

REPORT | June 2024

Implementation and Use of the Desired Results Developmental Profile

Study Findings and Recommendations

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Authors

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Prepared for

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Disclaimer

The opinions expressed here are those of the individual researchers and do not necessarily represent the views of Tipping Point Community or the grantees who participated in this project.

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Executive Summary

In California, infant toddler agencies receiving state funding must complete the Desired Results Developmental Profile for Infant and Toddler (DRDP).¹ The study described in this report investigates the ease of use and implementation of the DRDP from the perspective of infant toddler teachers in Early Head Start agencies. Findings from this study can inform ongoing support of the California infant toddler workforce and refinements to DRDP training resources.

Tipping Point Community identified the need for this study through its partnership with three Early Head Start grantee agencies in the San Francisco Bay Area: The Unity Council, Izzi Early Education, and Kidango (Grantees). James Bell Associates (we) completed a 10-month study looking at gaps in DRDP implementation, use of DRDP ratings, and identification of supplemental assessment tools and supports.

This report summarizes findings from the study by reviewing the study background and design, presenting the iterative data collection effort, and discussing findings by data collection method and research question. It also presents recommendations for supporting the ongoing use and implementation of the DRDP with a broad range of providers.

Research Questions

The study's primary research questions include—

1. What are the strengths and gaps of the DRDP in assessing the developmental conditions of well-being in the three cooperating agencies?
 - 1a. How do these strengths and gaps differ across subgroups (e.g., ethnicity, language, developmental and learning difference)?
2. How can existing validated measures address the identified gaps?
 - 2a. What is needed within and across cooperating agencies to support quality implementation of the selected assessment tools and the entire agency's use of the findings to inform programming?
3. What are the developmental priorities of teachers involved in the three cooperating agencies?

¹ The DRDP is designed for children birth through age 12. This report only refers to the *DRDP for Infants and Toddlers*

Findings

RQ1. Study participants shared the following strengths and gaps associated with their agency's use of the DRDP:

- Including families in DRDP observation and use of results efforts appears to need more consistency. Agencies need regular practices for orienting families to the DRDP, collecting families' observations, sharing results, and collaborating on using results for guidance.
- Infant toddler teachers do not recognize or understand every DRDP developmental domain, particularly those that are easier to identify in older children.
- The gaps between DRDP developmental levels do not align with typical gains in child development at the infant and toddler stage.
- Teachers need support assessing children who speak a different language or have a disability that affects their presentation of developmental gains.
- Participants reported low interrater reliability among infant toddler teachers making it difficult to trust aggregated data for agency use.

RQ2. Study participants shared the following insights with regard to use of validated measures and additional training.

- Agencies described consulting other assessment tools for additional examples of domains described in the DRDP; however, they indicated a strong objection to adding another assessment to their practice.
- DRDP training protocols vary, with some agencies providing extensive training that includes online resources and certified DRDP trainers. However, the effectiveness of this training is mostly low, and there is a need for more tailored support.
- Agencies reported that limitations of time and professional development money made supporting DRDP use difficult.

RQ3. Study participants reported the following developmental assessment priorities.

- Participants prioritized observational skills when hiring new staff and emphasized the importance of objective, quality observation without assumptions.
- Participants identified a significant need for capacity building improving teachers' understanding of infant and toddler development.
- Teachers generally reported comfort with conducting child assessments, but there were variations in comfort levels across different domains, especially for infants. They were least comfortable with the Approaches to Learning and Self-Regulation domain.
- Participants identified the need to co-design a DRDP implementation toolkit to support teacher observation and rating in response to their priorities.

Recommendations

These recommendations translate the study's findings into ideas to support the infant toddler workforce and develop DRDP training resources.

- Include additional domains in the DRDP tool to strengthen its utility as a method for training and everyday classroom use, for novice and experienced teachers alike.
- Increase training on DRDP content, particularly related to assessing infants and using findings to inform the ability of infant toddler teachers to ground their assessment in infant development knowledge and improve teaching.
- Engage families to identify opportunities for communicating better about DRDP implementation and use across all phases. This action step could take place at the agency level through the parent councils, for example. Agencies may need additional training in how to include families' voice in the DRDP process.
- Encourage WestEd to work with agencies toward identifying ambiguous terms in the DRDP, then clarifying those terms in DRDP training.

Introduction

A child's environment in the first 3 years of life can affect their biology, spurring positive development or conditions of ongoing risk (Philips & Shonkoff, 2000). Tipping Point supports Early Head Start grantee agencies in California's Bay Area to help children achieve healthy developmental outcomes in their early years. This includes understanding how teachers complete the Desired Results Developmental Profile for Infant and Toddler (DRDP)², an assessment tool required by California for all state-funded infant toddler programs.

The DRDP aims to help teachers gather information to support children's learning and development and to guide instruction (Desired Results Access Project, n.d.). Leaders at Tipping Point grantee agencies Unity Council, Izzi, and Kidango (Grantees) shared teachers' challenges—

- Identifying actions to support children at various ages within the prenatal to three (PN-3) period
- Using findings to inform agency-level quality improvement
- Achieving consistency in assessing and applying DRDP results across colleagues and agency locations

Based on these concerns, Tipping Point initiated a 10-month study to investigate gaps in DRDP implementation and use of findings and to identify supplemental infant toddler assessment tools and related supports. The James Bell Associates (JBA) project team (we) implemented the study, which we co-designed with Tipping Point and Grantee representatives, including infant toddler teachers and agency administrators.

Report Organization

This report reviews the study design before summarizing research findings by data collection effort and later, by research question. Relationship between key findings and developmental literature are noted throughout. The report also includes recommendations to improve DRDP implementation and use. Appendices include supplemental data, a landscape review of additional assessment tools, and the graphic from a DRDP implementation toolkit co-designed with infant toddler teachers.

² The DRDP is designed for children birth through age 12. This report only refers to the Desired Results Developmental Profile for Infant and Toddler

Study Design

Participants from JBA, Tipping Point, and Grantees worked collaboratively to design the study and analyze data. Research questions included:

1. What are the strengths and gaps of the DRDP in assessing the developmental conditions of well-being in the three grantee agencies?
 - 1a. How do these strengths and gaps differ across subgroups (e.g., ethnicity, language, developmental and learning difference)?
2. How can existing validated measures address the identified gaps?
 - 2a. What is needed within and across grantee agencies to support quality implementation of the selected assessment tools and the entire agency's use of the findings to inform programming?
3. What are the developmental priorities of teachers involved in the three grantee agencies?

Collaborators also identified four data collection activities to address the questions posed: leadership focus groups, teacher survey, landscape analysis, and convened one in-person and two virtual workshops (see exhibit 1).

Exhibit 1. Data Collection Activities

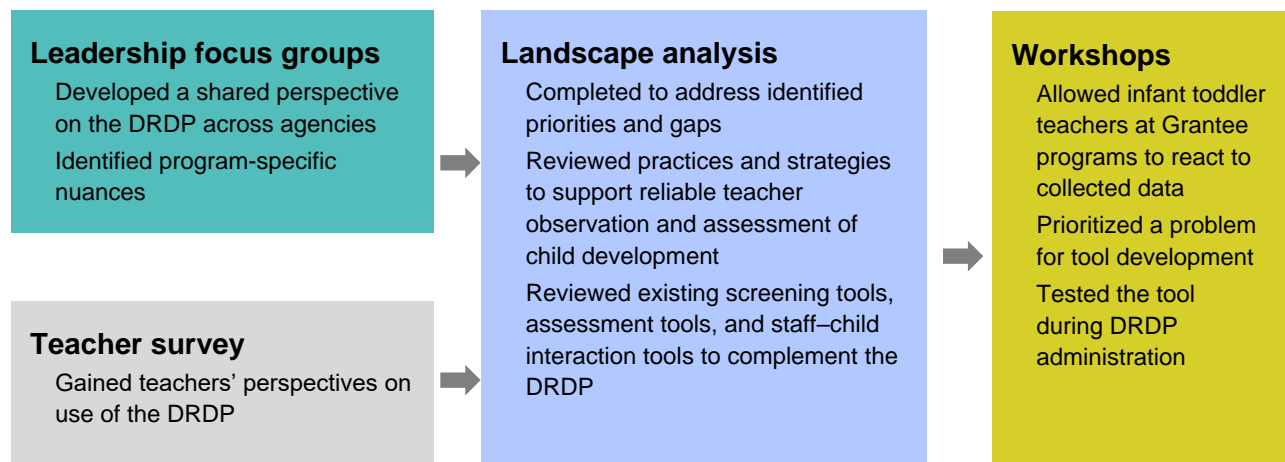


Exhibit 2 lists each research question and its applicable data collection activities.

