

Coaching and Consultation Practices

IN EARLY CHILDHOOD



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Coaching and Consultation Practices in Early Childhood

by

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Typeset by Absolute Services Inc., Towson, Maryland.
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Library of Congress Cataloging-in-Publication Data

Names: Dinnebeil, Laurie A., author. | McInerney, William F., author.
Title: Coaching and consultation practices in early childhood / by Laurie A. Dinnebeil and William F. McInerney.
Description: Baltimore : Paul H. Brookes Publishing Co., 2023. | Includes bibliographical references and index.
Identifiers: LCCN 2022011384 (print) | LCCN 2022011385 (ebook) | ISBN 9781681254692 (paperback) | ISBN 9781681254708 (epub) | ISBN 9781681254715 (pdf)
Subjects: LCSH: Early childhood teachers—Professional relationships. | Early childhood teachers—In-service learning. | Mentoring in education. | BISAC: EDUCATION / Professional Development | EDUCATION / Schools / Levels / Early Childhood (incl. Preschool & Kindergarten)
Classification: LCC LB1775.6 .D56 2023 (print) | LCC LB1775.6 (ebook) | DDC 372.21—dc23/eng/20220422
LC record available at <https://lcn.loc.gov/2022011384>
LC ebook record available at <https://lcn.loc.gov/2022011385>

British Library Cataloguing in Publication data are available from the British Library.

2027 2026 2025 2024 2023

10 9 8 7 6 5 4 3 2 1

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Dr. Dinnebeil is Distinguished University Professor Emerita and, prior to her retirement from the University of Toledo, held the Judith Daso Herb Chair, Inclusive Early Childhood Education. Currently, she is a part-time consultant for the Ohio Center for Autism and Low Incidence Disabilities (OCALI) and a project director for federal and state-funded personnel preparation projects. She is past Editor-in-Chief for the *Journal of Early Intervention*. She is widely recognized as one of the experts on itinerant early childhood special education (ECSE) service delivery, as evidenced by her numerous publications, scholarly presentations, and externally funded projects related to this important topic. Dr. Dinnebeil and her colleagues focus on the importance of a consultative model of itinerant ECSE service delivery, that is, the critical need for early childhood intervention professionals to work in consultation with other adults (e.g., general early childhood teachers, child care providers, parents) to embed specialized services into children's daily routines and activities. In addition to her scholarship in this area, she and her colleagues have provided technical assistance and professional development opportunities to local, regional, and state education agencies across the country.

Dr. Dinnebeil has provided service to the early childhood community at the local, state, and national levels. At the local and state levels, she has served on numerous advisory boards and task forces related to improving the quality of early care and education programs for young children. At the national level, Dr. Dinnebeil has provided consistent leadership to the Division of Early Childhood of the Council for Exceptional Children. Within this venue, she has worked with other national leaders to provide guidance and assistance to federal policy leaders regarding high-quality services to young children with disabilities and their families.

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Dr. McInerney has served in a range of professional positions during his career in special education. He held a number of positions in the special education community in Connecticut and Ohio before completing the doctorate in special education. He was a professor in the College of Education at the University of Toledo, where he taught courses in early childhood special education, with a focus on graduate instruction. Dr. McInerney directed and co-directed the U.S. Department of Education (USDOE) Office of Special Education Programs (OSEP) personnel preparation and model demonstration grants during a 30-year university career. He and his colleague, Dr. Laurie Dinnebeil, have published and presented papers at numerous national and international professional conferences. Since retirement from full-time teaching, he has been engaged in USDOE OSEP grant activity, state-funded grant activities in Ohio, and on-site and virtual consultation with various state departments of education, early intervention agencies, and local education agencies related to coaching and consultation in early education services.

Preface

The content of this book was intended to be a revision of *Consultation in Early Childhood Settings* (Buysse & Wesley, 2005). As we began to review the content of the 2005 text, it became clear to us that much water had gone over the dam with respect to the current state of practice of consultation and coaching. At the time the 2005 book was published, there was very little activity in the field related to coaching and consultation. In fact, prior to the publication of the Buysse and Wesley text, most of the work in the area of consultation had been in the related services areas (Case-Smith & Cable, 1996; Hanft & Place, 1996). Coaching (Hanft et al., 2004) had barely entered the early childhood education lexicon by 2005.

Since the publication of the original Buysse and Wesley text, there has been an explosion of interest in coaching and consultation in early childhood settings. In fact, this rapid expansion of interest and promulgation of consultation and coaching content has occurred in the last decade with publications that focused on consultation and coaching in early intervention (McWilliam, 2010; Rush & Shelden, 2020); in preschool special education (Dinnebeil & McInerney, 2011); in early childhood education settings (Milbourne & Campbell, 2007; Snyder et al., 2015); in QRIS reviews of child care programs (Isner et al., 2011); and in preservice teacher education (Barton et al., 2013). At this point in the development of coaching and consultation practices, an entry into an Internet search engine of “consultation in early childhood” or “coaching in early childhood” will yield a number of resources, including books, articles, conference proceedings, and PowerPoint presentations.

As we developed the content of this book, we made every effort to preserve relevant content from the 2005 book, while providing information that was consistent with current and projected practices in collaborative coaching and consultation models. We think we have been successful in incorporating the spirit and focus of the Buysse and Wesley (2005) text in this expanded adaptation. Although the original book focused solely on consultation in early childhood settings, this adaptation focuses on both coaching and consultation across a range of early childhood environments and seeks to address the interests and needs of professionals who work with young children who are typically developing as well as those who have special needs or disabilities.

Readers of this edition will find new chapters on ways in which consultants or coaches can gather information about learning environments that is critical to understanding how to strategically develop a coaching or consultation plan. They will also find new information about the coaching process, including the use of several critical tools such as a guide for determining modes and intensity of instruction, curriculum planning matrices, implementation checklists to support adoption of evidence-based practices, and considerations for progress monitoring related to the coaching or consultation action plan. There is an expanded section on delivering effective performance feedback and supporting adults’ learning in the absence of the consultant or coach. From an administrative perspective, readers will find a new chapter on establishing ground rules for the development of a consultative or coaching relationship as well as a discussion of logistical issues that affect or impede the success of consultants or coaches. Readers will find sample letters of agreement or other documents they can reproduce and use to support successful coaching or consultation efforts.

In addition to new content, readers will also find a range of new resources that will enhance the learner’s experience. There are sample discussion questions, mini-case study vignettes and full

assignments associated with each chapter that instructors can use within the context of college coursework or professional development. We understand the importance of aligning all learning experiences to accreditation guidelines and have provided assignments that align with the new CEC-DEC Personnel Standards for Early Childhood Special Educators and Early Interventionists as well as the new NAEYC Standards for Professional Preparation. Finally, instructors will find downloadable PowerPoint presentations aligned to each chapter that they can use for in-person or online instruction.

