by EESD and other administrators to train staff.

Strategies for Effective Documentation

A variety of methods are available for recording information gathered through naturalistic observations, including:

- **Anecdotal Records** – An anecdotal record is a written note about what a child does or says during a typical or routine activity. Anecdotal records result in brief descriptions of the behavior observed.

- **Event recording (tallies)** – In event recording, the observer records each instance of the behavior being observed so that an indication of frequency is obtained. Usually this is done with tally marks but may also be recorded using a code such as “+” for correct and “-” for incorrect.

- **Checklists** – Checklists are lists of specific skills or behaviors that can be used during observation to check off the behaviors observed with a group of children.

- **Rating Scales or Rubrics** – Rating scales and rubrics are similar to checklists in that they include lists of behaviors but they also include additional descriptive information about the behavior such as how well, how frequently or how independently the behavior occurred.

10 Strategies for Naturalistic Observation

- **Know the instrument** – Be familiar with the instrument, including the domains and measures being observed.

- **Observe naturally** – Observe the child in the context of typical routines and activities, interacting with familiar people, in familiar places, and with familiar materials.

- **Observe objectively** – Focus on what the child does. Be as objective and detailed as possible. Avoid using labels, qualitative descriptors, or stereotypic expectations that may bias your observations.

- **Observe strategically** – Observe for skills that correspond to the DRDP measures and record your observations. You may be able to gather information on more than one measure during one observation.

- **Observe daily or routinely** – When observations are part of the daily routines, children become accustomed to being observed and seeing notes being recorded.

- **Observe variety and consistency** – Be aware of a child’s overall performance, even when focusing on a single aspect of behavior. Observe the child over time and during different routines and activities.

- **Be specific and complete** – Intentionally and purposefully record the specific details of what you actually observe as soon as possible. Details are important and might be easily forgotten.

- **Plan ahead** – Plan for observations as part of weekly lesson planning. Plan to observe during activities that do not require your full assistance or plan for someone else to observe and document.

- **Allow time** – Allow adequate time for the child to complete any task that he or she is engaged in even if it requires more time than one might expect.

- **Use appropriate adaptations** – Ensure that appropriate adaptations as determined by the IFSP or IEP team are in place when observing the child.

- **Work Samples** – Documentation can also include the collection of 2- or 3- dimensional products that children have produced such as drawings, writing on paper or 3-dimensional constructions the child has made for example with play dough or other materials.

- **Videos or Photographs** – Cameras can be used to document observed behaviors of children through videos or still photographs.

Information on strategies for implementing the above documentation strategies can be found at: eclkc.ohs.acf.hhs.gov/hslc/tta-system/teaching/practice/iss-library.html
Consider the following for planning and collecting documentation:

- Choose methods of documentation that can be embedded into a program’s environment, structure, and routines.
- Plan ahead for materials needed for documentation such as sticky notes or pre-printed labels with children’s names for anecdotal records or clipboards with checklists or rubrics. Materials should be strategically located throughout the classroom.
- Observe children’s behaviors throughout the day and record documentation while observing.
- Date each piece of evidence for future reference.
- Collect documentation over time. Documentation over time strengthens the validity of ratings.
- Organize the documentation collected immediately after collecting it.
- Keep assessment information confidential. Store the DRDP materials, including notes, in a secure location to ensure confidentiality for each child.

**Organizing Documentation**

**Portfolios:** Portfolios are a helpful way of organizing information. EESD programs are required to use a form of portfolio to organize documentation. Portfolios may contain anecdotal notes, children’s work samples, photos of children’s activities, audio or video recordings, and transcripts of the child’s language. The portfolio methods selected should work well for the program.

**Electronic Portfolios:** If notes are entered into a computer, an electronic portfolio can be produced to summarize the evidence. Please check with a local administrator for procedures regarding consent for photography and video.

**Collaboration to Support Effective Documentation**

A central goal for teachers and service providers who use the DRDP (2015) is to obtain measures of the child’s developmental progress based on typical day-to-day behaviors. It is difficult to imagine one individual having access to all of the many learning opportunities that a child encounters throughout each day. Therefore, it is very helpful to seek input from individuals who have ongoing contact and who know the child well in order to obtain the most complete and accurate picture of the child’s skills and abilities. It is important to consider how and when collaborating with others will support and help to inform the accurate rating of measures for the DRDP (2015).