Exhibit 2. Research Questions by Data Activities

Research question	Leadership focus groups	Teacher survey	Landscape analysis	Workshops
<p>1. What are the strengths and gaps of the DRDP in assessing the developmental conditions of well-being in the three grantee agencies?</p> <p>1a. How do these strengths and gaps differ across subgroups (e.g., ethnicity, language, developmental and learning difference)?</p>	●	●	●	●
<p>2. How can existing validated measures address the identified gaps?</p> <p>2a. What is needed within and across grantee agencies to support quality implementation of the selected assessment tools?</p>			●	●
<p>3. What are the developmental priorities of teachers involved in the three grantee agencies?</p>		●	●	

Key Findings by Research Question

RQ1. Strengths and gaps of DRDP in assessing the developmental conditions of well-being in the three grantee agencies.

Strengths

Inclusion of Families: All agencies described mechanisms for including families in the DRDP process, highlighting the importance of sharing the child's strengths with family members. These efforts appear to need more consistency.

Data Usage: Teachers use DRDP data to adjust instruction and set goals, indicating the utility of the DRDP in informing educational strategies. Reliable observation and rating will improve their use of data.

Gaps

Observation and Assessment Challenges: Agencies shared that teachers sometimes struggle to understand the intention behind each infant-toddler development measure, with observations not always aligned to the DRDP domains. The levels of the DRDP are described as "developmental jumps, not developmental steps," indicating a need for more nuanced developmental milestones.

Training Relevance: The content taught in DRDP training is not always relevant to infant-toddler development, with certain domains being more identifiable in older children's behavior.

Diversity, Equity, and Inclusion: Specific challenges arise when the teacher and child do not speak the same language or for children with disabilities, potentially leading to underestimation of the child's abilities.

RQ.2 Use of existing validated measures to address the identified gaps.

Supplemental Measures

Assessment Tools: Agencies described consulting other assessment tools for additional examples of domains described in the DRDP, however they indicated a strong objection to adding another assessment to their practice.

Support for Implementation

Training Protocols: DRDP training protocols vary, with some agencies providing extensive training that includes online resources and certified DRDP trainers. However, the effectiveness of this training is mixed, and there's a need for more tailored support.

Leadership and Data Literacy: Agencies reported strong support from leadership in DRDP use. However, limited resources of time and professional development constrain their ability to realize their capacity-building intentions.

RQ.3 Developmental priorities of teachers involved in the three grantee agencies.

Developmental Priorities

Quality Observation Skills: Agencies prioritized observational skills when hiring new staff and emphasized the importance of objective, quality observation without assumptions. Most job candidates do not have these skills.

Professional Development: There's a significant need for capacity building in early childhood development, with a focus on improving teachers' understanding of infant and toddler development.

Comfort with Assessment: Teachers generally reported comfort with conducting child assessments, but there were variations in comfort levels across different domains, especially for infants. The teacher survey highlighted areas where teachers feel they need more support, including understanding and assessing infants and toddlers in different developmental domains. Teachers also expressed a need for more time to complete the DRDP and for training that addresses each DRDP domain and measure. Teachers identified the need to co-design a DRDP implementation toolkit to support teacher observation and rating in response to their priorities.

Findings

This section presents findings from each data activity and explains how the findings informed future data collection efforts.

Leadership Focus Groups

We conducted two rounds of leadership focus groups to better understand how agencies implement and support the DRDP, as well as their related challenges, needs, and goals. Agencies nominated staff members to participate based on their internal definition of leadership (see exhibit 3 for a breakdown of participants' titles). The first round consisted of one group (three Kidango representatives, two Unity Council representatives, three Izzi Early Education representatives). We split the second round into two groups due to scheduling challenges; Group A featured three Unity Council and three Izzi representatives, and Group B had five Kidango representatives. The project team developed the focus group protocols in coordination with Tipping Point. All participants received a \$20 Amazon gift card.

Exhibit 3. Leadership Focus Group Participants and Roles

Site	Role	Leadership focus group 1	Leadership focus group 2a	Leadership focus group 2b
Izzi Early Education	Administrators	3	3	
Kidango	Administrators	2		3
	Teachers	1		2
The Unity Council	Administrators	2	3	

Observation

According to participants, any staff member in the classroom can share observations with the primary teacher completing the assessments; still, agencies' expressed difficulty finding job candidates with strong observational skills. In fact, all new teachers required significant DRDP training, and existing teachers required follow-up training.

Although all agencies described a way to include families in the DRDP process, none shared a consistent method for collecting parent observations (see box). Some focus group participants described a process for noting parent observations and including them in assessments. Some reported occasionally substituting parent observations for teacher observations if the child is absent for a long time.

Participants felt that more experienced teachers and teachers with a deeper understanding of early childhood development tend to conduct higher-quality observation. They described quality observation as the objective description of behavior free of assumptions, interpretations, or guesses at a child’s internal experience.

Agencies reported needing more time for teachers to complete the DRDP and additional DRDP training. Increased completion time was especially important when the teacher was not in the classroom with children. One site reported needing a longer period in the fall to complete the DRDP so teachers can get to know the children before completing the assessment. Another site suggested extending the DRDP deadline when children are chronically absent, so that they have been in the classroom enough days to provide meaningful data.

One site said it needed a training plan addressing each DRDP domain and measure to ensure complete understanding. Representatives suggested a “train the trainer” approach targeted at supervisors, as they are not always trained in or skilled at data collection.

From the Literature

Woods and Lindeman (2008) emphasize the importance of developing strategies to exchange information between family members and service providers. This assessment best practice enables teachers to understand family routines, activities, and events affecting the infant or toddler in the classroom. Likewise, infant toddler teachers can share interventions with family members for them to implement at home.

The leadership focus group interviews informed topics for the teacher survey, including—

- Teachers’ role administering the DRDP
- Teachers’ comfort and confidence with implementation
- Teacher training on DRDP

Data Usage

“Agencies described using data primarily to address opportunities for growth at the individual, family, and classroom levels; one site noted that the DRDP’s low levels of interrater reliability makes aggregated data less useful for agency-level evaluation or adaptation.” Site administrators reported printing out DRDP results and sharing it with teachers to adjust instruction at the individual child or classroom level. For example, one site described a process that begins with identifying domains or sub-domains where the majority of the class scored low; the supervising teacher then works with the infant toddler teacher(s) to develop a classroom-level intervention to boost that skill. Another site described using data to set family goals around lower-rated domains during parent-teacher conferences. Discussions also include specific strategies families can use to build the identified skill relevant to the domain at home. Agencies stressed the importance of sharing the child’s strengths with family members, being sensitive to the family’s needs, and accommodating families’ goals and priorities for their child’s learning as much as possible.

Training and Implementation Supports

All agencies reported that current training is a good introduction but may not be sufficient to provide infant toddler teachers with a reasonable level of confidence with the DRDP (see box). DRDP training protocols varied from site to site, ranging from 3-5 hours of online training using the California Early Childhood Online (CECO) resource to 8 hours of training by a certified DRDP trainer. One participant who completed both CECO training and the 8-hour training reported the latter as much more useful.

Agencies mentioned providing additional support and guidance to those who need it. One site surveyed teachers on the areas they struggled with most, then provided specific training in those areas. Another site reported a specific focus on building staff data literacy capacity to help teachers connect the process of making observations, rating on the DRDP, and planning infant and toddlers’ learning.

Agencies reported several different forms of leadership involvement in the processes for assessment and data usage, including monitoring, quality control, and strategic planning to address DRDP data. One site connected infant-toddler assessment to school readiness when they reported that a school readiness coordinator reviews the ratings and suggests either professional

From the Literature

The CUPID Consortium (n.d) developed a set of infant toddler educator competencies and described a cyclical process in which a teacher’s initial understanding is reinforced through classroom experience and reflective practice. The ability to engage in quality observation to respond to a child’s uniqueness is a core competency within this model (CUPID Consortium, n.d.)

development for teachers or classroom materials. The amount of staff time devoted to lesson planning, training, and staff development also differs from site to site. Two agencies reported supervisors providing 1-on-1 DRDP support to teachers.

DRDP Clarity

Participants noted that the levels of the DRDP are not specific enough to support gradual strength building; they described them as “developmental jumps, not developmental steps,” identifying the need for the DRDP to capture the nuance of infants’ and toddlers’ gradual development. Teachers reported regular challenges with observations not aligning with DRDP domains. They also reported that the DRDP examples can be confusing, especially if teachers take them too literally. In particular, examples based on interacting with the natural world (e.g., dirt, water, plant life) may not be relevant in an urban context. Agencies thought more clarity around *why* teachers look for a behavior would improve observation guidance.

Diversity, Equity, and Inclusion

Agencies identified specific challenges under two conditions related to diversity, equity, and inclusion: children with language barriers and disabilities. First, they reported that when the teacher and child do not speak the same language, the child has more language knowledge than the teacher sees in the classroom. Second, they noted specific challenges for children with disabilities. One site reported that children with disabilities may be rated lower in all domains, even those unrelated to their disability. Agencies mentioned that most of the examples are language based, so teachers may overlook nonverbal evidence of the domain or subdomain in children who are nonverbal.