A final note about the origins of this book and the prior publication experiences of the authors: Both authors have been interested in collaborative consultation and coaching models since their initial interactions in the mid-1990s that focused on the practice and models of itinerant preschool special education services. We have pursued those interests over the past 25 years. This has resulted in our awareness of the work of other professionals in this area and the incorporation of that content into this book. In addition, we have developed personal and professional relationships with some of the key figures in the coaching and consultation “business,” including Virginia Buysse and Pat Wesley. In a note of irony, following a day at a CEC-DEC conference in Portland, Oregon in 2008, we ran into Virginia and Pat at a local restaurant and joined them for a cocktail. We were aware of their work and they of ours. Virginia suggested, and quite directly as we recall, that we should find an editor and write a book about the itinerant preschool service delivery model. And so, an idea was born. We contacted Paul Brookes, and in 2011, with the guidance of Johanna Schmitter, we published our initial book, *A Guide to Itinerant Early Childhood Special Education Services*. In effect, this adaptation of Buysse and Wesley (2005) is repayment to Virginia and Pat for planting that seed.

We hope that readers find the book informative and helpful in shaping their approaches to collaborative consultation in early childhood settings. We encourage other early childhood professionals to pick up the mantle and continue the evolution of coaching and consulting services in early childhood setting.

REFERENCES

- Barton, E. E., Chen, C-I, Pribble, L., Pomes, M., & Kim, Y-A. (2013). Coaching preservice teachers to teach play skills to children with disabilities. *Teacher Education and Special Education*, 36(4): 330–349. doi: 10.1177/0888406413505113
- Buysse, V., & Wesley, P. W. (2005) *Consultation in early childhood settings*. Paul H. Brookes Publishing Co.
- Case-Smith, J., & Cable, J. (1996). Perceptions of occupational therapists regarding service delivery models in school-based practice. *The Occupational Therapy Journal of Research*, 16(1), 23–44. <https://doi.org/10.1177/153944929601600102>
- Dinnebeil, L. A., & McInerney, W. F. (2011). *A guide to itinerant early childhood special education services*. Paul H. Brookes Publishing Co.
- Hanft, B. E., Place, P. A. (1996). *The consulting therapist: A guide for OTs and PTs in schools*. PRO-ED, Incorporated.
- Hanft, B. E., Rush, D. D., & Shelden, M. L. (2004). *Coaching families and colleagues in early childhood*. Paul H. Brookes Publishing Co.
- Isner, T., Tout, K., Zaslow, M., Soli, M., Quinn, K., Rothenberg, L., & Burkhauser, M. (2011). Coaching in early care and education programs and Quality Rating and Improvement Systems (QRIS): Identifying promising features. *Child Trends*.
- McWilliam, R. A. (2010). *Routines-based early intervention: Supporting young children and their families*. Paul H. Brookes Publishing Co.
- Milbourne, S., & Campbell, P. H. (2007). CARA's Kit: Creating adaptations for routines and activities. Philadelphia: Thomas Jefferson University, Child and Family Studies Research Programs. Distributed by DEC. <http://www.dec-sped.org>
- Rush, D. D., & Shelden, M. L. (2020). *The early childhood coaching handbook* (2nd ed.). Paul H. Brookes Publishing Co.
- Snyder, P. A., Hemmeter, M. L., & Fox, L. (2015). Supporting implementation of evidence-based practices through practice-based coaching. *Topics in Early Childhood Special Education*, 35(3), 133–143. <https://doi.org/10.1177/0271121415594925>

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To all of the people that I've collaborated with to improve the lives of young children and their families. I've learned so much from all of you and appreciate the time that we've spent working together.

I also want to thank my family for supporting me every day and in every way. I love each and every one of you very much!

Laurie Dinnebeil

To my wife, Marcia. My loving partner, steadfast companion, and fellow traveler. Also, to my talented and compassionate daughters, Brigid and Shea, their husbands, and my grandsons, Owen and Andrew. These boys have brought me great joy.

Finally, a tip of the cap to early childhood educators across America. They are the unsung heroes of our society. Every day they provide encouragement, guidance, comfort and protection to our children and grandchildren, often without our collective acknowledgment or gratitude. Thank you.

Bill McInerney

Introduction to Models of Professional Collaboration

LEARNING OBJECTIVES

- Describe new roles for early childhood education (ECE) professionals.
 - Explain the essential elements of models of professional collaboration.
 - Demonstrate an understanding of the Division of Early Childhood (DEC)'s recommended practices regarding collaboration.
 - Describe research findings on models of professional collaboration.
 - Discuss professionals' comfort in collaborating with others.
-
- *Carol is a preschool special education professional who provides itinerant services to young children with disabilities who are enrolled in community-based early childhood programs, such as child care centers, Head Start settings, and private preschools.*
 - *Demetria works for a local early childhood mental health agency that provides technical assistance (TA) to early childhood professionals (ECPs) who are working with or caring for young children with behavioral challenges.*
 - *Claudia is a speech-language pathologist (SLP) who provides services to young children with language impairments who are enrolled in community-based early childhood programs.*
 - *Stefan is a child development specialist who works for a regional child care resource and referral agency. One of his jobs is to provide TA to ECPs who want to improve the overall quality of children's learning environments.*
 - *Jeni is employed by a state-funded educational support team. As part of her job, she provides training to ECPs focused on improving early literacy learning environments. She also provides TA to early childhood programs in her community.*

Carol, Demetria, Claudia, Stefan, and Jeni are all ECPs who are part of an expanding group of individuals whose roles have changed from working directly with young children to working indirectly with children through their collaborative work with ECPs who are responsible for the education of all young childrens. These role changes have taken place for three primary reasons:

1. Scientists and public policy leaders are increasingly recognizing the important role that early care and education has on supporting children's overall development and academic achievement. As a result, state and local communities are investing more in promoting quality early care and education settings for all young children, especially those at risk for developmental delays and difficulties.
2. State legislators and early care and education leaders are requiring documentation of the return on investment of dollars spent on improving the quality of early care and education settings for young children. As a consequence, programs are looking for effective ways to help early care and education providers improve children's learning environments and implement evidence-based practices (EBPs) designed to support children's development.
3. There is growing recognition of the benefits of inclusive environments for meeting the needs of all young children. With a renewed emphasis on the benefits of early childhood inclusion comes the need to find efficient and effective approaches to early intervention (EI) and early childhood special education (ECSE) service delivery.

NEW ROLES AND RESPONSIBILITIES FOR EARLY CHILDHOOD PROFESSIONALS

With degrees and professional credentials in ECSE, ECE, and speech-language pathology, Carol, Demetria, Claudia, Stefan, and Jeni entered their respective fields with the desire to work with and support the development of young children, and they have years of direct work with children under their belts. Their preservice preparation coursework and field experiences predominantly focused on working with children, with little emphasis on expanded roles as interdisciplinary team members, consultants, TA providers, or coaches (Stayton, 2015). As a result, at times they struggle to understand how to best support children and the early care and education professionals who work with them.

Even as ECE professionals struggle with new roles as consultants and coaches, the use of these relationship-based approaches continues to grow and expand (O'Keefe, 2017). For example, the new Head Start Performance Standards now mandate that Head Start programs must implement an evidence-based coaching strategy that provides intensive professional development to educators who have a demonstrated need to learn or enhance their skills and ability to work effectively with young children (Administration for Children, Youth and Families, 2019). First 5 in Alameda County, California, recognized the importance of coaching as a professional development strategy related to state initiatives targeting program quality. The program leaders found that many experienced leaders in its programs lacked the knowledge, skills, and expertise to serve as coaches to ECE professionals and developed a suite of resources designed to prepare individuals to serve in coaching roles (Bansal, 2013).