Although direct observation of a child is the primary method used to inform ratings, other sources of evidence should be used to supplement observations. Gathering information from others who know the child well such as family members, caregivers, or other service providers often provides a wealth of additional information about a child’s skills, knowledge, and behaviors. This also provides the additional benefit of observations across different settings. There are numerous ways that others can collaborate in sharing information such as written observations, conversations that focus on a child’s development, or viewing short videos or recordings that illustrate a child’s behavior in typical routines and activities.

Planning ahead can make the process of collaboration more helpful. Identify early on in your relationship with the child’s family, who else might provide helpful information to assist in documenting their child’s development. Make sure that the family is well informed about the purpose of the DRDP (2015) and the important role that they can play in sharing their observations about their child. With the family’s permission, communicate with other individuals who know the child and strategize with them how they might be able to share information with you.

Communication is key to successful collaboration. For a more detailed look at collaboration and the assessment process please refer to Appendix F.
Adaptations are changes in the environment or differences in observed behavior that allow children with Individualized Family Service Plans (IFSPs) or Individualized Education Plans (IEPs) to demonstrate their knowledge and skills in their typical environments. Adaptations that are in place for the child during the normal course of the day should also be in place during observations for the DRDP (2015). New adaptations should not be introduced solely for the purpose of conducting an assessment. Seven broad categories of adaptations are used with the DRDP (2015). This is the same system of adaptations developed for and used in the DRDP access.

1. **Augmentative or Alternative Communication Systems**
   Augmentative and alternative communication systems are methods of communication other than speech that allow a child who is unable to use spoken language to communicate with others. An augmentative communication system is used to augment or facilitate the development of speech. An alternative communication system is used in place of speech. Some examples include sign language, picture cards, and electronic communication devices. Assessors should use these systems as part of the observation of a child using language in a natural context. Assessors should not just elicit responses or contrive adult-directed situations.

   If American Sign Language is the child's primary language, it is designated as the home language, and not an adaptation. If sign language is used as a bridge to learning verbal language, then it is considered an adaptation.

2. **Alternative Modes for Written Language**
   Alternative Modes for Written language are methods of producing written language used by a child who cannot see well enough or cannot hold and manipulate a writing utensil well enough to produce written symbols. If a child cannot see or cannot hold a pencil or marker, this adaptation may be used to assist in reading or writing, or emergent reading or writing. Examples of this adaptation include using a Braillewriter, keyboard, or computer.

   Naturally, preschool-age children are not proficient at reading and writing. This adaptation allows for children to explore reading and writing and develop their skills in a developmentally appropriate manner.

3. **Visual Support**
   Visual supports are adjustments to the environment that facilitate a child’s ability to see or to understand the surrounding environment or events. Acceptable visual supports include:
   - Adjustments in contrast
   - Adjustments in lighting
   - Distance from objects
   - Increased size of materials
   - Verbal description of events

4. **Assistive Equipment or Devices**
   Assistive equipment or devices are tools that make it possible or easier for a child to perform a task. The child should be familiar with the use of the device. Any type of adaptive equipment or assistive device that the child needs for mobility, positioning or manipulating objects is acceptable, including:
   - Walkers
   - Standers

5. **Functional Positioning**
   Functional positioning enables postural support that allows a child to have increased control of his body. It is important that positioning devices are available to the child across settings so that the child may access daily routines and activities and so they may be observed in a variety of activities. Some examples include:
   - Standers
   - Cube chairs
   - Tricycles with seat belts and built-up pedals

6. **Sensory Support**
   Sensory support includes either increasing or decreasing sensory input to facilitate a child’s attention and interactions in the environment. Some children may need increased sensory input and others may need decreased input. Some children require different types of sensory support in different activities. Sensory support may include:
   - Reducing background noise
   - Adjusting tactile stimulation
   - Adjusting visual stimulation

7. **Alternative Response Mode**
   Using alternative response modes means recognizing that a child might demonstrate mastery of a skill in a way that differs from a typically developing child. For this adaptation, the environment is not modified as in the other adaptations. Rather, the child’s unique yet consistent responses that may indicate the presence of a skill are identified. For example, the child with autism may look out of the corner of his or her eye instead of establishing direct eye contact, or the child with a physical impairment may use atypical movement patterns. The form of a child’s response may differ from that of his peers and still be considered to demonstrate mastery of a skill.
Appendix E: 
Resources for Working in Partnership with Families

A central goal of the DRDP is to identify a child’s developmental progress based on typical, day-to-day behaviors. It is appropriate to seek input from individuals who have ongoing contact with the child and know the child well. Family members’ descriptions of their child’s behavior in the home or in community settings will help teachers and service providers know more about the child’s behaviors across settings, particularly for those skills the child may not demonstrate routinely in the educational setting; and help teachers and service providers obtain more comprehensive information in order to make accurate ratings for the DRDP (2015).