Teacher Survey

We administered a 15-20 minute survey to participants in exhibit 4 to capture teachers’ experiences with assessment in general and with the DRDP in particular; survey questions aimed to identify teachers’ capacity for conducting assessments, strengths and concerns related to all phases of the assessment process, and areas of support received and still needed. We offered the survey via Qualtrics in English and Spanish during a 2-week window in fall 2023. We later reopened the survey for 1 more week based on requests from several workshop attendees. Agency staff also distributed the survey to teachers via email and a flyer with a QR code to scan. All survey questions were optimized for mobile so they could be answered easily by phone. Teachers who completed the survey could sign up to receive a \$15 Amazon gift card.

Exhibit 4. Survey Participants

Agency	Survey Participants N = 65	Percentage of Infant Toddler Teachers at Respective Agency
Izzi	15	75%
Kidango	18	13%
Unity Council	32	81%

Sixty-five respondents from across the three agencies completed the survey, with 15 (23 percent) respondents from Izzi, 18 (28 percent) from Kidango, and 32 (49 percent) from Unity Council. These respondents represent 81 percent of Unity Council's infant toddler teachers, 75 percent of IZZI's infant toddler teachers and 13 percent of Kidango's infant toddler teachers.

Most respondents (n = 47, 72 percent) had completed the California Child Development Credential. Fewer completed other educational or training opportunities, though nearly half (43 percent) had associate degrees. Details on the education level of respondents are shown in exhibit 5.

Exhibit 5. Education or Training Opportunities Completed by Survey Respondents

Education or training opportunity	Number of respondents	Percentage of respondents
California Child Development Credential	47	72
Infant-Toddler Development Associate (CDA)	18	28
Associate degree	28	43
Bachelor's degree	17	26
Master's degree or higher	2	3

Note: Respondents were able to select all education or training opportunities that they had completed (i.e., response options are not mutually exclusive), so percentages do not add up to 100.

Fifteen participants wrote in the academic focus of their associate degree, and 17 participants wrote in the field that their bachelor's degree was in. Eighty-seven percent of associate degrees were in child or human development, early childhood education/education, or psychology, while 71 percent of bachelor's degrees were in these fields.

There was a fairly even representation of associate teachers, lead teachers, and teachers, with other roles reported at lesser frequencies. Respondents wrote in their current position/title,

as shown in exhibit 6. Some titles may indicate the same level/type of job but with different names across different agencies.

Exhibit 6. Current Title/Position of Survey Respondents

Current position or title	Number of respondents	Percentage of respondents
Associate teacher	9	23
Lead teacher	8	21
Teacher	8	21
Assistant teacher/teacher's assistant/assistant	5	13
Teacher I	2	5
Teacher II	2	5
Toddler teacher	2	5
Master teacher	1	3
BA	1	3
CDA	1	3

Note: Not all respondents wrote in their current position or title, so percentages are calculated out of the total number of respondents who provided a title ($n = 39$). This means that the current position/title is unknown for 40 percent of total survey respondents.

Respondents who provided a response to the length of time they had been in their current position and the length of time they had been working with infants and toddlers ($n = 39$) had been in their role anywhere from 2 months to 20 years (average = 3 years, 2 months) and had been working with infants and/toddlers anywhere from two months to 33 years (average = 9 years, 8 months). Similarly to current position, because not all respondents wrote in an answer to these two questions, the number of years in their current position and the number of years of experience working with infants and toddlers is unknown for 40 percent of the total survey respondents.

Most teachers are involved in observing and rating children and less so in reviewing DRDP results. Teachers who responded to the survey hold a variety of roles conducting the DRDP. Most commonly, their role includes recording child observations (83 percent), entering DRDP data into an app (e.g., Learning Genie; 82 percent), and rating children's mastery of measures (78 percent). Response rates for all possible roles are shown in exhibit 7.

Exhibit 7. Roles of Survey Respondents Conducting the DRDP

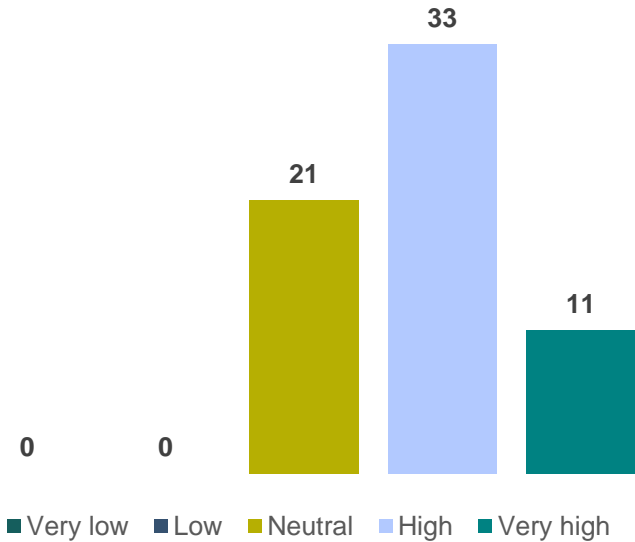
Role	Number of respondents	Percentage of respondents
Recording child observations	54	83
Entering DRDP data into an app (e.g., Learning Genie)	53	82
Rating children’s mastery of measures	51	78
Reviewing DRDP results	35	54
Entering DRDP data into the CDE system	12	18
Other	4	6

Note: Respondents were able to select all roles they have conducting the DRDP (i.e., response options are not mutually exclusive), so percentages do not add up to 100. Two respondents wrote in “Other” responses: taking photos.

Comfort With Assessment

While teachers were generally comfortable with developmental assessment, they were less comfortable with observing and understanding infants compared to toddlers. The teacher survey asked, “How would you rate your overall comfort with conducting child assessments?” to better understand this construct among the infant and toddler teachers. Over half of respondents (51 percent), indicated “high” comfort conducting child assessments and no respondents selected “very low” or “low,” indicating an overall comfort with conducting child assessments. Exhibit 8 displays the results.

Exhibit 8. Respondents’ Comfort with Assessment

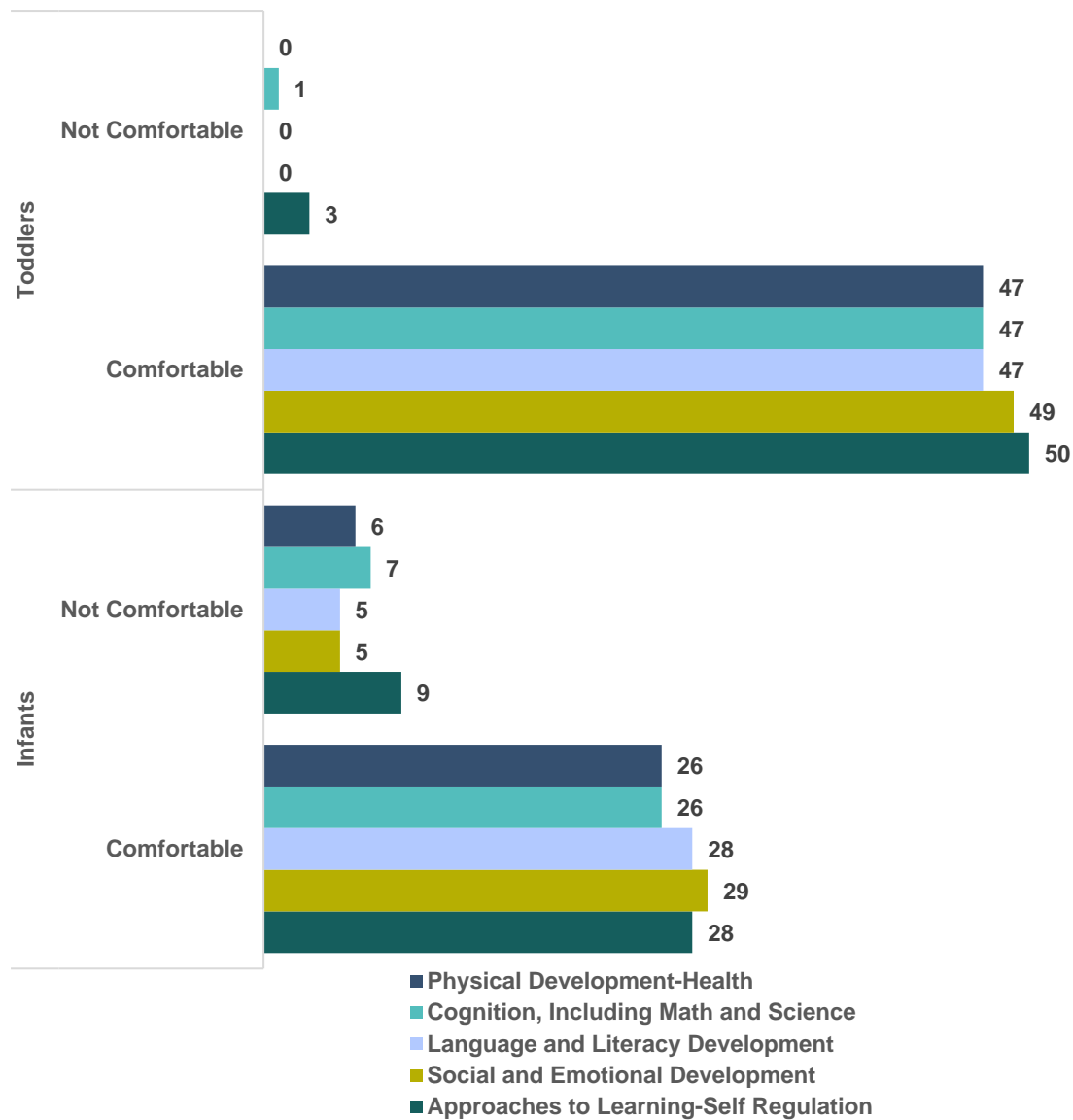


Note: No respondents endorsed “very low” or “low” in response to this question.

