

Charter Oak State College Examination Program

Infant-Toddler Evaluation & Assessment

Description:

This test was developed to enable students to earn basic level college credit for demonstrating mastery of content knowledge equivalent to that which is learned in a full semester lower-level college course in Infant-Toddler Evaluation & Assessment. There are no pre-requisite courses required. All individuals with an interest in Infant-Toddler Evaluation & Assessment are eligible to take this test.

The topics found on this exam cover the ways in which infants and toddlers from birth through three years are assessed and evaluated for developmental disabilities and eligibility for Connecticut Birth-to-Three services under Part C of IDEA.

The student should demonstrate knowledge, understanding, and application of all types of evaluation and assessment tools, selection and scoring assessments as well as strategies, methods and practices in evaluating and assessing infants/toddlers including knowledge of infant-toddler development. The student should also demonstrate knowledge, understanding and application of effective communication skills with families, caregivers and other professionals, working as part of an assessment team, and basic understanding and knowledge of Federal and CT State laws and regulations related to Birth-to-Three services under Part C of IDEA. The test contains 100 multiple-choice items, and each item has a single correct or best answer.

Listed below are the topics covered by the exam. Percentages indicate the emphasis placed on the topics and reflect the proportion of items on the test in each content area.

Content Outline:

1. Communication and Relationship-building with Families/Caregivers, Infants and Toddlers, and other Professionals – 23%
 - a. Interactions with Families/Caregivers
 - i. Communicating effectively with family/caregivers, infants and toddlers from diverse cultures and backgrounds
 - ii. Knowledge of family systems theories
 - iii. Ability to establish rapport with families and caregivers
 - iv. Effective communication skills

- b. Knowledge of family-focused interview techniques
 - i. Obtaining medical history
 - ii. Conducting family assessment
 - c. Integrations with the infant/toddler
 - i. Knowledge of age-appropriate activities, language, behaviors
 - ii. Knowledge of adaptations for a child with atypical development or special need
 - d. Understanding and utilizing strategies for working effectively with interpreters and translators
 - i. Cultural competence
 - e. Communicating with other professionals
 - i. Knowledge of models of team functioning
 - ii. Knowledge of coaching model
 - iii. Knowledge of , and ability to participate in collaborative decision making
 - 2. Infant and Toddler Development – 32%
 - a. Knowledge of current theories regarding infant/toddler development
 - i. Cognitive science perspectives
 - ii. Piaget’s theory
 - iii. Theories of Infant Perceptions
 - iv. Vygotsky’s sociocultural theory
 - b. Typical and atypical developmental skills of infants and toddlers
 - i. Knowledge of and the ability to recognize age appropriate skills in the following domains:
 - 1. Physical and motor
 - 2. Speech and language
 - 3. Social-emotional and infant mental health
 - 4. Adaptive behavior (self care)
 - 5. Cognition and learning
 - ii. Ability to recognize red flags indicating atypical development
 - 3. Types of Assessment and Evaluation – 32%
 - a. Basic knowledge of definitions and concepts associated with assessment and evaluation
 - b. Selection, administration, and scoring of Assessment Tools
 - c. Roles of the family/caregiver and other professionals in the assessment and evaluation process
 - d. Preparation of evaluation and summary reports
 - i. Communication of evaluation/assessment results with family/caregiver and other professionals
 - 4. Federal and State Laws and Regulations, and Best Practice - 13%
 - a. Requirements under Part C of IDEA, associated with the assessment and evaluation of infants and toddlers (birth to three years of age)
 - b. Planning requirements for administering and reporting on the assessments, according to best practice as identified in the literature
 - c. Knowledge of scoring criteria for eligibility in CT Birth to Three, or for other developmental needs
 - d. Knowledge of family’s rights according to Federal/State regulations

Study Tips:

In general, you should expect to spend about the same amount of time preparing for this exam as you would devote to a three-credit, college level course in Infant-Toddler Evaluation and Assessment. You should consider preparation to average between 144 and 180 hours. Setting up a regular time during the week to read and study is an approach that works well for many. Others find that forming a study group that meets on a regular basis to discuss the material in a particular chapter or unit not only enhances their learning through discussion but keeps them on track!

References:

The following textbooks contain information on the topics covered by the examination.

McLean, Mary, Wolery, Mark, and Bailey, Donald B., (2004). *Assessing Infants and Preschoolers with Special Needs*. Pearson, Merrill, Prentice Hall. ISBN: 0130986623, 978013986627 – especially chapters 1, 2, 3, 4, 7, 9,

Bagnato, Stephen J., Neisworth, John T., Pretti-Frontczak (2010). *Linking Authentic Assessment & Early Childhood Intervention: Best Measures for Best Practices*, 2nd edition. Paul H Brookes Publishing Co., Baltimore, MD. ISBN-10: 1598570471

Additional Key Resource for information covered by the examination:

Connecticut Birth to Three System: <http://www.birth23.org> – The CT Birth to Three System website contains a wealth of information on “related laws and regulations” pertaining to intervention programs and services for Infants and Toddlers. Students taking this exam will find “procedures” and “IFSP Handbook” for providers as well as many, many other resources for families and providers.