Family members may participate in the DRDP assessment in a number of ways:

- Inform the child’s teachers and service providers of the child’s history for a more complete picture of the child.
- Share the skills they see their child using in typical activities, and might share these skills via stories, photos, drawings, observations, and/or video clips.
- Share the child’s strengths, areas they wish to focus on, and areas of growth they observe.
- Become informed about the next steps in their child’s development.
- Help determine which adaptations will help their child participate in everyday activities (for children with an Individualized Family Service Plans (IFSPs) or Individualized Education Program (IEPs)) and share with the team adaptations the child uses at home, at school, and in other settings.

Below are resources to assist families in knowing more about the DRDP (2015) and the skills assessed as well as resources to assist teachers and service providers in working as partners with families in the assessment process.

Resources for Families

Overview of the DRDP (2015) for Families:
draccess.org/OverviewOfDRDPAccessForFamilies.html
A document describing how the DRDP (2015) works for children, including those with IFSPs and IEPs; and how it benefits families, children, providers, and programs.

All About Young Children: allaboutyoungchildren.org
A website for families describing skills that help children learn including how they learn language, how they learn about feelings and relationships, how they learn about numbers, and how they become skilled at moving their bodies. (Available in eight different languages.)

California MAP to inclusion and Belonging: cainclusion.org/camap/counties.html
The MAP Project website supports the inclusion of children with disabilities and other special needs ages birth to 21 in child care, after school and community settings. It includes links to resources on topics related to families and children with IFSPs and IEPs. The website contains a statewide interactive directory by county, of Family Resource Centers (FRC), Special Education Local Plan Areas (SELPAs), Regional Centers, Head Start, and more for families of children with IFSPs and IEPs.

Desired Results for Children and Families, Information for Families brochure: desiredresults.us/content/families
A brochure describing the Desired Results System for families.

Watching My Child Grow: desiredresults.us/content/families
A DVD that describes the Desired Results Assessment System and its benefits for all children and families from the voices of parents. Call 1-800-770-6339 or visit the website.

Resources for Teachers and Service Providers

A document that addresses the perspectives of parents and program staff in the sharing of child assessment information through the formation of partnerships and suggests strategies for bringing those perspectives together.

The Role of Family Observations:
draccess.org/RoleOfFamilyObsv.html
A document describing the research findings that suggest parents’ observations are reliable and valid and should be considered an essential component of a comprehensive assessment process.

Supporting Children and Families Living in Homeless Situations

CDE Homeless Education website: www.cde.ca.gov/sp/hs/
The McKinney-Vento Act defines homelessness as individuals who lack a fixed, regular, and adequate nighttime residence. This definition also includes individuals who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; who may be living in motels, hotels, trailer parks, shelters, public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; or who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.

Homeless children and youths have the right to access the same free, appropriate public education, including public preschools, as provided to other children. The website above addresses these rights, and provides educational information and resources for families and educators.
**Supporting Children in Foster Care**

**CDE Foster Youth Services website: [www.cde.ca.gov/ls/pf/fy/](http://www.cde.ca.gov/ls/pf/fy/)**

Children in foster care face significant barriers to positive educational experiences and academic achievement. A large percentage of children placed in foster care experience physical and emotional trauma as a result of abuse, neglect, separation from family, and impermanence. Although youth are placed in foster care for their safety, foster youth often do not find the security and stability they need through the foster care system. Most children who enter foster care have been exposed to many conditions that have undermined their chances for healthy development and learning.

On average, children who enter the foster care system have experienced more than 14 different environmental, social, biological, and psychological risk factors before coming into care, all impacting learning. These factors often include abuse and neglect, exposure to illicit drugs, and poverty. Once in foster care, they often experience other challenges to their well-being. They may be separated from their brothers and sisters, moved from one foster care placement to another, experience frequent changes in home placements or school placement, or caseworkers who may lack the resources to effectively advocate and plan for their best interests.