Infant Toddler Development

Respondents reported the same level of comfort assessing infants and toddlers across the DRDP domains. However, they reported less overall comfort with assessing infants compared to toddlers. The survey asked about respondents' comfort observing infant and toddler development specifically within the DRDP domains. Exhibit 9 shows findings for comfort assessing infants and toddlers by DRDP domain.

Exhibit 9. Respondents' Comfort Assessing Infants and Toddlers by DRDP Domain



Respondents endorsed reasons they were not comfortable assessing infants in each domain (exhibit 10). Across the domains, respondents frequently noted that examples for measures on the DRDP are hard to observe because they lack knowledge or information about this area of development for infants and there are not enough examples.

From the Literature

Historically in the United States, early childhood teacher training programs are viewed as lacking sufficient content on infant and toddler development to prepare teachers to be in infant toddler classrooms (Chu, 2016; Gilken et al., 2022). Additionally, infant toddler teachers often have lower levels of education than their preschool counterparts (Sandstrom et al., 2023). This leads to concerns about whether infant toddler teachers have enough developmental knowledge to accurately understand and assess infants' and toddlers' development and feel comfortable doing so.

Exhibit 10. Reasons for Discomfort Assessing Infants on the DRDP Domains

	ATL-REG	SED	LLD	COG	PD-HLTH
Measures of this domain on the DRDP are not clear	1	1	0	1	0
Examples for measures of this domain on the DRDP are hard to observe	3	1	2	3	3
Lack of knowledge or information about this area of development for infants	2	2	2	2	2
Lack of time to observe this domain	2	0	0	2	2

Note: ATL-REG = Approaches to Learning-Self Regulation; SED = Social and Emotional Development; LLD = Language and Literacy Development; COG = Cognition, Including Math and Science; PD-HLTH = Physical Development-Health.

For toddlers, one respondent indicated that their discomfort assessing Approaches to Learning-Self Regulation was due to lack of time to observe this domain, and one respondent indicated that their discomfort assessing Cognition, Including Math and Science was due to lack of knowledge or information about this area of development for toddlers.

Subgroups of Children

Respondents reported that the DRDP does not work well for all children, particularly children who have experienced trauma. Twenty-seven percent of respondents reported that the DRDP does not work well for children who have experienced trauma (27 percent); only 41 percent said it worked very or extremely well. Teachers reported on their perceptions of the DRDP's effectiveness assessing the development of children in various subgroups. While around two-thirds of teachers

indicated that the DRDP works very or extremely well for most subgroups, exhibit 11 displays findings across subgroups of children.

Exhibit 11. DRDP Effectiveness Assessing Subgroups of Children

How well do you think the DRDP works for assessing development of children who:	Not well at all	Slightly well	Moderately well	Very well	Extremely well
Are dual language learners	1 (2%)	4 (7%)	16 (26%)	25 (41%)	15 (25%)
Have IFSPs	2 (3%)	7 (12%)	14 (23%)	26 (43%)	11 (18%)
Are younger than 18 months old (infants)	5 (9%)	2 (4%)	11 (19%)	31 (54%)	8 (14%)
Are older than 18 months old (toddlers)	0 (0%)	4 (7%)	13 (22%)	29 (48%)	14 (23%)
Have experienced trauma	14 (27%)	4 (8%)	12 (24%)	17 (33%)	4 (8%)

Note: IFSP = Individualized Family Service Plan.

Use of Results

Respondents reported commonly using DRDP results to set individual and program goals and slightly less frequently using them with families. Survey respondents reported using DRDP results in a variety of ways:

- Set goals for individual children (*n* = 59, 98 percent)
- Inform choices of classroom activities, materials, and interactions that support individual children’s development (*n* = 58, 98 percent)
- Set program-level goals (*n* = 54, 92 percent)
- Inform making referrals to early intervention (*n* = 52, 87 percent)
- Share summaries of results back with parents/families (*n* = 51, 84 percent)

These findings, combined with only 64 percent of respondents saying they seek parent/family input to include in DRDP observations, indicate that families are not wholly involved in the DRDP process, despite the DRDP containing resources and recommendations for partnering with families (California Department of Education, 2013-2019). Reasons for not sharing summaries of DRDP results back with parents/families included because it is not required (*n* = 6), not sure how best to share DRDP results with parents/families (*n* = 3) and did not have time to review DRDP results (*n* = 1). Beyond the resources included in appendix E of the DRDP, the Head Start Early Childhood Learning & Knowledge Center offers a resource on family engagement and ongoing child assessment (Ayoub et al., 2011) that may provide useful recommendations for agency staff.

Respondents indicated the DRDP primarily worked well for supporting the development of subgroups with the exception of infants and toddlers who have experienced trauma. As exhibit 12 illustrates, more respondents indicated that the DRDP results worked moderately well or very well than other response options. Similarly to the effectiveness in assessing children, more respondents rated the DRDP results as not working well or only working slightly well to support the development of children who have experienced trauma than any other subgroups.

Exhibit 12. DRDP Effectiveness Supporting the Development of Subgroups of Children

How well do you think the DRDP works for using the results to support the development of children who:	Not well at all	Slightly well	Moderately well	Very well	Extremely well
Are dual language learners	0 (0%)	4 (7%)	24 (41%)	21 (36%)	10 (17%)
Have IFSPs	2 (4%)	3 (5%)	18 (32%)	24 (43%)	9 (16%)
Are younger than 18 months old (infants)	2 (4%)	6 (11%)	14 (25%)	23 (42%)	10 (18%)
Are older than 18 months old (toddlers)	0 (0%)	5 (8%)	14 (24%)	27 (46%)	13 (22%)
Have experienced trauma	9 (18%)	9 (18%)	13 (25%)	14 (27%)	6 (12%)

Note: IFSP = Individualized Family Service Plan.

Write-In Responses

Teachers wrote in any other thoughts they had about using DRDP results in their day-to-day work; Appendix A displays all write-in responses. Some responses were general (e.g., “DRDP helps me to help the child reach the next milestones”) or identified issues with DRDP processes (e.g., “I don’t think that it should be done on children that are non-mobile in a crib...”; “It’s difficult to input the data when we are with the children”). Others reported how they used DRDP results (e.g., “For planning activities”; [to] “Share the result with colleagues and talk about individualized goals of each child in the classroom”; “It helps me to identify the areas where the child needs the most support”).

The leadership focus group interviews and teacher survey informed the landscape analysis by:

- Identifying domains for which supplemental tools would be useful
- Selecting topic areas for supplemental training resources

Landscape Analysis

We carried out a targeted landscape analysis to provide knowledge and information needed to address identified priorities and gaps in the DRDP. Our analysis included, leadership focus group and survey data, in-depth reviews of the DRDP, its psychometric properties, and supporting materials; practices and strategies to support reliable teacher observation and assessment of child development; and existing screening and assessment tools to complement the DRDP.

The purpose of the landscape analysis was to (1) identify and provide information on strategies and resources to address identified priorities and gaps in the DRDP and (2) identify existing assessments that align with and can support use of the DRDP for program improvement purposes and instructional decisions.

The landscape analysis yielded two sets of resources. The first, a resource guide on materials to support DRDP implementation, is displayed in appendix B. The second, a compendium of infant toddler screening and assessment tools and relevant characteristics, is presented in a series of profiles in appendix C. Findings from the landscape analysis, along with leadership focus group and teacher survey findings, were used to develop an in-person workshop.

