

Case Study	Discussion and Resources
<p>In this story, Nikhil, his family, early intervention (cross-disciplinary) teams, and applied behavior analysis (ABA) providers, navigate challenges associated with or demonstrate components of Standard 3 Collaboration and Teaming:</p> <ul style="list-style-type: none"> <li>• Candidates apply models, skills, and processes of teaming when collaborating and communicating with families and professionals, using culturally and linguistically responsive and affirming practices. In partnership with families and other professionals, candidates develop and implement individualized plans and successful transitions that occur across the age span. Candidates use a variety of collaborative strategies while working with and supporting other adults.</li> </ul> <p><b>Resources:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">ECPC Curriculum Modules: Professional Standards</a></li> <li>• <a href="#">Resources You Can Use for Pre- and In-service Professional Development (DEC Website)</a></li> <li>• <a href="#">Supporting Explanations for Early Component</a></li> </ul>	<p><i>The specific components of Teaming and Collaboration are listed as three bulleted items below. Highlight in the story when professionals and caregivers navigate challenges with or demonstrate these components. Reflect on your own and compare your findings with others in small groups.</i></p> <p><b>Specific components include:</b></p> <ul style="list-style-type: none"> <li>• Applying teaming models, skills, and processes, including appropriate uses of technology, when collaborating and communicating with families; professionals representing multiple disciplines, skills, expertise, and roles; and community partners and agencies.</li> <li>• Using a variety of collaborative strategies when working with other adults that are evidence-based, appropriate to the task, culturally and linguistically responsive, and take into consideration the environment and service delivery approach.</li> <li>• Partnering with families and other professionals to develop individualized plans and support the various transitions that occur for the young child and their family throughout the birth through 8 age span.</li> </ul>

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<p><b>Nikhil, His Caregivers, and Important Adults</b></p> <p>Nikhil is a 19-month-old child that recently qualified for services at a local Early Intervention program. Nikhil was referred for EI by his pediatrician. Along with the referral document, his pediatrician had sent the Modified Autism Checklist for Autism in Toddler screening results which showed some “red flags” for autism.</p> <p>Nikhil used single-words and enjoyed playing with a variety of toys (e.g., trains, balls, small toy animals). He had challenges with transitions to and from preferred activities and has tantrums several times per day. Nikhil also engages in motor stereotypy (hand flapping), especially when he watches television.</p> <p>Nikhil had a younger sister that was three months of age. He lived with his father, Avais and mother Zoya had immigrated to the United States for school from India and then stayed to serve as medical doctors at a local hospital. Nikhil’s grandparents resided with the family for half of the year. Currently, his grandparents were taking care of him and his sister during the day while his parents worked.</p>	<p>What are the developmental milestones of a typically developing 19-month-old? What may be signs of autism that are present at this age?</p> <p>Consider exploring the resources below that support caregiver understanding of typical development vs. children with autism and/or developmental delay.</p> <ul style="list-style-type: none"> <li>• <a href="#">Center for Disease Control Milestone Tracker</a></li> <li>• <a href="#">Organization for Autism Research Resources</a></li> <li>• <a href="#">Well Child Lens Website – Early Signs of Autism</a></li> </ul> <p>Are you familiar with the cultural aspects and structure of Indian families? Indian families tend emphasize interdependence, and they often live in households with multiple relatives.</p> <p>Learn more by exploring the resources below:</p> <ul style="list-style-type: none"> <li>• <a href="#">Cultural Atlas – Indian Culture</a></li> <li>• <a href="#">BBC News – Indians continue to live in joint families</a></li> </ul> <p>What aspects of this family’s culture may need to be considered to make sure that intervention and outcomes are equitable and relevant?</p> <p>Consider exploring these resources on <a href="#">cultural responsiveness training</a> to explore unconscious bias and support.</p>
<p><b>Early Intervention Evaluation</b></p> <p>The Early Intervention team conducted the eligibility evaluation at the home. Both his parents and his grandparents were present. Nikhil qualified for services in all developmental areas, except gross/fine motor. This meant that he would be assigned four different providers – an early intervention teacher, occupational therapist (OT), and speech-language pathologist (SLP).</p>	<p>Oneida as an Early Intervention teacher is guided by the <a href="#">EI/ECSE Practice-Based Standards</a> (one of which is the focus for this case study).</p> <p>All EI professionals are guided by the <a href="#">DEC Recommended Practices</a>.</p> <p>Professionals on her team are also guided by their own professional organizations:</p>

