



Local Program

Indicators and Elements of High-Quality Inclusion

<https://ectacenter.org/topics/inclusion/indicators.asp>

December 15, 2023

INDICATOR L1: Inclusion Leadership Teams

The program establishes or participates in a Program Inclusion Leadership Team. It is composed of administrators, program staff, family members, adults with disabilities, and community partners who implement action plans that guide, support, and ensure the implementation of inclusive programs and inclusive practices.

The Program Inclusion Leadership Team:

1. Has a relationship with the Community Inclusion Team (CIT) and regularly shares information with the team.
2. Determines which community partners are needed to support inclusion. Partners are representative of the program (including demographics of children with disabilities served, languages spoken in the community, rural communities) it serves, considering race, income and language and it contains individuals with disabilities.
3. Develops and maintains agreements with early childhood education (ECE) programs, health partners, and behavior support providers to implement supports and services to children with disabilities in inclusive settings.
4. Has a written inclusion action plan with goals and objectives aligned with its shared purpose or mission, such as increasing the number and quality of inclusion.
5. Has action steps identified in the inclusion action plan to ensure successful implementation and sustainability.
6. Meets regularly to address evidence of progress toward goals on the inclusion action plan.
7. Reports annually to families and the community on the progress and accomplishments from the action plan.

INDICATOR L2: Shared Purpose

The program develops and implements a shared purpose statement that affirms the unique contributions of all children. It pays particular attention to children with disabilities and those historically and contemporarily underserved and marginalized. The statement is communicated in the languages and formats (for example, written, verbal, or video) that best meet the needs of the local community.

The local program:

1. Develops a shared purpose statement that clearly outlines how to implement inclusion and create a climate to support it.
2. Uses its shared purpose statement to guide the development and use of policies and procedures that support inclusion.
3. Ensures staff can clearly explain the purpose statement for inclusion of children with disabilities and their families.
4. Shares the purpose statement about inclusion in public awareness and program materials in the languages and formats most relevant and accessible to the community.

INDICATOR L3: Family Engagement and Partnerships

The program ensures families of children with and without disabilities participate in the development and implementation of policies and initiatives related to inclusion.

The local program:

1. Develops a plan for how to engage and partner with families in advocacy efforts, public awareness, inclusion forums, and conferences. This includes developing procedures for families at every stage of developing and evaluating inclusion initiatives.
2. Obtains family input and feedback throughout the implementation of the inclusion action plan.
3. Provides information to families on the benefits and legal foundations of inclusion.
4. Ensures equitable access to materials and resources by providing free interpretation services; using "cultural or linguistic brokers" who support families going through the process of identification, placement and services; and using easy to understand language.
5. Connects families to the Parent Training and Information Centers (PTIs) and other family support programs.
6. Creates opportunities for families of all children to share their inclusion experiences.
7. Includes families regularly in program improvement and problem-solving processes.
8. Evaluates the effectiveness of the plan to engage and partner with families.
9. Recruits and fairly compensates families whose children have received special education services to help new families through the process. Recruitment should include diversity based on linguistics, culture, race, economics, and geography.

INDICATOR L4: Awareness and Commitment

The program has concrete guidelines for inclusion that intentionally promote an awareness of and commitment to inclusion among providers, families, and the community.

The local program:

1. Gathers and examines information on the attitudes and beliefs of staff and families about inclusion and provides opportunities for the identification of barriers and solutions.
2. Ensures that all staff can clearly explain and demonstrate their commitment to inclusion.
3. Ensures that all staff can clearly explain and demonstrate their knowledge of the benefits and legal foundations of inclusion.
4. Provides regular and consistent opportunities for staff to share their inclusion experiences.
5. Applies the natural proportion principle to guide inclusion of children with disabilities in early childhood settings. "Natural proportions" means children with disabilities should reflect the natural proportion of people with disabilities in the community and there should not be a cap or quota for the number of children with disabilities allowed to be enrolled in services.

INDICATOR L5: Policies and Procedures

The program develops and implements written inclusion policies and procedures reflective of its shared purpose statement and support the use of inclusive practices. The policies are available in the languages, including sign language, and formats (for example, verbal, written, or video) that are relevant to the needs of the population in the local program.