The California State Legislature recognizes that a high percentage of foster youth are working substantially below grade level, are being retained at least one year at the same grade level, and are becoming school dropouts. In response, the legislature declared that the instruction, counseling, tutoring, and provision of related services for foster youth be a state priority and mandated the Foster Youth Services Coordinating (FYSC) Programs through California Education Code sections 42920–42925. The Program provides services to all foster children and youth attending schools in each county.

The website addresses foster children's rights, and provides educational information and resources.

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**For more information**

- For CDE-funded Early Education programs: [www.cde.ca.gov/sp/cd/](http://www.cde.ca.gov/sp/cd/)
- For CDE-funded Special Education programs: [www.cde.ca.gov/sp/se/](http://www.cde.ca.gov/sp/se/)
- For EESD Training and Technical Assistance: Desired Results for Children and Families Project at [www.desiredresults.us](http://www.desiredresults.us)
- For SED Training and Technical Assistance: Desired Results Access Project: [www.draccess.org](http://www.draccess.org)
Appendix F:  
Collaboration to Complete the DRDP (2015)

“The most valuable resource that teachers have is each other. Without collaboration our growth is limited to our own perspectives.” – Robert John Meehan

Collaborating with Others Who Know the Child Well

Our understanding of young children is strengthened when we commit to partnerships with individuals, including family members, who know the child well and in different settings. Collaboration in gathering and sharing information is important because it affords us windows into a child’s life and offers perspectives that enhance our understanding of a child’s skills and behaviors. Identifying and communicating with the individuals who can collaborate on rating the measures of the DRDP (2015) is an essential step in this process.

Through collaboration, early educators and special educators each bring their skills and perspectives. Early educators contribute by providing a picture of the child in the context of a classroom setting. Special education providers contribute by identifying perspectives on a child’s unique learning needs and specific understanding of a child’s disability including materials that should be available and adaptations that should be in place. This lays the foundation for teachers and service providers to complement one another’s work in assessing a child’s skills and development. Shared information can build relationships that lead to joint decision-making not only about the assessment process but also about curriculum, instruction, supports, and services that can build relationships that lead to joint decision-making not only about the assessment process but also about curriculum, instruction, supports, and services that teachers, providers and families make for individual children and groups of children.

Collaboration to share assessment observations and evidence for completing the DRDP (2015) is built on relationships and a commitment to ongoing communication. It is developed over time with an understanding of each person’s role. Aim for multiple, informal strategies that can be used on a daily basis. Identifying mutual interests in supporting the child is important. Some questions that address joint interests include:

- What are the child’s goals?
- What specialized equipment or adaptations are used?
- How will the goals be infused into the child’s day and into learning activities?
- How will we know our strategies are working?

Collaborating with others in the assessment process is especially important in situations where the child is served by multiple providers. For example, a child may attend an early education program and also receive special education services, such as speech-language, occupational, and/or physical therapy. Early education teachers and special education providers can work hand-in-hand to complete the observations and DRDP (2015) ratings for children who are dually enrolled in both programs. How this collaboration will take place – who will be involved and what roles each individual will play – will vary depending on the situation. Teachers and service providers have reported the following helpful strategies:

- sharing information, including observations, adaptations, curriculum and program goals, and IFSP outcomes or IEP goals
- providing anecdotal notes
- sharing work samples and portfolios
- reviewing reports of DRDP (2015) results together

Increasingly, teachers and providers are utilizing technology such as short video clips or recordings, with family permission, to share information and observations. The DRDP (2015) app helps teachers collaborate, as well as using technology such as email, phone conferences and free web conferencing platforms. Local policies on using devices should be followed and child information should not be sent via email.