In a publication focused on defining forms of TA and professional development, the National Association of Child Care Resource and Referral Agencies and National Association for the Education of Young Children (NAEYC, 2011) categorized coaching, consultation, mentoring, professional development advising (i.e., career advising), and peer-to-peer TA as forms of TA. They defined TA as "the provision of targeted and customized supports by a professional(s) with subject matter and adult learning knowledge and skills to develop or strengthen processes, knowledge application, or implementation of services by recipients" (2011, p. 9).

The purpose of this book is to support any early care and education professional whose job is to work with other early care and education professionals who work directly with children.

We hope that by reading this book, early care and education professionals will become more knowledgeable about collaborating with others using coaching and consultation strategies. We begin this chapter with a discussion about effective strategies for professional learning (i.e., professional development) and end with an outline of a coaching and consultation process grounded in research and useful in implementing coaching or consultative models of professional collaboration with others.

“Professional learning” is a new term that is used in place of the term “professional development” or “training.” In education, the term “professional learning” emphasizes the importance of educators who are engaged in continual learning in order to improve their effectiveness. High-quality professional learning experiences share a set of characteristics that are reflected in the Every Student Succeeds Act (ESSA) of 2015 (PL 114–95; Mathis & Trujillo, 2016). These standards are based on what science reveals about how adults learn (Bransford et al., 2000), and they emphasize the importance of professional development activities that are sustained (not stand-alone, 1-day, or short-term workshops), intensive, collaborative, job embedded, data driven, and classroom focused (Learning Forward, n.d.). Next is a brief discussion of each of the characteristics of high-quality professional learning experiences.

Professional Learning Is Sustained

Humans learn best when opportunities for learning are spaced across time (Bransford et al., 1999). Learning takes time. Although cramming for a test the night before might help a learner to perform better on the test, it does little to promote understanding and meaning of key concepts. Just as children learn key concepts through revisiting them and deepening their knowledge (Bredenkamp & Rosegrant, 1992), so do adult learners. This means that traditional “one shot” in-service trainings do little to promote learning, understanding, and most important of all, application of learning to practice (Snyder et al., 2011). Educators need time to learn about key concepts and skills—they also need time to learn how to apply these key concepts and skills to their work with young children.

Professional Learning Is Intensive

As all educators know, learning not only takes time, but depending on the targeted knowledge or skill, it can also be an intensive process that begins with acquisition and ends with generalization (Haring et al., 1978). At this stage, learners are just beginning to acquire a skill and will need support in order to perform the skill accurately and dependably. They need help and support from others, which can include modeling, demonstration, and the provision of performance feedback (reference). Once learners have acquired a skill, they need multiple opportunities to practice and receive feedback to improve fluency. After reaching a desired level of fluency, learners need to maintain the learning goals—a stage that focuses on helping learners maintain the accurate and appropriate use of the skill without support. Generalization is the final stage of the learning process and occurs when learners can use a particular skill in settings that differ from the original learning context. For example, a teacher may learn how to provide positive reinforcement to Susannah and may extend this strategy to other children in the classroom who need increased levels of positive reinforcement.

Learning Is Collaborative

Early childhood educators appreciate the wisdom of Vygotsky (Berk & Winsler, 1995), who emphasized that learning is a social process that is strengthened when learners have opportunities to engage with information and knowledge as well as others, including more competent learners.

Just as children learn more efficiently when they have access to more competent peers and adults who support them, so do adults. As a social process, learning involves interactions with others who can provide support and scaffold progress toward the maintenance and generalization of a skill. The most effective kind of adult support is collaborative in nature and includes individuals who respect and acknowledge the expertise of learners. Developing a collaborative relationship takes time and involves growing mutual respect as well as a comfort level that allows learners to take risks and accept feedback from others.

Learning Is Job Embedded and, for Teachers, Classroom Focused

Principles of adult learning (Bransford et al., 2000) suggest that adults appreciate learning opportunities that occur within the context of a specific setting. For example, learning how to read aloud to young children is most effective when a person has opportunities to read aloud to young children. Learning how to use a piece of software is best learned when engaged with that software. Lave and Wenger (1991) argued that effective and efficient learning is situated within an authentic learning site. For educators, this means the classroom or wherever they work with children. The importance of situated learning is consistent with the principles of job-embedded professional development (JEPD). JEPD refers to learning that is grounded in a person's daily practices (Croft et al., 2010). JEPD represents a growing concern with education and professional development that is isolated and disconnected from an individual's daily practice. Providing professional development experiences that are tied to the learner's professional practice increases the likelihood that the learner will apply new knowledge and skills to their job. It aids learners in applying research into practice—a primary goal of the field of education (Darling-Hammond et al., 2009).

Learning Is Data Driven

Teaching and learning involves a decision-making process that is based on evidence. ECPs need information about children and their learning environments in order to make sound decisions about how to best support them. By the same token, educators engaged in collaborative professional learning processes need data and information in order to identify sound goals for professional learning as well as to develop solid strategies to promote adult learning.

MODELS OF PROFESSIONAL COLLABORATION: PROMISING PRACTICES TO SUPPORT PROFESSIONAL LEARNING

The recent focus on the use of models of professional collaboration, such as coaching and consultation, reflects the profession's interest in effective professional learning practices, as described previously. In the past, individuals interested in models of professional learning and collaboration (including us) have sought to differentiate coaching and consultation within the realm of early childhood settings (Dinnebeil et al., 2008). Both processes are regarded as systems of professional learning. They are process-oriented approaches that take place over time at an individualized level of intensity matched to the learner's needs, characteristics of the learning goal, and the learning environment. Models of coaching and consultation are individualized and are tailored to meet the needs of the issue at hand (e.g., embedding individualized education program [IEP] objectives into daily routines, enhancing early literacy environments, promoting school readiness initiatives). Both are dependent on the relationship between the coach/consultant and the learner. Both are triadic in nature in that consultants or coaches work with other adults (e.g., teachers, paraprofessionals) who work directly with children and/or families. Both are job embedded, which means they take place within the context of a classroom or other educational setting. Finally, both

consultation and coaching rely on the use of sound data to make decisions that drive the consultation and coaching processes.

As similar as consultation and coaching are, they differ in the specificity of assistance provided. We believe that coaching is a more hands-on method of providing professional assistance and is characterized by a process in which coaches support skill-building in learners through episodes of modeling or demonstrating, observing, and providing feedback (). In a systematic literature review of the early childhood coaching literature, Artman-Meeker and colleagues (2015) reported that the provision of performance feedback was a central component of the coaching studies included in their review. Other key components of coaching included 1) a focus on collaboration or partnerships between coaches and learners, 2) action planning, 3) focused observation, 4) reflection and feedback, and 5) action in the workplace (i.e., coaching is embedded within the learner's job setting). Recent literature reviews suggested that coaching is an effective form of professional development that is linked to improved teacher performance and enhancement of teaching skills (Snyder et al., 2011

Models of Coaching

Following are several examples of coaching models implemented in early care and education.