The leadership focus group interviews, teacher survey, and landscape analysis informed the next phase of co-construction by:

- Structuring the workshop design
- Providing data for Grantee analysis

Workshops

In November 2024, the project team convened 16 Grantees at Kidango's Peixoto site in Hayward, California, to analyze existing project data and begin tool design. The group gathered to develop a shared understanding for how they would design together, review the Plan Do Study Act (PDSA) framework, conduct a data walk of the teacher survey (results followed by a prioritization and root cause analysis), and complete action planning for the remaining study components. In the first virtual workshop, the project team presented 10 participants with the draft DRDP implementation toolkit to design a test of its use in the classroom. Participants then engaged their existing knowledge of "approaches to learning and self-regulation" to co-design a plan for testing the DRDP implementation toolkit across agencies. In the second virtual workshop, 10 participants conducted a virtual data walk using findings from the DRDP implementation toolkit testing and discussed next steps for integrating the tool into everyday program use. Appendices D and E contain an overview of

workshop participants and tool testing data respectively. Exhibit 13 summarizes significant takeaways from the data walk.

Exhibit 13. Virtual Workshop Data Walk Takeaways

Prompt	Responses
What are some additional ways to use the tool beyond rating that would increase your confidence?	<ul style="list-style-type: none"> • Interpreting DRDP observations • Writing observations • Using it as a reference/guide to see what exactly it is that I am looking for when observing • Observing growth/development observation • Integrating into training for all teachers • Sharing with parents if they see children doing certain things that counts as development
Which domains would you prioritize to expand the tool?	<p>In order of priority:</p> <ol style="list-style-type: none"> 1 – Language and Literacy Development 2 – Social and Emotional Development 3 – Cognition, Including Math and Science 4 – Physical Development – Health
What would help you use the DRDP implementation toolkit on a regular basis?	<ul style="list-style-type: none"> • Having it in flashcard form • Introducing it to others • When we were testing tools, I shared the tool with a coworker, and we all agree – makes it much easier. Use the big ideas to have a very clear understanding of how to rate the child. <ul style="list-style-type: none"> ○ Introduce it at the beginning of year and go over it, then provide more explanation one on one if needed ○ We always have new teachers, doing the DRDP, there is always a problem. If one teacher in the classroom already knows how to use the tool, they can show their coworkers. The others can come to them to help them understand.

At the end of the virtual workshop, the project team asked participants for feedback on the overall co-design process. Participants shared that they, “enjoyed having an experience with other teachers”, “learned a lot more through this process”, that it was “good to get to know other perspectives”, and that “it was nice to be a part of this study and for the opportunity to help teachers and listen to what we had to say.” The project team used workshop feedback to develop the final DRDP implementation toolkit found in appendix F. The final DRDP implementation toolkit graphic is in appendix G.

Workshop findings served as the basis for the initial construction of the DRDP implementation toolkit. Specifically, the project team focused the tool design on:

- Addressing ambiguous words and domains
- Explaining the ATL-REG domain
- Providing broad definitions of what the DRDP may be looking for in its examples

Recommendations

We recommend extending the DRDP implementation toolkit to include additional domains.

Participants reported that the DRDP implementation toolkit was useful for both novice and experienced teachers. They also described how they would incorporate it into training and everyday classroom use. Therefore, we recommend expanding its content.

We recommend agencies build capacity on DRDP content, particularly related to infants.

Throughout the data collection activities, participants reported less comfort with assessing infants. This discomfort stemmed from less infant development content knowledge and less experience bridging that knowledge with use of the DRDP. This discomfort was especially apparent in the Approaches to Learning and Self-Regulation domain.

We recommend agencies engage families in identifying opportunities for communication about all phases of DRDP implementation and use. Although participants were consistent with assessment best practices in prioritizing family inclusion, they experienced obstacles emblematic of perennial challenges sustaining family-school relationships. Inconsistencies in which teachers can meet with parents to collect or relay data creates inequities among what informs child supports. Family engagement could take place at the program level, for example, through parent councils. Agencies may need additional training on how to include families' voice in the DRDP process.

We encourage WestEd – the DRDP developers – to work with agencies to identify ambiguous terms in the DRDP, then clarify those terms in DRDP training. This process would address participant concerns about some concepts in the DRDP being vague and too academic. It would also enable WestEd to identify areas wherein teachers with English as a second language may interpret words differently.

We recommend agency leadership support infant toddler teachers in developing an understanding of assessment that can be generalized across assessment tools. Participants clearly expressed that they did not want to integrate another assessment into their practice;

however, they did express a desire to crosswalk the DRDP implementation toolkit against their curriculum assessment. This process would enable them to further generalize the “big ideas” in the DRDP and improve their ability to recognize instances when children demonstrate domain-specific behavior.

References

- Ayoub, C., Hornstein, J., Lopez, E., Sparrow, J. D., Stark, D. R., & Weiss, H. (2011). *Family Engagement and Ongoing Child Assessment*. Boston Children's Hospital and Harvard Family Research Project. <https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/family-engagement-ongoing-child-assessment-eng.pdf>
- California Department of Education (2013-2019). DRDP (2015) Infant/Toddler Comprehensive View. https://www.desiredresults.us/sites/default/files/docs/forms/DRDP2015-IT-Comprehensive-View-20200124_ADA.pdf
- Chu, M. (2016). What's missing in most of our early childhood degrees? Focusing more deeply on relationships and learning with infants, toddlers, and their families. *Journal of Early Childhood Teacher Education*, 27(4) 264-281. <http://dx.doi.org/10.1080/10901027.2016.1241966>
- Cupid Consortium. (n.d.) *Competencies for educators of infants and toddlers*. <https://cupidconsortium.org/competencies-for-educators-of-infants-and-toddlers/>
- Desired Results Access Project. (n.d.). *An overview of the DRDP for families*. <https://draccess.org/OverviewOfDRDP2015forFamilies.html>
- Gilken, J., Longley, J., & Crosby, J. (2023). Finding space for infants and toddlers in early childhood teacher preparation programs. *Early Childhood Education Journal*, 51, 333-344. <https://doi.org/10.1007/s10643-021-01299-7>
- Phillips, D. A., & Shonkoff, J. P. (Eds.). (2000). *From neurons to neighborhoods: The science of early childhood development*.
- Sandstrom, H., Casas, M., & Lou, C. (2023). *A National Look at Infant-Toddler Teachers in Child Care Centers*. Urban Institute. <https://researchconnections.org/sites/default/files/153361.pdf>
- Woods, J. J., & Lindeman, D. P. (2008). Gathering and giving information with families. *Infants & Young Children*, 21(4), 272-284.

Appendices

Appendix A. Teacher Survey Open-Ended Responses

Please share anything else you would like to about using DRDP results in your day-to-day work. (“None,” “N/A,” etc. responses have been removed).

- DRDP is a tool to identify the needs of individual children and help the teachers to know the state of child's development and it is a complement of ASQs.
- DRDP helps me to help the child reach the next milestones.
- DRDP is very good, can use for the goal of children development.
- DRDP helps a lot, you can make a goal to the child development.
- We would like to make individual plan on weekly curriculum for kids.
- I don't think that is should be done on children that are non-mobile in a crib that don't do much and I mean children that are under the age of 5 months sometimes 6 months because I don't think that they truly cover much of what is shown as examples from the DRDP.
- Planning activities and making changes for the environment.
- For planning activities.
- For planning activities.
- Children that come to our center at 18 months and speaks another language, sometime are slower, because of their lack of understanding the English language.
- I think it's extremely important for each teacher to be able to have their own materials to be able to collect data to be successful at measuring the children's development.
- It's difficult to input the data when we are with the children.
- Share the result with colleagues and talk about individualize goals of each child in the classroom.
- It helps keep record of the children's development.
- The examples are great to gain knowledge about children's developmental milestones.
- It has helped me a lot in how to work with the children.
- It is very important to observe the children every day to know what level they are at, and how to help them with their emotional development, language, cognitive including math, science, physical and health development, and approach to learning and self-regulation.
- It helps me to identify the areas where the child needs the most support.
- I would like the child's rating to be respected as I observe them.
- The DRDP helps us to help children in their development.
- The academic language used is a bit difficult.