The local program:

1. Provides opportunities for parents and staff to offer policy and procedure improvements.
2. Implements policies and procedures that comply with federal and state legal requirements on services to children with disabilities and their families.
3. Uses identified issues that disproportionately impact Black, Latine, Indigenous, and other children of color with disabilities (*i.e.*, discipline, access to bilingual programming) to create equitable policies and inform action planning.
4. Implements policies and procedures to recruit and enroll children with disabilities.
5. Ensures that current policies prevent segregation by disability. Policies clearly state that segregated program settings will be identified and dismantled by reallocating funding to support and incentivize inclusion, adjusting staffing structures, and using other methods.
6. Develops guidance for individualized educational program (IEP) teams on the importance of serving children where they would be served if they did not have a disability.
7. Mandates staff regularly review a child's IEP to ensure services, supports, and placements are effectively implemented.

8. Implements policies and procedures that support the inclusive practices for children with disabilities and their families with increasing effectiveness.
9. Implements policies and procedures that support individualized services that address the strengths and needs of children with disabilities and intersectional identities and their families.
10. Implements data collection policies and procedures to guide evaluation and improvement.
11. Reviews and updates program policies and procedures routinely.

INDICATOR L6: Fiscal Resources

The program understands the available funding streams and resources and reallocates, coordinates, and braids funds to design and implement inclusive practices.

The local program:

1. Develops collaborative agreements to efficiently and effectively cost share, braid, or layer funding with other ECE programs.
2. Develops a budget for staffing, training, and coaching to support inclusion.
3. Plans for, monitors, and evaluates the effective use of fiscal, staff and other resources to support inclusive practices.

INDICATOR L7: Staff Policies and Structure

The program's policies and structures support the delivery of EI, special education, and other specialized services (for example, speech-language therapy, occupational therapy, or physical therapy) within daily routines and activities enabling program providers to collaboratively learn and implement inclusive practices.

The local program:

1. Implements policies and procedures to support collaboration among program and specialized services staff during the daily routines of children with disabilities.
2. Identifies staff to coordinate services for families and children with disabilities.
3. Implements policies and procedures to ensure providers have access to needed specialized supports and resources to address individualized child and family strengths and needs. Special attention is given to shared purpose providing culturally responsive and sustaining assessments and intervention to children with disabilities with intersecting racial, linguistic, and cultural identities.
4. Implements policies and procedures to ensure program and specialized services staff work together to embed services in natural environments and daily routines and maximize learning from one another.

INDICATOR L8: Collaborative Teaming

The program provides adequate planning time and other supports for collaborative teams to work together on an ongoing basis to maximize the learning and development of children with disabilities.

The local program:

1. Establishes interdisciplinary teams that include individuals who share families' culture or language to help them support families and their children in ways that are culturally responsive and sustaining.
2. Establishes an appropriate staffing structure to ensure EI, special education, and related service providers can support providers in using inclusive practices and embedded services to meet the needs of children with disabilities and their families.
3. Establishes flexible staffing structures and scheduling to allow time to meet, plan, and problem solve.
4. Regularly reviews and assesses the effectiveness of collaboration.
5. Provides specific guidance on how to assess DLLs with suspected disabilities in their home language and English, using interpreters or bilingual providers as needed. Offers guidance on how to provide inclusive learning opportunities that foster the child's bilingualism and general development even when providers do not speak the child's home language.

INDICATOR L9: Specialized Technical Assistance and Consultative Services

The program identifies and accesses specialized technical assistance (TA) and consultative services to support the implementation of inclusive practices and communicates to the state any additional supports. Information on TA and consultative services are presented in relevant formats and languages that meet programs' needs.

The local program:

1. Makes providers aware of available state and local TA and support.
2. Gathers information from providers on additional TA and consultative services needed. Information is gathered using different forms, including focus groups, surveys, *etc.*
3. Develops a plan to access available TA and consultative services.
4. Communicates the need for additional supports to the Community Inclusion Team (CIT) or state as appropriate.
5. Establishes a plan for all providers to collaborate, plan, and problem-solve with specialized services staff.
6. Uses data to assess the effectiveness of the TA and consultative services.
7. Identifies and secures the availability of TA that addresses equity in special education. Technical assistance specifically includes topics related to the intersections between race, language, and disability, and how to effectively evaluate and provide services to children who are DLLs with suspected or identified disabilities.