Practice-Based Coaching Practice-based coaching (PBC) refers to a process of professional development that focuses on supporting teachers to implement effective instructional practices that facilitate young children's development and academic success (Snyder et al., 2015). The National Center on Quality Teaching and Learning (NCQTL; 2019) suggested that PBC can occur at three different levels: expert coaching, peer coaching, and self-coaching. Both expert and peer coaching begin with the premise of a collaborative partnership between coaches and learners, one in which both members of the coaching team (coach and learner) contribute to the professional development process. The NCQTL also stated that coaching can occur after participants attend workshops or in-service trainings or it can stand alone as a professional development approach. PBC is a process that consists of three phases or components: 1) planning and shared goal setting, 2) focused observation, and 3) feedback and reflection.

Rush and Shelden's Coaching Model Another model of coaching that has been used primarily in the field of EI is the reflective coaching model developed by Hanft, Rush, and Shelden (2004). With its roots in transdisciplinary teaming, this coaching model emphasized the capacity of early interventionists to serve as coaches to providers from other disciplines as well as to families of young children with disabilities. Rush and Shelden's model of coaching includes the following components: 1) joint planning, 2) observation, 3) actions or real-life situations that occur within the context of the learner's routine that permit the coach to assist the learner in gaining new skills or enhancing existing skills, 4) reflection on the degree to which the learner's performance or use of strategies is consistent with EBPs, and 5) feedback provided by the coach to the learner that is designed to support the learner's performance and/or understanding of EBPs.

MyTeachingPartner MyTeachingPartner (MTP) is a web-mediated approach to professional learning that supports educators to improve interactions with their students, which, in turn, results in improvements in student outcomes (Center for Advanced Study of Teaching and Learning, 2019). MTP was originally developed to support the professional learning of preschool teachers and was closely aligned with the Classroom Learning Assessment Scoring System (Pianta et al., 2008). Within this approach, early childhood educators engage in consultation from a distance with consultants who are experts in evidence-based child interaction strategies (e.g., asking meaningful questions, extending discourse, supporting peer interactions). Early childhood educators engaged in MTP videotape themselves interacting with children and send these videotapes to consultants using the Internet. Consultants view the videotape and provide

specific performance feedback associated with specific teaching practices. In a series of studies, researchers associated with MTP demonstrated the efficacy of the model in terms of supporting educators' use of evidence-based interaction practices that lead to enhanced student outcomes.

Models of Consultation

Although models of coaching can be considered as more skill focused and intensive in nature, models of consultation within the field of early care and education are generally broader in nature and are less hands on. Consultation is generally considered to be less direct and more generalized in terms of skill-building and focuses more on discussion, information exchange, and advice-giving (Dinnebeil et al., 2008). Although there are differences between models of coaching and consultation, in reality, their similarities far outweigh their differences. In fact, in their systematic review of the professional development literature, Snyder et al. (2011) combined coaching and/or consultation as a specific model of professional development. We believe that integrating coaching and consultation can result in an effective model of professional collaboration that focuses on providing help and support to those early care and education professionals who are working to improve the quality of early care and education settings or providing specialized instruction and services to young children.

The term "consultation" is used to describe a process of supporting or helping another individual or group of individuals across many fields and disciplines, including mental health (Brown et al., 1998) and education. It is important to distinguish models of mental health consultation that are therapeutic in nature from behavioral or problem-based consultation, which is the focus of this book. Although the mental health model of consultation focuses more on the interpersonal aspects of relationships, the behavioral model of consultation is more relevant to the work of consultants who work within the fields of ECE and early childhood intervention (Buysse & Wesley, 2005).

The behavioral model has contributed to the development of consultation and influenced its theory and practice. Bergan's (1977, 1995; Kratochwill & Bergan, 1990) problem-solving approach to consultation was based on principles of behaviorism and operant learning that consider behavior a function of environmental factors that can be controlled by people in the environment to produce desired changes. Because the behavioral model is based on sound theoretical foundations and a systematic problem-solving paradigm with clear action steps, it remains the most widely used model by practitioners in U.S. schools and has been validated empirically more than any other approach (Brown et al., 1998; Zins & Erchul, 2002).

Henning-Stout (1993) identified the problem-solving orientation as one of the most generalizable and empowering skills that a consultee (the recipient of consultation) can gain from the behavioral approach to consultation. In consultation, "problem" is defined as the discrepancy between the actual situation and an ideal state. In behavioral consultation, this discrepancy between what actually exists (e.g., a child with severe physical disabilities and no means of verbal communication) and what the consultee desires (e.g., a way for the child to communicate their choice of foods during snack time) brings the consultant (the provider of consultation) and consultee together in the first place. Dougherty (2000) noted that the goal of all consultation is to solve problems. He further suggested that the term "problem" does not necessarily imply that something is wrong with the client or the consultee but, rather, refers more broadly to an undesirable situation requiring change.

The consultee and consultant work together to identify and define the problem and jointly create an intervention that is acceptable to the consultee (e.g., teaching the child to use a picture communication system). The immediate goal in most situations is to remediate an area of concern identified by the consultee; however, assisting the consultee to reframe a problem (i.e., view it from different perspectives) and helping them to prevent similar problems from occurring in the future often constitute less explicit but equally important goals of behavioral consultation. As a result,

behavioral consultation can be viewed as a powerful tool for producing positive changes in the client as well as enhancing the knowledge and skills of the consultee.

The behavioral consultation model consists of a series of specific activities within four problem-solving stages: problem identification, problem analysis, plan implementation, and problem evaluation. One of the most controversial aspects of this approach concerns the extent to which the consultant should exercise control over the consultee through various communication strategies to facilitate the process and ensure the effectiveness of the intervention (Brown et al., 1998; Erchul & Martens, 2002). Similar to models of coaching, consultation can be provided by experts or peers. We agree with Dettmer, Thurston, and Dyck (2013), who emphasize the need to develop collaborative approaches to consultation in which both the consultant and the consultee are valued partners in their work. Both bring to the consultation table knowledge and skills that are relevant and necessary for success. Although consultants might have specialized knowledge or expertise concerning the problem or issue that is the focus of consultation, consultees (i.e., educational professionals) also bring specialized knowledge or expertise about a child, a group of children, or the education setting that is necessary and critical to the success of the consultative work. Within models of collaborative partnerships such as coaching or consultation, Dettmer and colleagues argued that practices such as communication, sharing, joint planning, contributing, compromising, modeling, and acknowledging are valued components.