<p>That week, the team met as they regularly did for their group meeting. During this meeting, they discussed which providers may be best suited to support Nikhil and his family. The final decision related to services would be one that was made with the family. The early intervention teacher, Oneida, had the most training and experience serving children with autism therefore, it was determined she would be the primary service provider (PSP). The OT and SLP assigned were newer to EI, but the team determined they would be appropriate because they both served other children in the area.</p> <p>When the pediatrician referred the family to EI, he also made a referral to a developmental pediatrician that specialized in diagnosing autism and other developmental disorders. Nikhil had been evaluated by this doctor the same week the EI team conducted their evaluation. She diagnosed him with autism and recommended that the family seek out applied behavior analysis (ABA) services.</p>	<ul style="list-style-type: none"> <li>• <a href="#">APTA</a> American Physical Therapy Association</li> <li>• <a href="#">AOTA</a> American Occupational Therapy Association</li> <li>• <a href="#">ASHA</a> American Speech-Language-Hearing Association</li> </ul> <p>If applicable, do local pediatricians make referrals and connect with your program? Do you send updates regularly with them about the children and families that you both support? Do you consider pediatricians part of the team?</p> <p>Are you familiar with the roles and responsibilities of ABA providers? For this case, it is not only important that the members understand the professional roles of each discipline on their EI team, but it may be helpful to learn more about ABA providers, how these services are delivered, and what guides their practice.</p> <ul style="list-style-type: none"> <li>• ABA providers are typically also Board Certified Behavior Analysts (BCBAs). They complete coursework, supervision, and an exam to be certified by the <a href="#">Board Certification in Behavior Analysis</a>.</li> <li>• BCBAs professional organization is the Association of <a href="#">Professional Behavior Analysts (APBA)</a>. Their professional website shares laws and regulations and practice guidelines.</li> </ul>
<p><b>Eligibility / IFSP Meeting</b></p> <p>The family met with Oneida, the OT, SLP, and program supervisor for Nikhil’s eligibility and Individualized Family Service Plan (IFSP) meeting later in the week. Zoya indicated they were meeting with an ABA provider the next day and were hopeful they could start all the services at the same time as EI to provide Nikhil with the most support.</p> <p>Oneida had taken one course in her graduate program that focused on ABA, but otherwise, she knew very little about these services. Most of the children that were referred to EI were not diagnosed with autism, even when “red flags” existed. Their team always individualized the amount and type of support provided children and families based on priorities and needs. They did not usually consult with external providers.</p>	<p>Collaboration and teaming in Early Intervention relies heavily on coordination of services across multiple individuals from different backgrounds and training. Consider exploring the <a href="#">ECPC Cross-disciplinary competency “Collaboration and Coordination” indicators</a> and case study to explore additional resources on this topic.</p> <ul style="list-style-type: none"> <li>• Are you familiar with terms such as disciplinary, cross-disciplinary, interdisciplinary, multidisciplinary, and transdisciplinary? Which of these terms represents how your team members interact with one another?</li> <li>• How do you currently collaborate with professionals from different disciplines? What barriers exist?</li> </ul> <p>The resources below explore and define these terms for you:</p> <ul style="list-style-type: none"> <li>• <a href="#">Multidisciplinary</a></li> </ul>

At this point, the team decided, in collaboration with the family, they would begin to provide EI services and then wait to hear from the family about how accessing ABA services progressed. The team established five child and two-family outcomes. These focused on improving his social-communication skills (e.g., using single words to communicate his wants and needs), self-care (e.g., eating with a spoon), and decreasing tantrums that were occurring throughout the day. They also identified that the family would seek out a play group for Nikhil to engage with same-age peers.