8. Identify consultative services offered by experts who are members of the communities being served.
9. Identifies programs not receiving TA and implements it in those programs.

INDICATOR L10: Program Supports for Professional Development

The program builds provider confidence and competence in implementing inclusive practices. It provides opportunities and supports to engage in professional development (PD) and coaching that promotes equity.

The local program:

1. Systematically assesses provider strengths and needs related to use of inclusive practices.
2. Develops orientation and continuous professional development opportunities that address the intersections between race, ability and language.
3. Provides the necessary supports to use inclusive practices, such as practice-based coaching and mentoring for providers.
4. Provides release time and resources for providers to engage in meaningful, on-going, PD and coaching.
5. Evaluates the effectiveness of PD and its impact on the adoption and use of inclusive practices.
6. Has a process for providing PD to support newly hired providers.
7. Ensures TA or PD is accessible (free or low cost, during flexible hours or during PD days, in various formats and languages when appropriate) and meets program needs.
8. Ensures child outcome data are used to determine the content of the TA or PD, adapting it to provider needs.
9. Ensures providers receive PD that focuses on using inclusive practices, with job-embedded coaching and feedback loops.

INDICATOR L11: Curriculum

The program effectively uses a developmentally-appropriate curriculum that is adapted as needed. It provides children with disabilities inclusion experiences that foster their learning, agency, and socialization.

The local program:

1. Implements a curriculum that is adaptable to the strengths and needs of children with disabilities.
2. Provides provider training on how to adapt, accommodate, and modify the curriculum to meet the needs of children with disabilities.
3. Ensures providers understand and can apply the principles of universal design for learning for flexible and accessible instructional practices, materials, and environments.
4. Includes curricular support for DLLs with disabilities to ensure they are receiving overall development support and instruction that fosters their English and home language development.
5. Providers receive resources and guidance on supplementing curricula with materials, toys, and books that represent the rich diversity (racial, cultural, linguistic, and ability) of the children and families served.
6. Providers receive guidance on how to embed individualized learning opportunities for children with disabilities within existing curricula.

INDICATOR L12: Data Collection and Use

The program uses disaggregated data, (*i.e.*, race and ethnicity, language, ability, gender, income, geographic region), ongoing observation, and authentic assessment to make decisions and improve quality related to environment, inclusive practices, and child experiences.

The local program:

1. Collects data to make informed decisions about the implementation of inclusive practices, with availability to review intersectional data (for example, race × disability, race × disability × home language).
2. Uses multiple-sourced data to determine barriers to inclusion (for example, ableism, policy or resources, professional development, lack of coordination).

3. Systematically collects, analyzes, and uses disaggregated data related to:
 - The number of seats or slots available for children with disabilities within its program.
 - The number of children with disabilities on the program's waiting list.
 - The developmental outcomes of children with disabilities.
 - Provider satisfaction with and perceptions of inclusion.
 - Provider feelings of competence and confidence for including children with disabilities.
 - Family satisfaction with and perceptions of inclusion.
 - The number of children receiving their early intervention, special education, and related services in inclusive environments within its program.
4. Provides data from the program indicators to the Community Inclusion Team (CIT) and state agencies as needed.
5. Uses the Early Care and Education Environments (ECEE) inclusion indicators.
6. Provides regular data summaries in user-friendly formats to providers, families, relevant parties, and other ECE programs.
7. Evaluates the effectiveness of data collection processes on a routine basis.
8. Data for DLLs with disabilities include a home language survey, and data in English and their home language, as appropriate. When providers do not speak the children's home language, interpreters or community members are used to gather information about children's development and performance in both languages.

Suggested citation:

Early Childhood Technical Assistance Center, & National Center for Pyramid Model Innovations (2023). *Indicators of High-Quality Inclusion*. Retrieved from <https://ectacenter.org/topics/inclusion/indicators.asp>

The contents of this page were developed under a cooperative agreements #H326P220002 (ECTA Center) and #H326B220002 (NCPMI), from the Office of Special Education Programs, U.S. Department of Education. However, those contents do not necessarily represent the policy of the U.S. Department of Education, and you should not assume endorsement by the Federal Government.



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