OVERVIEW OF ORIGIN AND SCOPE OF CONSULTATION IN EARLY CHILDHOOD INTERVENTION

The consultation model has become an established practice in early childhood intervention (defined as special education and related services provided to young children with disabilities from birth through 5 years of age). The model has come into practice as the result of the evolution of team interaction models, from the multidisciplinary model, to the interdisciplinary model, to the current model of choice: the transdisciplinary model (King et al., 2009). Other key constructs and practices that have been promulgated since the 1980s have supported and accelerated interest in consultation as a professional practice model. Role release (Olson et al., 1998) described a process through which professionals from different fields or professions could share proprietary knowledge and skills. It involved a sequence of intentional interactions with other members of an intervention planning team that was designed to improve the awareness of other team members about discipline-specific (e.g., occupational therapy) practices. The intended outcome of role release was for all team members to have a holistic view of child development and to understand the benefits of collaborative planning and intervention. Furthermore, team members could teach other team members how to provide targeted intervention services across the day, in a variety of activities that occurred in natural settings. While recognizing distinctions in professional training and licensure status, team members could use role release to teach other team members how to address motor, language, communication, cognitive, and play skills through the use of practices taught to them by the discipline-specific professionals. Physical therapists could demonstrate, provide video footage, and create stick-figure images of how to position children to improve their functional skills and enhance their opportunities for interaction with other children in the early learning setting.

The intent of role release was not to undermine the authority or primacy of discipline-specific practice but rather to understand the limitations of discipline-specific intervention delivered by related services professionals once or twice a week, or via some other episodic schedule for intervention. Although role release recognized the extensive caseloads of many related services professionals, it also recognized the potential of helping other team members support therapeutic gains in the absence of the related services professional. The resulting fluency and sophistication of support provided by the classroom teacher, for example, to the child initiating use of an augmentative and alternative communication (AAC) device, as a result of role release, was not

intended to be as proficient and informed as that of the SLP. Encouraging related services professionals to participate in the role release process resulted in related services professionals becoming more aware of functional opportunities in the early learning setting. This allowed related services professionals to suggest intervention opportunities and practices that could be embedded into typical routines that occurred in the home, child care settings, and preschool classrooms versus more traditional and clinical forms of related services interventions (i.e., pull-out therapy services). It is important to understand that role release-derived practices were not expected to be as polished or powerful as those provided by related services professionals (e.g., teacher, SLP, occupational therapist, physical therapist). Rather, they were intended to supplement and complement discipline-specific intervention, particularly in the absence of related services professionals in the early learning environment. This outcome is a win-win for the child, their family, and the members of the intervention team (i.e., individualized family service plan [IFSP] or IEP team). The learning environment, post-role release training, would feature integrated intervention and therapy services (Olson et al., 1998) supported by a team of informed personnel who knew more about the child's functions and needs, and the rationale and form of service delivery of key intervention services, across disciplines, than they knew before they participated in a role release model of intervention.

Although role release is a cornerstone of consultation and transdisciplinary intervention, and a column that supports the consultation model, other initiatives have contributed to the advancement of the consultation model. During the 1990s there was a surge in interest in consultation as a form of practice to balance clinical approaches, particularly in the related services professions. Early work by Pip Campbell (Campbell, 1987), Winifred Dunn (Kemmis & Dunn, 1996), Barbara Hanft (Hanft & Place, 1996), and Jane Case-Smith (Case-Smith & Cable, 1996) advanced consultation as a complementary approach to service delivery, particularly with pediatric populations. The three major professional advocacy associations that currently support related services professionals (American Occupational Therapy Association [AOTA], American Physical Therapy Association [APTA], and American Speech-Language-Hearing Association [ASHA]) have issued guidelines for consultation services. The practice of consultation is particularly appropriate in multidisciplinary fields such as education, in which children are not restricted to treatment facilities and, once again, in which caseloads of related services professionals are often excessive.

Using role release and intervention outside of direct, clinical practice, the field moved forward in expanding the scope and focus of consultation services. Public advocacy and regulatory agencies employed field consultants to oversee compliance of regulated agencies (e.g., child care homes, child care programs, preschool programs in which children with special needs were enrolled, Head Start) with operating and child development guidelines. Consultants also attended mandatory or voluntary licensing and rating programs supported by child care advocacy agencies or state agencies. They also participated in record review, onsite observations, and recommendations for compliance or remediation. This consultation role involved observation of program operations, review of program compliance with licensing and regulation requirements, and review of staff qualifications. This form of consultation is relatively passive and reactive in nature. The outcome usually results in a finding of compliance, compliance with qualifications with a remediation response plan required, or failure to comply with a recommendation for sanctions or loss of accreditation. The consultant may become engaged with the program or center in designing or executing the remediation plan. The consultant also may recommend resources or agencies that are positioned to provide assistance to the center or program in meeting requirements for compliance or in retaining compliance.

The consultant also can function in a focused remediation role. This role can be solicited by a program or agency or can be required as an outcome of licensure or accreditation review. The most active role of the consultant, and the focus of this book, is that of a partner in informing and

enhancing intervention services through a long-term professional relationship. In order to support a coach in this active role as a change agent, a number of logistical concerns need to be addressed (see Chapter 6).

RESEARCH ON THE EFFICACY OF BEHAVIORAL CONSULTATION AND COACHING

Ongoing work by Dinnebeil, Barton, Buysse, and Kruse (in preparation) suggests that consultation and coaching in early childhood can lead to positive and impactful results. In a meta-analysis that included 38 single case design studies (SCDS), we calculated Tau-U estimates (Parker et al., 2018) for all studies and found average Tau-U estimates by dependent variable within each study (most of the studies generated multiple Tau-U estimates) ranged from -1.0 to 1.0 . The mean Tau-U estimate was .421, the median Tau-U estimate was .693, and 47% of the studies found a strong effect for the independent variable (i.e., coaching and consultation).

Of the 28 studies for which we could calculate BC-SMD effect sizes, we found a median BC-SMD effect size was 1.15 with a standard error of .52, lower confidence interval of .38, and an upper confidence interval of 2.23. Harrington and Velicer (2015) suggested that one can interpret BC-SMD effect sizes as follows: Effect sizes ranging from 0.00 to .99 can be classified as small, effect sizes between 1.0 and 2.49 can be classified as medium, and effect sizes 2.50 or greater can be classified as large. This would suggest that for the studies included in this meta-analysis, there is a medium positive effect for coaching or consultation on teacher outcomes.

Research on the efficacy of educational coaching models suggested that it is an effective way to help education professionals support all young children's development and school readiness (Artman-Meeker et al., 2015; Dinnebeil et al., in preparation). Through a randomized control study, Snyder and her colleagues (2015) found that preschool teachers whose professional development included a coaching component were more likely to embed literacy-based instructional interventions into the curriculum as opposed to preschool teachers whose professional development did not include a coaching component.

Our research and the research of others (Artman-Meeker et al., 2015; Dinnebeil et al., in preparation; Snyder et al., 2015) provide strong evidence that consultation and coaching in early childhood settings are effective approaches to helping ECPs learn and apply new skills and strategies in their work with young children. We strongly believe that these models are useful in supporting the development of all young children. Although previously we have sought to differentiate consultation from coaching (Dinnebeil et al., 2008), we believe that the similarities between both approaches outweigh the differences and that it is time to regard consultation and coaching as a single model of professional collaboration.