Appendix B. Materials to Support DRDP Implementation

Resource	Description/content	Mode	Notes
Desired Results Developmental Profile - Teacher Training	Format of DRDP, use of documentation and evidence to rate measures, importance of inter-rater reliability	Virtual via Zoom	Can also request virtual or in-person fee-for-service training
DRDP (2015) for use with infants and toddlers	Introduction to the DRDP (2015); Using Observation to Assess with the DRDP, How to Rate, Connecting the Foundations, Using DRDP Data to Plan	Online, self-paced course (CECO)	
Observation practice videos	Interactions, Exploration, Routines	YouTube videos + Watch Me Grow worksheet	
Tutorials	Orientation to the DRDP Instruments, Steps to Completing the DRDP Assessment Instrument, DRDP Observation and Documentation	YouTube videos	
DRDP Online	Reports, upload templates	App, written resources	Weekly email bulletin also available
For teachers	How-tos	YouTube videos	
Webinars	The Data System, Observation and Collection	Webinars	Other webinars are described, but not currently available (recordings do not appear to be posted)
CDE Overview	Introduction to Desired Results	Webpages	
Additional CDE Resources	State resources & information	Webpages	

Resource	Description/content	Mode	Notes
Beginning Teacher Series (Infant and Toddler)	Ongoing Assessment, Planning for Learning	Online course	Other modules in this series include Being a Professional, Learning Environment, Relationship-based Practice, Sharing the Caring with Families, Supporting Infants' and Toddlers' Development, Using Routines and Transitions to Support Relationships and Learning, and Working as a Team
Child Screening & Assessment	Ongoing Child Assessment, Observation, Implementation, Assessment for Individualization	Written resources, videos	

Appendix C: Landscape Analysis Crosswalk and Individual Profiles

Assessment	Short*	Completed by ECE staff	Required or available training	Previous EHS research	Available in Spanish	Freely available
Global Scales for Early Development (GSED) - Short Form	X		X			X
Caregiver Reported Early Development Instruments (CREDI)	X					X
Brief Infant Toddler Social Emotional Assessment (BITSEA)	X	X		X	X	?
Bayley Scales of Infant Development (BSID)	~		X			
Mental Development Index (MDI)	X		?	X		
Peabody Picture Vocabulary Test (PPVT)	X			X		
MacArthur-Bates Communicative Development Inventories (CDIs)	X	X		X	X	
Ages & Stages Questionnaire (ASQ)	X		X	X	X	
Teaching Strategies GOLD Assessment (GOLD)	~	X	X	~		
Devereux Early Childhood Assessment (DECA)	X	X	X	X		
Brigance Early Childhood Screens	X	X		X	~	
Provence Birth-to-Three Developmental Profile	~		X		~	

Assessment	Short*	Completed by ECE staff	Required or available training	Previous EHS research	Available in Spanish	Freely available
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Early Learning Accomplishment Profile (Early LAP)

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Note. *Short = less than an hour to complete or less than 25 items. X = yes, ~ = to some extent (see measure profile for more details), ? = unknown.

Global Scales for Early Development (GSED) – Short Form	
Purpose	Population-level measure of children's development captured holistically
Developmental domain(s)	One Developmental score (D-score) capturing cognitive, motor, language, and social-emotional development
Length	15 to 25 minutes (different start points for different ages)
Who completes the assessment?	Caregivers
Required or available training	Training courses (currently by request only in person or virtually); self-paced online courses are in development
Psychometrics on reliability and validity	Internal reliability > 0.8; external reliability > 0.9; concurrent validity (with domains of the BSID) > 0.85; short-term predictive validity > 0.55
Previous EHS research	None
Age(s)	0 months to 36 months
Spanish version	No
Link	https://www.who.int/publications/i/item/WHO-MSD-GSED-package-v1.0-2023.1
Availability	Freely available online
References	Cavallera, V., Lancaster, G., Gladstone, M., Black, M. M., McCray, G., Nizar, A., Ahmed, S., Dutta, A., Anago, R. K. E., Brentani, A., Jiang, F., Schönbeck, Y., McCoy, D. C., Kariger, P., Weber, A. M., Raikes, A., Waldman, M., van Buuren, M., Kaur, R.,... & Janus, M. (2023). Protocol for validation of the Global Scales for Early Development (GSED) for children under 3 years of age in seven countries. <i>BMJ Open</i> , 13(1), e062562. https://doi.org/10.1136/bmjopen-2022-062562

Caregiver Reported Early Development Instruments (CREDI)	
Purpose	A set of population-level measures of early childhood development that can be used around the world
Developmental domain(s)	One summary score capturing motor, language, cognition, social-emotional, mental health (long form has 100 items and provides domain scores)
Length	Short form - 20 questions
Who completes the assessment?	Caregivers
Required or available training	None
Psychometrics on reliability and validity	Internal reliability > 0.65; variable inter-rater reliability; concurrent validity (with BSID) 0.09-0.73
Previous EHS research	None
Age(s)	Birth to 3 years
Spanish version	No
Example items or behaviors/skills to observe (alignment with DRDP measures)	<p>Can the child pick up a small object (e.g., a small toy or small stone) using just one hand? (Fine Motor Manipulative Skills)</p> <p>Can the child say one or more words (e.g., names like “Mama” or “ba” for “ball”)? (Communication and Use of Language (Expressive))</p> <p>Does the child look for an object of interest when it is removed from sight or hidden? (Inquiry Through Observation and Investigation)</p> <p>Does the child smile when others smile at him/her? (Imitation)</p>
Link	https://credi.gse.harvard.edu/
Availability	Freely available online
References	<p>McCoy, D. C., Waldman, M., & Fink, G. (2018). Measuring early childhood development at a global scale: Evidence from the Caregiver-Reported Early Development Instruments. <i>Early Childhood Research Quarterly, 45</i>, 58–68. https://doi.org/10.1016/j.ecresq.2018.05.002</p> <p>Waldman, M., McCoy, D. C., Seiden, J., Cuartas, J., CREDI Field Team, & Fink, G. (2021). Validation of motor, cognitive, language, and socio-emotional subscales using the Caregiver Reported Early Development Instruments: An application of multidimensional item factor analysis. <i>International Journal of Behavioral Development, 45</i>(4), 368–377. https://doi.org/10.1177/01650254211005560</p>

Brief Infant Toddler Social Emotional Assessment (BITSEA)	
Purpose	Measure multiple dimensions of social-emotional development and identify delays
Developmental domain(s)	Social-emotional/ behavioral problems and competence
Length	42 items; 5 to 7 minutes
Who completes the assessment?	Parents or child care providers
Required or available training	None
Psychometrics on reliability and validity	Test-retest reliability > 0.85; inter-rater reliability > 0.25 between child care providers and parents and > 0.65 between parents; predictive validity (with CBCL) 0.12-0.53
Previous EHS research	Early Head Start Family and Child Experiences Survey (Baby FACES) - average competence score = 15.7, average problems score = 7.8 (staff ratings are lower than parent ratings)
Age(s)	12 months to 36 months
Spanish version	Yes
Example items or behaviors/skills to observe (alignment with DRDP measures)	<p>Child is restless and can't sit still (Attention Maintenance)</p> <p>Child hits, bites, or kicks you (Self-Control of Feelings and Behavior)</p> <p>Child is affectionate with loved ones (Relationships and Social Interactions with Familiar Adults)</p> <p>Child hugs or feeds dolls or stuffed animals (Symbolic and Sociodramatic Play)</p>
Link	https://eprovide.mapi-trust.org/instruments/brief-infant-toddler-social-emotional-assessment
Availability	May have fees
References	<p>Briggs-Gowan, M. J., & Carter, A. S. (2006). <i>The Brief Infant–Toddler Social & Emotional Assessment (BITSEA)</i>. Psychological Corporation, Harcourt Press.</p> <p>Briggs-Gowan, M. J., Carter, A. S., Irwin, J. R., Wachtel, K., & Cicchetti, D. V. (2004). The Brief Infant–Toddler Social and Emotional Assessment: Screening for social–emotional problems and delays in competence. <i>Journal of Pediatric Psychology</i>, 29(2), 143–155. https://doi.org/10.1093/jpepsy/jsh017</p>

Bayley Scales of Infant Development (BSID)	
Purpose	Comprehensive tool to identify development issues during early childhood

Bayley Scales of Infant Development (BSID)	
Developmental domain(s)	Adaptive behavior; cognitive; language; motor; social-emotional
Length	30 to 70 minutes (depending on age of child)
Who completes the assessment?	Trained assessor does direct item administration to children (3 domains), or asks for caregiver responses (2 domains)
Required or available training	Introductory Online Training and Online Independent Study Training Program
Psychometrics on reliability and validity	Varies across versions; tends to have good reliability
Previous EHS research	See MDI.
Age(s)	16 days to 42 months
Spanish version	No
Link	https://www.pearsonassessments.com/store/usassessments/en/Store/Professional-Assessments/Cognition-%26-Neuro/Bayley-Scales-of-Infant-and-Toddler-Development-%7C-Fourth-Edition/p/100001996.html?tab=overview
Availability	\$\$\$
References	<p>Bayley, N. & Aylward, G. P. (2023). <i>Bayley Scales of Infant and Toddler Development, Fourth Edition</i>. NCS Pearson, Inc.</p> <p>Lennon, E. M., Gardner, J. M., Karmel, B. Z., & Flory, M. J. (2020). Bayley Scales of Infant Development. <i>Encyclopedia of Infant and Early Childhood Development (Second Edition)</i>. 139-146. https://doi.org/10.1016/B978-0-12-809324-5.23376-2</p>

Mental Development Index (MDI)	
Purpose	Composite measure of nonverbal cognitive and language development from the BSID-II
Developmental domain(s)	Cognitive
Length	10 to 20 minutes
Who completes the assessment?	Trained assessor conducting direct child assessment
Required or available training	May no longer be available

Mental Development Index (MDI)	
Psychometrics on reliability and validity	See BSID.
Previous EHS research	Early Head Start Research and Evaluation Study - children who participated in EHS had statistically significantly higher MDI scores than the control group and were less likely to have MDI scores below the clinical cutoff
Age(s)	16 days to 42 months
Spanish version	No
Availability	\$\$\$

Peabody Picture Vocabulary Test (PPVT)	
Purpose	Norm-referenced measure of receptive vocabulary
Developmental domain(s)	Language
Length	10 to 15 minutes
Who completes the assessment?	Qualified assessor
Required or available training	N/A
Psychometrics on reliability and validity	Internal reliability > 0.85; test-retest reliability > 0.85
Previous EHS research	Early Head Start Research and Evaluation Study - children who participated in EHS had statistically significantly higher PPVT scores than the control group and were less likely to have PPVT scores below the clinical cutoff
Age(s)	2 years, 6 months to 90+ years
Spanish version	No
Example items or behaviors/skills to observe (alignment with DRDP measures)	Assessor asks child to point to the image of the word that they say aloud (Understanding of Language (Receptive))

Peabody Picture Vocabulary Test (PPVT)	
Link	https://www.pearsonassessments.com/store/usassessments/en/Store/Professional-Assessments/Academic-Learning/Brief/Peabody-Picture-Vocabulary-Test-%7C-Fifth-Edition/p/100001984.html
Availability	\$\$\$
References	Dunn, D. M. (2019). Peabody Picture Vocabulary Test (5th ed.) [Measurement instrument]. NCS Pearson.