- [Description and comparison of service delivery approaches](#)
- Transdisciplinary (also called Primary Service Provider)

Are you familiar with the teaming approach used in this case study (transdisciplinary or PSP)? It can be helpful to share the definition and role of a PSP in EI service delivery with the caregivers. Explore the examples of explanations of the approach:

- Early Steps – PSP Approach Handout – [Gulf Central Early Steps Program](#)
- Academy of Pediatric Physical Therapy – [Using a PSP Approach to Teaming](#)
- The Early Intervention Teaming Handbook by Shelden and Rush (2022)
  - [Link to Handbook](#)
  - Link to Chapter 1 – [Introduction to a PSP Approach to Teaming](#)
- Family Infant and Preschool Program resource website
  - CASEtools - [Checklists for Implementing a Primary-Coach Approach to Teaming](#)
  - Fidelity in Practice – [Primary Service Provider \(FIP-PSP\) Checklists](#)
- Virginia EI Professional Development
  - Primary Service Provider... What Does That Mean? - [Early Intervention Strategies for Success Blog](#)

**Home Visits**

The very next week, Oneida visited the home to conduct her first visit. Zoya shared that the ABA provider was planning to conduct an assessment over the next two weeks and that they could start services as soon as that process was complete. Oneida was thrown off by this as she had barely started supporting the family. During this first visit, Oneida spent time observing Nikhil as he played with his grandmother (who was present). One thing she noticed right away was that his mother and grandmother both provided Nikhil with a lot of demands (e.g., do this, do that). He appeared not to understand many of their directions, became frustrated, and eventually had a tantrum that lasted for the rest of the visit. She decided to wrap up the visit and told Zoya to keep her in the loop about the

Do you believe you have a strong foundation in teaming and collaboration practices?

Consider exploring the following learning modules and podcasts to improve your knowledge and skills:

- [Universal Online Part C Curriculum –](#)
  - Foundational Pillars in Early Intervention – Quality Teaming
  - Teaming Tidbits and Resources
- Early Intervention on the Fly Podcast
  - [Series 2 - Teaming](#)

ABA services. They scheduled the next visit for two weeks from that date and planned for the OT to attend as well.

Two weeks passed and Oneida drove with the OT to the home for the next visit with Nikhil and his family. When they arrived, Oneida was surprised to see that the ABA provider was there. Zoya said, “I hope you don’t mind she is here... I thought it would be helpful for her to attend a session.” Oneida was thrown off, but stated it wasn’t a problem and began the session. During the drive, the OT suggested that they talk with the parents about using some sensory strategies to help with the challenging behaviors. The visit progressed like the last one and towards the end, Nikhil started to cry. The OT said, “why don’t we try to bounce him on a ball and give him some hugs to see if he will calm down.” Zoya, open to suggestions, tried this strategy, and suddenly Nikhil stopped crying after she bounced him on the ball. The ABA provider sat in the corner for most of the visit taking notes, barely saying anything.

Have you and your team determined your current teaming abilities? This team has a challenge ahead of them – determining how to communicate and collaborate with the ABA provider to support the priorities and interests of the family. Consider assessing their current teaming abilities using one of these checklists that may be helpful to Oneida and her team:

- ECTA Practice Improvement Tools:
  - [Teaming and Collaboration Checklists](#)

**Between Visit Communication with the Family and Other Team Members**

After this visit, Oneida received a call from Zoya. She shared that the ABA provider had completed the assessment and they would begin services the next week. They planned to have a direct service provider called a Registered Behavior Technician to come to the home to work with Nikhil every weekday from 8:00 – 1:00 PM. He usually napped from 1:00 – 4:00 PM. She asked if Oneida and the other team members could start coming to visit after 4:00 PM. Additionally, Zoya shared that the ABA provider recommended that they abstain from using the sensory strategies the OT suggested.