CONSULTATION AND COACHING IN EARLY CHILDHOOD: A MODEL OF PROFESSIONAL COLLABORATION

Based on growing knowledge in the field, we have adapted the Buysse and Wesley (2005) definition of "consultation" to include a focus on coaching. The definition is as follows: In early education and intervention, "consultation and coaching" is defined as an indirect, triadic service delivery model in which a consultant or coach (e.g., early childhood special educator, early childhood educator, therapist) and a learner (e.g., ECP) work together to address an area of concern or a common goal for change. Through a series of meetings and conversations, the consultant or coach helps the learner through systematic problem solving, social influence, feedback, and reflection. In turn, the learner helps children with full support and assistance from the consultant/coach. The purpose of consultation and coaching is to address the immediate concern or goal as well as to prevent similar problems from occurring in the future.

DETERMINING THE GOALS AND PURPOSE OF CONSULTATION AND COACHING

The early childhood field has not reached consensus regarding the purpose and goals of consultation. Professionals who are thrust into a consultant role because of inclusive policies and practices often express confusion about consultation and wonder about its effectiveness (Dinnebeil et al., 2001; Sadler, 2002). Buysse and Wesley (2005) confirmed these conclusions, suggesting that professionals in consultation roles in natural environments are not always sure who their client is and wonder whether to focus their intervention efforts on the child, family, teacher, or program (Wesley et al., 2001). Likewise, they do not know which consultation and coaching methods are best suited to address various goals or if these methods even exist. The confusion stems, in part, from the fact that most states have not articulated how indirect services in early education and intervention should be provided, nor have they defined the specific roles and responsibilities of professionals who provide these services (Dinnebeil et al., 2001). With little to guide them, consultants/coaches in early education and intervention often borrow strategies from more familiar models of collaboration and help-giving, such as family-centered practices, but they may not have a clear understanding of the purpose and goals of consultation. It is our contention that the purpose of consultation and coaching can encompass any number of goals that generally fall under the following areas: addressing a child's individual needs, changing or improving the consultee's practices and beliefs, and improving global program quality. However, in order to successfully implement these models of professional learning and collaboration, individuals engaged in coaching or consultation relationships need a roadmap or toolbox in order to help them logically sequence and implement their work.

WHO PROVIDES CONSULTATION AND COACHING IN EARLY CHILDHOOD SETTINGS?

As shown in the learning objectives of this chapter, individuals with many different backgrounds serve as consultants or coaches in early childhood settings, including preschool classrooms, child care centers, Head Start classrooms, and ECSE classrooms. One of the unfortunate traits they share, however, is a lack of professional training interdisciplinary work, such as coaching or consultation (Stayton, 2015). Individuals who take on roles as consultants or coaches very rarely receive professional training for this important job. This may be because the early childhood field has not reached consensus regarding the purpose and goals of consultation. Professionals who are thrust into a consultant role because of inclusive policies and practices often express confusion about consultation and wonder about its effectiveness (Dinnebeil et al., 2001; Sadler, 2003). Research by Wesley, Buysse, and Skinner (2001) confirmed these conclusions, suggesting that professionals in consultative or coaching roles in natural environments are not always sure who their client is and wonder whether to focus their intervention efforts on the child, family, teacher, or program. Likewise, they do not know which consultation and coaching methods are best suited to address various goals or if these methods even exist.

The confusion stems, in part, from the fact that most states have not articulated how indirect services in early education and intervention should be provided, nor have they defined the specific roles and responsibilities of professionals who provide these services (Dinnebeil et al., 2001). For example, in Ohio, the operating standards for preschool special education speak specifically to the itinerant early childhood service delivery approach (Ohio Department of Education, 2014). When Dinnebeil and colleagues (2001) began their research regarding the itinerant service delivery model in the mid-1990s, the Ohio operating standards for preschool special education provided no guidance as to what itinerant preschool teachers should do during their visits to children on their caseloads. Since then, the operating standards have become more specific, citing that "itinerant services for a preschool child who is eligible for special education services" means services provided by intervention specialists or related services personnel which occur in the setting

where the child, the child and parent(s), or the child and caregiver are located as opposed to services provided at a centralized location” and that “services may be provided directly to the child or provided to the child using a consultative model. Consultative services may include all staff involved with the preschool child who is eligible for special education.” The ambiguity in these standards underscores the difficulty that individuals such as itinerant ECSE teachers have to guide their work. Although the newest operating standards include language that allows preschool itinerants to engage in consultation (and presumably, coaching), there is still very little direction or information about the circumstances under which these should occur.

RESEARCH ON HOW CONSULTATION AND COACHING IS USED IN EARLY EDUCATION AND INTERVENTION

Although there is research demonstrating the efficacy of consultation and coaching, there is still little research about how educators implement consultation and coaching models in early childhood settings.

In addition, although a great deal of research has occurred regarding the efficacy of consultation and coaching, most of it has been conducted using researchers as consultants or coaches as opposed to early childhood educators (Artman-Meeker et al., 2015; Dinnebeil et al., in preparation). As mentioned previously, research examining consultation and coaching practice in early education and intervention is limited. Extant research has examined early education professionals’ beliefs and perceptions about the processes of consultation but has not investigated the effectiveness of consultation by using randomized, controlled studies.

Much of the existing research has served to underscore professionals’ lack of comfort with the consulting role. Dinnebeil and colleagues, for example, found that 91% of special educators who served as itinerant teachers reported using consultation, but most also reported being uncomfortable with specific strategies that primarily involved direct contact with the early childhood classroom teacher; most of the strategies that they used frequently involved providing direct services to children (Dinnebeil et al., 2001).

In related research, Wesley, Buysse, and Keyes (2000) and Wesley et al. (2001) conducted several studies that employed focus groups and structured interviews to examine the ways in which consultants viewed their work, particularly with respect to factors that contribute to or reduce their professional comfort and whether there exists a shared understanding of the meaning of consultation practice. The major conclusion from this line of research was that consultants’ comfort with consultation was affected by multiple factors, including the characteristics of the child, the consultee, and the program, as well as their own knowledge and skills and the availability of resources.

Child Characteristics Consultants described greater discomfort when the child had a severe disability or multiple disabilities, especially sensory deficits or behavioral challenges. More severe disabilities caused greater discomfort because consultants did not believe that they had the expertise they needed to provide all the answers. These results are somewhat troubling because they echo the findings from an earlier study in which the comfort level of child care providers was found to decrease as the severity of the child’s disability increased (Wesley et al., 2000). These findings also raise questions about how consultation can be an effective method of service delivery in situations in which both the consultee and the consultant experience discomfort with the severity of a child’s disability.

Consultee Characteristics Although consultants stated that one of the purposes of their consultation was to help consultees acquire new educational beliefs and practices, they expressed frustration when these beliefs and practices differed from their own. Some consultants mentioned that it was necessary to convince consultees that the consultant was not there

to monitor the quality of the teaching in the classroom. Another concern was that consultees did not have the same expectations as the consultant for the consultant's role and responsibilities in the classroom. One of these differences concerned the expectation of consultees that consultants would pull children out of the classroom for special instruction or therapy. Consultants viewed this approach as exemplifying a belief among consultees that it was possible to apply quick fixes or magic tricks to address complex problems and that the primary responsibility for the child's welfare rested with the consultant. Where families were concerned, comfort with consultation had to do with consultants' perceptions of how stable or resourceful families were. Their comfort increased when families were perceived as having the ability and resources to carry out activities suggested for the child and decreased when families denied the existence of their child's disability.