MacArthur-Bates Communicative Development Inventories (CDIs)	
Purpose	Measure language and communication in young children
Developmental domain(s)	Language
Length	20-40 minutes
Who completes the assessment?	Parents or caregivers complete the assessment, scoring is done professionally
Required or available training	None
Psychometrics on reliability and validity	Strong internal and inter-rater reliability; questionable predictive validity
Previous EHS research	Baby FACES - used to assess language and communication skills in both English and Spanish as needed (staff ratings are lower than parent ratings)
Age(s)	8 months to 37 months
Spanish version	Yes
Example items or behaviors/skills to observe (alignment with DRDP measures)	Does child understand [word]? (Understanding of Language (Receptive)) Does child understand and say [word]? (Communication and Use of Language (Expressive))
Link	https://brookespublishing.com/product/CDI/
Availability	\$\$\$

MacArthur-Bates Communicative Development Inventories (CDIs)

References	Fenson, L., Dale, P. S., Reznick, J. S., Bates, E., Thal, D. J., & Pethick, S. J. (1994). Variability in early communicative development. <i>Monographs of the Society for Research in Child Development</i> , 59(5), 1-173. https://doi.org/10.2307/1166093
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Ages & Stages Questionnaire (ASQ)

Purpose	Developmental screening tool that pinpoints developmental progress
Developmental domain(s)	Communication; gross motor; fine motor; personal-social; problem solving
Length	10-15 minutes
Who completes the assessment?	Parents complete, professionals score
Required or available training	Training DVDs come with purchase of kit; online trainings available for \$\$\$
Psychometrics on reliability and validity	Reliability and validity vary by age but typically good
Previous EHS research	ASQ data is often collected by programs and used as a child outcome measure in individual EHS studies
Age(s)	1 month to 5.5 years
Spanish version	Yes
Example items or behaviors/skills to observe (alignment with DRDP measures)	Does your child name at least three items from a common category? (Communication and Use of Language (Expressive)) Does your child catch a large ball with both hands? (Gross Motor Manipulative Skills) Does your child put together a five- to seven-piece interlocking puzzle? (Fine Motor Manipulative Skills) Does your child wash his hands using soap and water and dry off with a towel without help? (Personal Care Routines: Hygiene) When asked, "Which circle is the smallest?" does your child point to the smallest circle? (Classification)
Link	https://agesandstages.com/
Availability	\$\$\$

Ages & Stages Questionnaire (ASQ)	
References	Squires, J., & Bricker, D. (2009). <i>Ages & Stages Questionnaires®, Third Edition (ASQ®-3): A Parent-Completed Child Monitoring System</i> . Paul H. Brookes Publishing Co., Inc.

Teaching Strategies GOLD Assessment (GOLD)	
Purpose	Formative assessment aligned with the Creative Curriculum
Developmental domain(s)	Social-emotional; physical; language; cognitive; literacy; mathematics; science & technology; social studies; the arts; English language acquisition
Length	Documentation (child observations) collected over time; then scoring
Who completes the assessment?	Teachers
Required or available training	Online training and interrater reliability test required
Psychometrics on reliability and validity	Internal reliability > 0.95 for all scales; raters complete inter-rater reliability training
Previous EHS research	None (state pre-ks have used in evaluations)
Age(s)	Birth to kindergarten
Spanish version	No
Example items or behaviors/skills to observe (alignment with DRDP measures)	<p>Uses adult support to calm self (Self-Comforting)</p> <p>Experiments with different ways of moving (Gross Locomotor Movement Skills)</p> <p>Shows an interest in the speech of others (Understanding of Language (Receptive))</p> <p>Explores and investigates ways to make something happen (Inquiry Through Observation and Investigation)</p> <p>Orients book correctly; turns pages from the front of the book to the back; recognizes familiar books by their covers (Interest in Literacy)</p> <p>Demonstrates understanding of the concepts of one, two, and more (Number Sense of Quantity)</p> <p>Demonstrates knowledge of the characteristics of living things (Knowledge of the Natural World)</p> <p>Demonstrates knowledge about self (Identity of Self in Relation to Others)</p> <p>Explores drama through actions and language (Symbolic and Sociodramatic Play)</p>

Teaching Strategies GOLD Assessment (GOLD)	
	Observes others as they converse in English during play or other small-group experiences; may engage in similar activities by imitating behavior; attends to oral use of English (Understanding of Language (Receptive))
Link	https://teachingstrategies.com/product/gold/
Availability	\$\$\$
References	Lambert, R. (2020). Technical manual for the Teaching Strategies GOLD® assessment (second edition): Birth through third grade. Center for Educational Measurement and Evaluation, University of North Carolina Charlotte.

Devereux Early Childhood Assessment (DECA)	
Purpose	Screening and assessment tool that focuses on identifying protective factors and provides planning resources
Developmental domain(s)	Attachment/ relationships; initiative; self-regulation
Length	5-10 minutes
Who completes the assessment?	Parents or teachers
Required or available training	Trainings available online
Psychometrics on reliability and validity	Internal reliability > 0.75 in both parents and teachers; test-retest > 0.7; inter-rater reliability > 0.55; convergent validity > 0.60
Previous EHS research	The DECA has been used as a child outcome measure in individual EHS studies
Age(s)	1 month to 36 months
Spanish version	No
Example items or behaviors/skills to observe (alignment with DRDP measures)	How often did the child show affection for familiar adults? (Relationships and Social Interactions with Familiar Adults) How often did the child try to do new things? (Curiosity and Initiative in Learning) How often did the child calm themselves? (Self-Control of Feelings and Behavior)
Link	https://centerforresilientchildren.org/infants/assessments-resources/devereux-early-childhood-assessment-deca-infant-and-toddler-program/
Availability	\$\$\$

Devereux Early Childhood Assessment (DECA)

References	Mackrain, M., LeBuffe, P., & Powell, G. (2007). <i>Devereux Early Childhood Assessment for Infants and Toddlers</i> . Kaplan Early Learning Company.
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Brigance Early Childhood Screens

Purpose	Screen children to identify potential developmental delays and giftedness
Developmental domain(s)	Physical development; language; academic skills/cognitive development; adaptive behavior
Length	10-15 minutes
Who completes the assessment?	Early educators
Required or available training	None
Psychometrics on reliability and validity	Internal reliability > 0.9; test-retest > 0.95; inter-rater reliability > 0.8; concurrent validity (with BDI) 0.15-0.61
Previous EHS research	The Brigance Screens have been used as a child outcome measure in individual EHS studies
Age(s)	Birth to 7 years
Spanish version	Directions and Letters to Families are available in Spanish; assessment is not
Example items or behaviors/skills to observe (alignment with DRDP measures)	<p>Stands on one foot for ten seconds (Gross Locomotor Movement Skills)</p> <p>Does child point to the dog when asked "where is the dog?" (Understanding of Language (Receptive))</p> <p>Place three objects in front of me (Number Sense of Quantity)</p> <p>Does child look attentively at your face when you hold him/her? (Relationships and Social Interactions with Familiar Adults)</p>
Link	https://www.curriculumassociates.com/programs/brigance
Availability	\$\$\$
References	Brigance, A. H. & French, B. (2013). <i>Brigance Early Childhood Screens III</i> . Curriculum Associates.