The early education teacher and special education service provider responsible for completing the DRDP (2015) should each take the lead in partnering with others who work with the child. The general educator is responsible for entering DRDP data into DRDPtech. The special educator is responsible for reporting and entering the assessment data on children who have IEPs or IFSPs to the SELPA. However, except for data reporting, the assessment can be completed together by both educators, and a copy of the Rating Record held by each of them for their respective reporting. Suggestions to help get started working together include:

- Make an initial plan detailing areas to be observed directly and those areas in which others may have a more thorough knowledge of the child. The general education teacher can provide information on all domains. A speech-language therapist might inform measures in the Language and Literacy Domain. Families and special education providers including physical and occupational therapists are a good source of information for measures in the Physical Development and Health Domain.
- Contact the individuals who will collaborate to discuss the mutual goal of completing the assessment and to develop a plan for working together.
- Develop a timeline that is acceptable to all partners, including identifying deadlines and strategies to meet timelines.
- Collect any signature requirements for sharing child information from the family.
- Gather multiple perspectives and consider input from family and others who know the child during assessment.
- Determine when and how communicating about updates and results will occur.
Collaborating with Families

Gathering family perspectives about their child’s development and behavior provides important and valid data, which is useful for making informed assessment decisions. Research suggests that family observations are reliable and valid and should be considered an essential component of a comprehensive assessment process. Inviting parents and other family members to share observations of their child’s development and behavior is required for EESD programs and is good practice in all early childhood settings and programs.

When families collaborate with teachers and service providers in sharing their observations about their child’s behaviors in the home or in community settings, it provides a richer and broader view of a child. Information from families helps to identify skills and behaviors that the child may not demonstrate routinely in the educational setting. For example, a teacher or therapist may not regularly observe a child’s dressing or other self-help skills. However, families have repeated opportunities to observe their child’s self-help skills both over time and in different settings. Parent observations support more accurate reporting about a child’s skills.

Strategies for gathering information from families include the following:

- Make sure that families understand the skills and behaviors described in the DRDP (2015) measures. Teachers and service providers understand expected sequences of child development and are trained about how items on the DRDP (2015) reflect these sequences. Parents might not understand fully the meaning of measures without explanations or examples. It may be useful to provide families with examples of the kinds of behaviors to look for or the routines and activities that might provide a context for a behavior. For example, rather than ask a parent to describe a child’s grasping pattern, inquire about how a child picks up small pieces of cereal during mealtime.

- It is reasonable for the observations of parents and practitioners to differ across the range of behaviors being rated. A child’s behavior during activities and routines that occur in the classroom setting may differ from the same child’s behavior in activities and routines in home or community settings. Not all perspectives about children’s behavior based on parent or practitioner observations will be congruent. Rather, aim for convergence or the pooling of perspectives from all who know the child and have had repeated opportunities to observe behavior in different settings.

The ongoing conversations that we have with family members during our typical interactions with them are rich opportunities for learning about their child. Leading a focused conversation with a family is particularly important to obtain information on measures that you have not had the opportunity to observe. During these conversations, focusing on routines and activities provides a very useful context for asking a family about their child’s everyday learning opportunities and skills. The four steps in the resource listed below will guide you in planning and leading focused conversations with families to help complete the DRDP (2015). If this is the first DRDP assessment that you will be completing with a particular child, be sure that you have spent enough time getting to know the child by observing the child’s skills during typical routines/activities and by having conversations with the family.

For more information

DEC Recommended Practices in Early Intervention/Early Childhood Special Education 2014

Developed to provide guidance to practitioners and families about the most effective ways to improve the learning outcomes and promote the development of young children, birth through age 5, who have or are at-risk for developmental delays or disabilities. The purpose is to help bridge the gap between research and practice by highlighting those practices that have been shown to result in better outcomes for you.

www.dec-sped.org/recommendedpractices

Inclusive Planning Checklist: Home-Visiting Programs

Provides suggestions for activities that should take place to ensure that high-quality integrated services are provided. From the Early Childhood Learning and Knowledge Center, Office of Head Start.

eclkc.ohs.acf.hhs.gov/tta-system/teaching/docs/inclusive-plannng-checklist-home-visit.pdf

Leading Conversations with Families to Inform the DRDP (2015): Focusing on Families and Children’s Everyday Routines and Activities

A four-step process that guides early interventionists in holding focused conversations with families in order to gather information for the DRDP (2015).

dracess.org/LeadingFocusedConversations.html

The Role of Family Observations in the Desired Results Assessment System

An overview of the research findings that suggest parents’ observations are reliable and valid and should be considered an essential component of a comprehensive assessment process.

dracess.org/RoleOfFamilyObsv.html

Desired Results Training and Technical Assistance Project

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Desired Results Access Project

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