Program Characteristics Another major source of comfort or discomfort originated from characteristics of the programs that served as consultation sites. An inadequate staff-child ratio, a large group size, a curriculum that was not developmentally appropriate, high staff turnover, and low staff qualifications were all factors that created challenges and professional discomfort for consultants. Consultants described the challenges of providing consultation in a wide range of early childhood environments, from low-quality programs with few material resources and inadequate teacher preparation to academically focused programs in which children were required to sit and complete worksheets for long periods. Some consultants expressed uncertainty about whether the purpose and goals of consultation could encompass improving the global quality of the early childhood program as well as addressing the individual priorities and needs of a particular child. Others viewed inadequate program quality as an obstacle to effective consultation but did not view action in this area as part of their responsibility as a consultant. Still others expressed a belief that consultation related to a specific child could be used as a stepping stone to address issues related to the broader program in that child-specific recommendations would improve the consultee's knowledge and skills and eventually benefit other children.

Consultant Characteristics The majority of consultants did not elaborate on the possibility that there were characteristics about themselves that affected their professional comfort with consultation. Many identified a tension between being a generalist and a specialist or an expert. Although the consultants (whose backgrounds were primarily in ECE or ECSE) viewed expert status as conveying power, many sought to avoid this designation and made efforts to distinguish themselves in attitude and actions from other specialists such as SLPs and physical therapists. This was largely due to consultants and consultees in the studies perceiving these other specialists as not willing to get their hands dirty and participate in the day-to-day routines of the classroom. Yet, consultants also expressed the need to establish credibility in the eyes of their consultees, and this required specialized content knowledge about all conditions they encountered. Although consultants suggested that better communication skills would take them beyond merely providing information to increasing the likelihood of achieving consultation goals, they also described limited time for meaningful communication and dialogue with classroom staff.

Resources Consultants also indicated that their professional comfort increased with the availability of resources such as additional information and training about the process and outcomes of consultation practice. They also identified the following as needed resources: team collaboration, flexible funding, and access to content experts and print materials on a wide range of topics. Many expressed an interest in obtaining information about research on consultation effectiveness in early education and intervention, particularly regarding whether children who received direct versus indirect services through consultation made more or less progress.

Based on the professional literature regarding coaching and consultation, we present a theoretical framework for consultation and coaching in early childhood settings that consists of four primary stages:

Stage 1: Building rapport and establishing ground rules for collaboration

Stage 2: Observing and gathering information

Stage 3: Developing and implementing a plan of action

Stage 4: Reflecting on and evaluating the success of the plan

Understanding these stages will help those involved in coaching or consultation efforts to better appreciate their roles and responsibilities and can help guide progress toward achieving the professional goal of the relationship.

SUMMARY

This chapter discussed the reasons why coaching and other models of professional collaboration have become so prevalent in ECE today. It examined different models of professional development, including coaching, consultation, professional development, and TA as well as recent research findings that support the use of these models when supporting early childhood teachers who are interested in improving classroom practice. Finally, the chapter outlined the essential steps that should compose any model of professional collaboration. These steps include 1) building rapport and establishing ground rules for collaboration, 2) observing and gathering information, 3) developing and implementing a plan of action, and 4) reflecting on and evaluating the success of the plan.

DISCUSSION QUESTIONS

1. Have you ever worked with a consultant or coach in an early childhood setting? Describe the experience—what about it was helpful to you as a classroom teacher? What was challenging about the experience?
2. Have you ever provided consultation or coaching to another person in an early childhood setting? Describe the experience—how successful was it? What was the most challenging aspect of the role for you? If you could do it over again, what would you do?
3. What are the most effective forms of professional development for you? That is, what is the best way for you to learn a new skill or instructional practice as an education professional? How would you use that information to serve as a coach or a consultant to another person?
4. What do you believe is the best way to prepare ECPs to serve as consultants or coaches to others?

ACTIVITIES

1. Interview someone who serves as a coach or a consultant to an early childhood program. Find out about this person's background and how their background contributed to their success as a coach or a consultant. What are this person's favorite aspects of their job? What do they find most challenging?
2. Write a job description for someone who will serve as a consultant or a coach of an early childhood program. What minimum previous work experiences should you require in the job description?

What would be the minimum degree requirements associated with this position? What would be preferred qualities or experiences that you would like to see candidates for the job possess? Provide a rationale for the minimum work experiences, the degree requirements, and the preferred qualities or characteristics you identified.

3. Pretend you are an administrator who is hiring a consultant or a coach to support early childhood programs. List five questions you would ask this person, and discuss why you think those questions are important.

REFERENCES

- Administration on Children, Youth and Families according to Brookes Word List. (2019). Head Start Performance Standards 45 C.F.R. § 1302.92. <https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii/1302-92-training-professional-development>
- Artman-Meeker, K., Fetting, A., Barton, E. E., Penney, A., & Zeng, S. (2015). Applying an evidence-based framework to the early childhood coaching literature. *Topics in Early Childhood Special Education, 35*(3), 183–196. doi:10.1177/0271121415595550
- Bansal, S. (2013). *Effective coaching in early care and education: Training manual*. First 5 Alameda County. http://www.first5alameda.org/files/ece/Quality_Child_Care/Complete-Administration_of_ECE_Coaching_Binder.pdf
- Bergan, J. R. (1977). *Behavioral consultation*. Merrill.
- Bergan, J. R. (1995). Evolution of a problem-solving model of consultation. *Journal of Educational and Psychological Consultation, 6*(2), 111–123.
- Berk, L. E., & Winsler, A. (1995). *Scaffolding children's learning: Vygotsky and early childhood education*. NAEYC research into practice series (Vol. 7). National Association for the Education of Young Children.
- Bransford, J. D., Brown, A. L., & Cocking, R. R. (2000). *How people learn* (Vol. 11). National Academies Press.
- Bransford, J. D., Brown, A. L., & Pellegrino, J. W. (1999). *How people learn*. National Research Council.
- Bredenkamp, S., & Rosegrant, T. (1995). *Reaching potentials: Transforming early childhood curriculum and assessment* (Vol. 2). National Association for the Education of Young Children.
- Brown, D., Pryzwansky, W. B., & Schulte, A. C. (1998). *Psychological consultation: Introduction to theory and practice* (4th ed.). Allyn & Bacon.
- Buysse, V., & Wesley, P. W. (2005). *Consultation in early childhood settings*. Paul H. Brookes Publishing Co.
- Campbell, P. H. (1987). The Integrated Programming Team: An Approach for Coordinating Professionals of Various Disciplines in Programs for Students with Severe and Multiple Handicaps. *Journal of the Association for Persons with Severe Handicaps, 12*(2), 107–116. <https://doi.org/10.1177/154079698701200204>
- Case-Smith, J., & Cable, J. (1996). Perceptions of occupational therapists regarding service delivery models in school-based practice. *The Occupational Therapy Journal of Research, 16*(1), 23–44. doi:10.1177/153944929601600102
- Center for Advanced Study for Teaching and Learning. (2019). MyTeachingPartner. <https://curry.virginia.edu/myteachingpartner>
- Croft, A., Coggeshall, J. G., Dolan, M., & Powers, E. (2010, April). Job-embedded professional development: What it is, who is responsible, and how to get it done well. *Issue Brief*. National Comprehensive Center for Teacher Quality.
- Darling-Hammond, L., Wei, R. C., Andree, A., Richardson, N., & Orphanos, S. (2009). *Professional learning in the learning profession: A status report on teacher development in the United States and abroad*. National Staff Development Council.
- Dettmer, P., Thurston, L. P., & Dyck, N. (2013). *Consultation, collaboration and teamwork for students with special needs* (7th ed.). Allyn & Bacon.
- Dinnebeil, L. A., Barton, E., Buysse, V., & Kruse, L. (unpublished manuscript). Models of professional collaboration: A meta-analysis.
- Dinnebeil, L. A., Buysse, V., Rush, D., & Eggbeer, L. (2008). Skills for effective collaboration. In P. Winton, J. McCollum, & C. Catlett (Eds.), *Effective professionals: Evidence and application in early childhood and early intervention* (pp. 227–245). Zero to Three Press.
- Dinnebeil, L. A., McInerney, W., Roth, J., & Ramaswamy, V. (2001). Itinerant early childhood special education services: Service delivery in one state. *Journal of Early Intervention, 24*, 36–45
- Dougherty, A. M. (2000). *Psychological consultation and collaboration in schools and community settings*. Brooks/Cole.
- Erchul, W. P., & Martens, B. K. (2002). *School consultation: Conceptual and empirical bases of practice* (2nd ed.). Kluwer Academic/Plenum Publishers.
- Every Student Succeeds Act, 20 U.S.C. § 6301 (2015). <https://www.congress.gov/bill/114th-congress/senate-bill/1177>.
- Hanft, B. E., & Place, P. A. (1996). *The consulting therapist: A guide for OTs and PTs in schools*. Therapy Skill Builders.