Provence Birth-to-Three Developmental Profile

Purpose	The developmental observation and assessment phase of the Infant-Toddler Developmental Assessment (IDA)
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Provence Birth-to-Three Developmental Profile	
Developmental domain(s)	Gross motor; fine motor; relationship to inanimate objects/cognition; language/communication; self-help/adaptive; relationship to persons; emotions and feeling states; coping behavior
Length	Varies by child age
Who completes the assessment?	Assessors (with family input)
Required or available training	Available online
Psychometrics on reliability and validity	Inter-rater and internal reliability > 0.75
Previous EHS research	None
Age(s)	Birth to 3-6 years
Spanish version	Forms are available in Spanish, manual is not
Link	https://ida2.org/pages/the-ida-materials
Availability	\$\$\$
References	Hutchinson, T. A. (1995). IDA and the Provence Profile – Efficient early assessment. <i>ECOletter</i> , 4(1), 10-13.

Early Learning Accomplishment Profile (E-LAP)	
Purpose	Provide a systematic method for observing children functioning
Developmental domain(s)	Gross motor; fine motor; cognition, language; self-help; social-emotional
Length	Half an hour-1.5 hours
Who completes the assessment?	Assessors
Required or available training	May no longer be available
Psychometrics on reliability and validity	Internal reliability, test-retest, and inter-rater all > 0.95; concurrent validity (with BSID) 0.47-0.97

Early Learning Accomplishment Profile (E-LAP)	
Previous EHS research	None
Age(s)	Birth to 36 months
Spanish version	Scoring booklets are available in Spanish, manuals are not
Link	https://www.kaplanco.com/product/13649/early-learning-accomplishment-profile-e-lap-kit?c=17%7CEA1035
Availability	\$\$\$
References	Hardin, B. J. & Peisner-Feinberg, E. S. (2001). <i>The Early Learning Accomplishment Profile (Early LAP) Examiner's Manual and Reliability and Validity Technical Report</i> . Chapel Hill Training Outreach Project, Inc., Kaplan Early Learning Company.

Appendix D. Workshop Participant Summary

	In-Person Workshop	Virtual Workshop 1	Virtual Workshop 2
Site			
Izzi	7	6	4
Kidango	2	0	1
Unity Council	7	4	5
Role			
Teacher	9	7	6
Lead/Master Teacher	2	1	1
Assistant Center/Site Director	2	0	0
Center/Site Director	1	0	0
Other Administrative Role	2	2	3
Total Participants	16	10	10

Appendix E. In-Person Workshop Data Walk Summary

Prompt	Response summary
How do you use DRDP results to inform activities and interactions for individual infants and toddlers?	<ul style="list-style-type: none"> Individualized, learning plans, strategies and planning Create activities to help strengthen areas indicated for improvement Look at the results and then plan activities at the developmental level Still think we need a way to really support/be on the same page with parents to see progress
What are the obstacles to using DRDP results to inform activities and interactions for individual infants and toddlers?	<ul style="list-style-type: none"> Thinking of activities for children with disabilities Including parent ratings and giving parents activities to do at home

Prompt	Response summary
Do you have examples of a time when it was difficult to score an infant in the DRDP domains?	<ul style="list-style-type: none"> • When toddlers fall into the infant rating based on a speech delay. • When the age makes it hard to score social emotional. • When babies that are not responding to certain cues • When can't distinguish between variation in infant development and delays
How do you share DRDP feedback with families?	<ul style="list-style-type: none"> • Provide a copy of DRDP results with actual areas they are working on • Provide SMART goals at parent-teacher conferences. • Share Individual needs plan
What are the obstacles to sharing DRDP feedback with families?	<ul style="list-style-type: none"> • Parents don't agree with results • Parents not understanding the measures and/or having the time to discuss the results • Teachers not understanding the data
What are the challenges with incorporating parents' observations into the DRDP process?	<ul style="list-style-type: none"> • Parent is busy or parent does not allow child to expressively talk. • Parent doesn't share honest responses • Parents are unaware of their children's development • Parent hesitant to share information with the teacher • Parents in denial of their children's need • Parents don't trust teachers and therefore don't share • No access to parent
Please provide an example of a time when the DRDP example made it difficult to observe a behavior in an infant or toddler. Are some examples easier or harder? Why?	<ul style="list-style-type: none"> • Title doesn't match what we are looking for • When the child has a disability • When measurement is not straightforward. • Examples don't go with title
Do you want to use other assessments in addition to the DRDP?	<ul style="list-style-type: none"> • No to additional assessments. • I don't feel like I want additional assessments to the DRDP but have parents' observations add to our ratings and appropriately have results.

Prompt	Response summary
What qualities should other assessments have?	<ul style="list-style-type: none"> • SED measures are difficult (1 & 2) • Language conversation measure is difficult • COG 3 is difficult understanding what the skill is for I/T • PD-HLTH 1 & 2 & 3 gross motor proprioceptive and manipulative are difficult • Self-regulation. PD 1 • Alt-Reg measure
How could using another assessment improve the use of the DRDP?	<ul style="list-style-type: none"> • ASQ because it shows more of exact examples of experiences • ASQ is a great way to gather more information about the child./Parent-teacher conference as well • ASQs for some items of DRDP. • ASQ in hand to create alternate DRDP? • ASQ helps because sometimes parents see things at home we don't see at school • IFSPs information can be useful for DRDP

Appendix F: DRDP Implementation Toolkit Test Data

- Seventeen teachers completed the tool testing exercise (4 Unity Council, 13 Izzi).
- They reported on 39 children that they rated or observed this DRDP cycle.
 - Ninety-two percent (36) of the children were toddlers and 8 percent (3) were infants.
 - Eighty-seven percent (34) were dual language learners.
 - Sixteen percent (6) had IFSPs.
- Across these children, teachers either agreed (13) or strongly agreed (21) with the statement, “Using the tool increased my confidence in observing or rating the infant or toddler.”
 - There were five children for whom respondents did not provide an answer to this question.
- All teachers indicated that they **would** use this tool again.
- All teachers indicated that this tool would be helpful for other domains.
- What they said about the developmental levels:
 - “The developmental levels truly helped me better understand what it is that I need to specifically look for in those domains. I felt more confident when using the DRDP and this tool.”

- “I think having the phrases in bold and straight to the point has been very helpful. For someone who is used to the DRDP it's a good refresher. For someone whose new it's a good thing to start with.”
- “It was simpler to understand the tools definitions of the developmental domains than the ones in the DRDP. It was easier for me to identify where the child needed to be placed.”
- What they said about the big ideas:
 - “In regards to the big idea column, it helped me with my observations that I wrote for the child and helped me better pin point where the child should be rated. It also helped that there were questions after each main focus (ex. Self-calming- does the child engage in strategies to calm themselves on their own?).”
 - “I think the big ideas supports teachers' ability to identify the measures, instead of having pre-existing examples.”
 - “It would be nice to have some examples while we have the big ideas and to have the tool in multilanguage.”

Appendix G: DRDP Implementation Toolkit Graphic

The Desired Results Developmental Profile

Approaches to the Learning—Self-Regulation Domain

Developmental Levels

Responding	Exploring	Building	Integrating
Young infants have a limited ability to maintain attention and comfort themselves. They rely on adults for comfort, learning opportunities, and objects to respond to and for modeling behaviors.	Older (mobile) infants and young toddlers are more able to maintain attention and comfort themselves, but they still seek, need, or benefit from adult support in these areas. They are more curious and increasingly explore their environment. They try out techniques that adults model for regulating feelings and actions.	Toddlers are able to maintain attention and practice self-comforting and self-regulation strategies on their own, but they may ask questions and seek support when needed .	By late preschool, children are able to seek and engage in more challenging learning experiences and to apply more complex self-regulation skills. This level is not observed in the infant toddler years.

Measures

Measure	Definition	Big ideas
Attention maintenance	Child develops the capacity to pay attention to people, things, or the environment when interacting with others or exploring play materials	<ul style="list-style-type: none"> • Focusing—Does the child focus their gaze on something of interest? • Sustaining attention—Does the child keep attending to something of interest for any amount of time?
Self-comforting	Child develops the capacity to comfort or soothe self in response to distress from internal or external stimulation	<ul style="list-style-type: none"> • Self-calming—Does the child engage in strategies to calm themselves on their own? • Using adults to calm self—Does the child seek adult support (touch, conversation, etc.) to calm themselves?
Imitation	Child mirrors, repeats, and practices the actions or words of others in increasingly complex ways	<ul style="list-style-type: none"> • Mimicking others' words or actions—Does the child recognize facial expressions or verbalizations and try to repeat them?
Curiosity and initiative in learning	Child explores the environment in increasingly focused ways to learn about people, things, materials, and events	<ul style="list-style-type: none"> • Demonstrating curiosity—Does the child show interest in new things? • Exploring the environment—Does the child seek stimulation from their environment?
Self-control of feelings and behavior	Child increasingly develops strategies for regulating feelings and behavior and becomes less reliant on adult guidance over time	<ul style="list-style-type: none"> • Regulating feelings—Does the child direct strong emotions in a healthy way? • Regulating behavior—Does the child control their behavior while experiencing a strong emotion? • Developing strategies for both—Does the child use techniques to regulate that have been successful in the past?