Additional Resources and References:

Bagnato, Stephen J. (2007). *The Authentic Assessment for Early Childhood Intervention: Best Practices*, The Guilford Press, New York, NY. ISBN-10: 1606232509

Developmentally Appropriate Practice in Early Childhood Programs Serving Children from Birth Through Age 8, edited by Carol Copple and Sue Bredekamp. (2009). National Association for the Education of Young Children (NAEYC). ISBN: 978-1-928896-64-7

Grisham-Brown, Jennifer, Pretti-Frontczack (2011). *Assessing Young Children in Inclusive Settings: The Blended Practices Approach*. Paul H. Brookes Publishing Co., Baltimore, MD. ISBN-10: 1598570571

Gross, Dana (2011). *Infancy: Development from Birth to Age 3*, Pearson Education Inc. ISBN-10: 0205734197

Losardo, Angela, Syverson, Angela Notari (2011). *Alternative Approaches to Assessing Young Children*, 2nd edition. Paul H. Brookes Publishing Co., Baltimore, MD. ISBN-13: 9781598570878

Martin, Sue & Berke, Jennifer, (2007) *See How They Grow: Infants and Toddlers*, Thomson Delmar Learning. ISBN: 1418019224, 9781418019228

McLean, Mary, Wolery, Mark, and Bailey, Donald B., (2004). *Assessing Infants and Preschoolers with Special Needs*. Pearson, Merrill, Prentice Hall. ISBN: 0130986623, 978013986627

Mulhearn-Blasco, Patricia (2000). *Early Intervention Services for Infants, Toddlers and Their Families*, Edition 1, Published by Allyn & Bacon, Pro-Ed International Publisher. ISBN: 0205194435

Raver, Sharon A. (1999). *Intervention Strategies for Infants and Toddlers with special Needs: A Team Approach*, 2nd edition, Prentice-Hall, Inc. ISBN: 0136747302, 9780136747307

Sample Questions

1. When working with a child whose culture is unfamiliar to the interventionist, it would be important to first
 - a. Assess the family's strengths and needs.
 - b. Research attributes of that family's culture.
 - c. Determine the family's preference of spoken language.
 - d. Ascertain the family's living conditions.
2. Which of the following questions will elicit the LEAST comprehensive responses from families?
 - a. How does your child approach other children?
 - b. How are mealtimes with your child?
 - c. What number words are there in your child's vocabulary?
 - d. How does your child react in new situations?
3. An infant displays a *pincer grasp* at what age?
 - a. 2-4 months
 - b. 6-8 months
 - c. 9-10 months
 - d. 10-12 months
4. Identify the description which describes *fine motor development*.
 - a. The ability to direct another's attention to an object or action and provide information about it.
 - b. The ability to move objects from one location to another or from one orientation in space to another.
 - c. The ability to carry out solutions to problems that are encountered.
 - d. The ability to remain in a position without falling.

5. Which of the following conditions allows a child to be automatically eligible for Birth to Three services in CT?
 - a. Blindness in one eye
 - b. Prematurity
 - c. Childhood trauma
 - d. Fetal alcohol syndrome

6. Which of the following would be characterized as an open-ended question?
 - a. How does your child express himself when he is hungry?
 - b. Does your child eat breakfast every day?
 - c. How old was your child when he took his first steps?
 - d. What was your child's birth weight?

7. In order to embrace culturally competent practices, an interventionist must
 - a. Have extensive knowledge about other cultures.
 - b. Have access to interpreters who can assist with communication.
 - c. Acknowledge the impact of his/her own cultural heritage.
 - d. Involve family members who can serve as interpreter for the child's parents.

8. The ability to control emotions is called
 - a. Ego
 - b. Self-regulation
 - c. Motivation
 - d. A priori

9. A child usually can balance while standing on one foot by approximately what age?
 - a. 12 months
 - b. 18 months
 - c. 24 months
 - d. 36 months

10. The extent to which an assessment is consistent in measuring, over time, what it is designed to measure is called:
 - a. Validity
 - b. Reliability
 - c. Interview
 - d. Referenced

11. What of the following assessments would normally be used FIRST in a newborn's life?
 - a. Brazelton Neonatal Behavioral Assessment Scale
 - b. Assessment of Preterm Infant's Behavior
 - c. Neonatal Intensive Care Unit Neurobehavioral Scale
 - d. APGAR Scale

12. Assessment can mean different things, but under Part C of IDEA assessment means
- a. The ongoing procedures used to identify a child's strengths and needs and the appropriate early intervention services.
 - b. The procedures for gathering the child's health medical records to determine eligibility and early intervention services.
 - c. The procedures conducted on the child and the family prior to the child's first IFSP meeting.
 - d. The procedures conducted on the child to determine the child's initial and continuing eligibility.

Answer Key	
1. c	7. c
2. c	8. b
3. c	9. c
4. b	10. b
5. d	11. d
6. a	12. a