- Hanft, B. E., Rush, D. D., & Shelden, M. L. L. (2004). *Coaching families and colleagues in early childhood*. Paul H. Brookes Publishing Co.
- Haring, N. G., Lovitt, T. C., Eaton, M. D., & Hansen, C. L. (1978). *The fourth R: Research in the classroom*. Charles E. Merrill.
- Harrington, M., & Velicer, W. F. (2015). Comparing visual and statistical analysis in single-case studies using published studies. *Multivariate Behavioral Research*, 50(2), 162–183. doi:10.1080/00273171.2014.973989
- Henning-Stout, M. (1993). Theoretical and empirical bases of consultation. In J. E. Zins, T. R. Kratochwill, & S. N. Elliott (Eds.), *The Jossey-Bass social and behavioral science series. Handbook of consultation services for children: Applications in educational and clinical settings* (pp. 15–45). Jossey-Bass.
- Kemmis, B. L., & Dunn, W. (1996). Collaborative consultation: The efficacy of remedial and compensatory interventions in school contexts. *American Journal of Occupational Therapy*, 50(9), 709–717. doi:10.5014/ajot.50.9.709
- King, G., Strachan, D., Tucker, M., Duwyn, B., Desserud, S., & Shillington, M. (2009). The application of a trans-disciplinary model for early intervention services. *Infants & Young Children*, 22(3), 211–223. doi:10.1097/IYC.0b013e3181abe1c3
- Kratochwill, T. R., & Bergan, J. R. (1990). *Behavioral consultation in applied settings: An individual guide*. Springer Science & Business Media.
- Lave, J., & Wenger, E. (1991). *Situated learning: Legitimate peripheral participation*. Cambridge University Press.
- Learning Forward. (n.d.). Definition of professional development. <https://eric.ed.gov/?q=source%3A%22European+Association+for+Computer-Assisted+Language+Learning%22&id=ED574684>
- Mathis, W. J., & Trujillo, T. M. (2016). *Lessons from NCLB for the Every Student Succeeds Act*. National Education Policy Center. <https://files.eric.ed.gov/fulltext/ED574684.pdf>
- National Association for the Education of Young Children. (2011). *Early childhood education professional development: Training and technical assistance glossary*. Author.
- National Center on Quality Teaching and Learning (NCQTL). (2019). Program leaders' guide to practice-based coaching. <https://eclkc.ohs.acf.hhs.gov/professional-development/article/practice-based-coaching-pbc>
- Ohio Department of Education. (2014). Ohio operating standards for the education of children with disabilities. <http://education.ohio.gov/getattachment/Topics/Special-Education/Federal-and-State-Requirements/Operational-Standards-and-Guidance/2014-Ohio-Operating-Standards-for-the-Education-of-Children-with-Disabilities.pdf.aspx>
- O'Keefe, B. (2017). *Primetime for coaching: Improving instructional coaching in early childhood education*. Bellwether Education Partners. <https://files.eric.ed.gov/fulltext/ED585917.pdf>
- Olson, J., Murphy, C., & Olson, P. D. (1998). Building effective successful teams: An interactive teaming model for inservice education. *Journal of Early Intervention*, 21(4), 339–349. doi:10.1177/105381519802100407
- Parker, M., Skinner, C., & Booher, J. (2010). Using functional behavioral assessment data to infer learning histories and guide interventions: A consultation case study. *International Journal of Behavioral Consultation and Therapy*, 6(1), 24–34. <https://doi.org/10.1037/H0100895>
- Pianta, R. C., La Paro, K. M., & Hamre, B. K. (2008). *Classroom Assessment Scoring System® (CLASS™) manual, Pre-K*. Paul H. Brookes Publishing Co.
- Sadler, F. H. (2003). The itinerant special education teacher in the early childhood classroom. *Teaching Exceptional Children*, 35(3), 8–15.
- Snyder, P. A., Hemmeter, M. L., & Fox, L. (2015). Supporting implementation of evidence-based practices through practice-based coaching. *Topics in Early Childhood Special Education*, 35(3), 133–143. doi:10.3102/0002831208328088
- Snyder, P., Hemmeter, M. L., & McLaughlin, T. (2011). Professional development in early childhood intervention: Where we stand on the silver anniversary of PL 99-457. *Journal of Early Intervention*, 33(4), 357–370. doi:10.1177/1053815111428336
- Stayton, V. D. (2015). Preparation of early childhood special educators for inclusive and interdisciplinary settings. *Infants & Young Children*, 28(2), 113–122.
- Wesley, P. W., Buysse, V., & Keyes, L. (2000). Comfort zone revisited: Child characteristics and professional comfort with consultation. *Journal of Early Intervention*, 23(2), 106–115. doi:10.1177/105381510002300205
- Wesley, P. W., Buysse, V., & Skinner, D. (2001). Early interventionists' perspectives on professional comfort as consultants. *Journal of Early Intervention*, 24(2), 112–128.
- Wolery, M., (1994). Instructional strategies for teaching young children with special needs. In M. Wolery and J. Wilbers (Eds.), *Including children with special needs in early childhood programs*, (pp. 119–150). Washington, DC: National Association for the Education of Young Children.
- Zins, J. E., & Erchul, W. P. (2002). Best practices in school consultation. In A. Thomas & J. Grimes (Eds.), *Best practices in school psychology IV* (pp. 625–643). National Association of School Psychologists.