Oneida thanked Zoya for keeping her in the loop but was frustrated about the change in service availability. She also wished the ABA provider had not disagreed with the OT’s suggestions. Clearly, they did not share the same perspectives regarding intervention approaches for children with autism. She decided she needed to talk with her supervisor and teammates about how to move forward.

Again, there are some challenges in this case related to coordination and collaboration of services. Specifically, Oneida and her team are starting to interact with individuals that provide ABA services, and they need to navigate how to make sure they are providing consistent, support Nikhil and his family. Explore the Early Childhood Recommended Practice Modules - [Module 4: Teaming and Collaboration](#)

## Determining Collaboration Strategies

At the next team meeting, Oneida shares the situation with her supervisor and teammates. The OT shares her experience with the ABA provider, which was similar to the perspective Oneida shared. Their supervisor takes the lead of the conversation, by sharing that as Early Interventionists they are dedicated to engaging in effective teaming and collaboration that supports the family priorities. She indicates that it seems that family wants to access the ABA services, so the team needs to determine the best way to collaborate with them. All the team members agree that while the initial interaction with the ABA provider was challenging, they are willing to be identify strategies that improve teaming and collaboration across these services. They also discuss that their role is to support the caregivers as they implement interaction throughout daily activities and routines. Their use of the primary service provider model will be quite different than how ABA services are provided. They discussed that Oneida would be the point person for interacting with the ABA provider and that she may want to meet with this individual to discuss the model that is used in Early Intervention services. The role of the RBT will be different (working directly with the child); therefore, it may be possible for the EI team to support the family in their efforts to carry over some of the interventions the RBT uses when the ABA providers are not present. Additionally, it is important that they are all on the same page regarding interventions that are used with the family. While the team has some knowledge of how to support children with autism, it may be helpful if they are exploring exactly what are evidence-based practices for this population.

Oneida, feeling good about the discussion and plan moving forward, decides to bring up strategies for collaboration at her next visit with Zoya. She also considers, "Should the ABA provider be listed on the IFSP and participate as part of the team during meetings?" She makes a note to ask this question at her next team meeting.

Being open, honest and valuing the perspectives of others is a critical component of EI services and supports. Therefore, it may be helpful for the EI team to consider learning more about the ABA perspective, their program, and how they collaborate with others. A first step may be to ask the family to sign an agreement indicating that the teams can share documents and communicate openly with one another.

Do you have strategies you use to communicate with caregivers? Do you use strategies to support providers across teams to communicate effectively so that they are on the same page regarding recommended supports and interventions?

Here are a few strategies to enhance communication between professionals and caregivers:

- Using a notebook that is kept at the home where team members document information and changes
- Using technology to share documents (e.g., *Google Docs*). Be sure to identify policies related to sharing of information using technology across the programs.
- The providers may consider scheduling regular meetings to discuss progress and interventions that are being used.
- The providers may consider scheduling sessions together to collaborate and experience supports, and interventions provided across programs.
- Teams may consider using a phone app/Internet-based platform (e.g., *TheraWe Connect*) for group communication and sharing of photos, videos, etc. that can help with engagement and collaboration.

Are you familiar with evidence-based interventions to support young children with autism? Consider exploring these resources to learn more:

- [National Professional Development Center on Autism Spectrum Disorder](#)
- [Evidence-based Instructional Practices for Young Children with Autism and Development Disabilities](#)

### **Additional Discussion Questions:**

1. What might be a focus area for the EI and ABA teams to collaborate based on what was described in this case study related to Nikhil's challenging behaviors?
2. How might Oneida and her team use collaborative strategies to implement evidence-based and culturally/linguistically responsive services with the ABA providers?
3. What are some strategies that Oneida could use to partner with the family and the ABA providers to develop an individualized plan for Nikhil? What role might the EI team help with that is different than the ABA providers?

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