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Characteristics of a Primary Coach Approach to Teaming in Early Childhood Programs

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ABSTRACT

This *CASEinPoint* includes an operational definition of primary coach teaming practices and a description of the characteristics of this approach to teaming. A primary coach approach to teaming practices focuses on the relationship between the use of operationally defined primary coach characteristics and intended consequences. The characteristics of a primary coach approach to teaming practices are included to illustrate how the practices are implemented in ways that build the capacity of a parent or colleague to improve existing abilities, develop new skills, and gain a deeper understanding of evidence-based practices.

INTRODUCTION

The purpose of this *CASEinPoint* is to operationally define the meaning of primary coach teaming practices. The definition includes the characteristics and conditions that promote multidisciplinary teams of practitioners' use of evidence-based early childhood intervention practices. The need for a primary coach approach to teaming is based on the fact that focusing on services and multiple disciplines implementing decontextualized, child-focused, and deficit-based interventions has not proven optimally effective (Campbell & Halbert, 2002; Dunst, Bruder, Trivette, Raab, & McLean, 2001; Dunst & Raab, 2004; Dunst, Trivette, Humphries, Raab, & Roper, 2001; McWilliam, 2000; Raab & Dunst, 2004; Shelden & Rush, 2001). In addition, involvement of multiple practitioners in a family's life on a regular basis has been found to negatively impact family functioning (Dunst, Brookfield, & Epstein, 1998; Law et al., 2001; Sloper, 2004; Sloper, Mukherjee, Beresford, Lightfoot, & Norris, 1999; Sloper & Turner, 1992).

In light of mounting evidence regarding effectiveness of natural learning environment practices (Dunst, 2005; Dunst, Bruder, Trivette, Hamby et al., 2001; Dunst, Bruder, Trivette, & Hamby, 2006; Dunst, Hamby, Trivette, Raab, & Bruder, 2000; Dunst, Herter, & Shields, 2000), early childhood practitioners are faced with the task of reconceptualizing their roles with families of children with disabilities from (a) independent, child-focused interventionists to (b) members of family-centered teams that use a primary coach approach to minimize

disruptions in family's lives. An interdependent team of highly-qualified practitioners is required as part of the Individuals with Disabilities Education Act (IDEA) Part C Early Intervention Program, and is more likely to support families in a manner that will build their capacity to confidently and competently promote the growth and development of their children.

In order to implement evidence-based natural learning environment practices with the least intrusion on family life, use of a lead practitioner (a.k.a., primary coach) as described in this *CASEinPoint* constitutes a viable approach that can result in positive outcomes for young children and their families. Primary coach teaming practices are implemented when a program is identified as a formal resource for early childhood intervention and family support, and employs or contracts with practitioners with diverse knowledge and experiences from which to choose to support the child's parents and other primary care providers.

DEFINITION OF A PRIMARY COACH APPROACH TO TEAMING

The use of a primary coach approach to teaming is not intended to limit a family's access to supports and services, but instead, is intended to expand support for families by using core teams of individuals representing multiple disciplines who are accountable to the family as well as one another. The primary coach acts as the principal program resource and point-of-contact between other program staff, the family, and other team members. The role of the primary coach is as a mobilizer of resources to support the family and other care providers. The primary coach also mediates the family's and other care providers' use of skills and knowledge in relation to a range of needed or desired resources. Accordingly, the operational definition of a primary coach approach to teaming is:

> *A multidisciplinary team where one member is selected as the primary coach, receives coaching from other team members, and uses coaching with parents and other primary care providers to support and strengthen parenting competence and confidence in promoting child learning and development and obtaining desired supports and resources.*

Primary coach teaming practices are characterized by team members' use of coaching practices to build and strengthen the capacity of parents, other primary care providers, and colleagues to improve existing abilities, develop new skills, and gain a deeper understanding of the key features of evidence-based practices. The operational definition of a primary coach approach to teaming differs from other approaches to teaming where one practitioner serves as the liaison between the family and other team members (Woodruff & McGonigel, 1988; York, Rainforth, & Giangreco, 1990) by an explicit focus on the ***type*** (i.e., coaching) and ***content*** (i.e., natural learning environment practices) of interactions between team members and their roles promoting parenting skills, knowledge, and attributions.

NATURAL LEARNING ENVIRONMENT PRACTICES

Evidence-based, natural learning environment practices support parents and other primary care providers in understanding the importance of everyday activities as the sources of interest-based children's learning opportunities. Dunst et al. (2001) defined an activity setting as a "situation-specific experience, opportunity, or event that involves a child's interaction with people, the physical environment, or both, which provides the contexts for a child to learn." (p. 70). Examples of activity settings include, but are not limited to, taking a bath, eating a meal, playing with pots and pans on the kitchen floor, swinging in a tire swing, feeding the dog, riding a bus downtown, reading a book before bedtime, and baking holiday cookies with Grandma.

Natural learning environment practices support parents' and other care providers' recognition and use of child interests as a means for capitalizing on the abundant learning opportunities that occur as part of all children's everyday lives. Interest-based learning is defined as children's engagement in activities with people and objects that are interesting, fun, exciting, and enjoyable (Dunst, Herter et al., 2000; Raab, 2005). When a child is involved with something or someone that he or she finds interesting, research shows that the child will engage for longer periods of time, thus yielding especially positive benefits related to child learning (Dunst, Herter et al., 2000; Raab, 2005).

COACHING FAMILIES

Coaching is an evidence-based, interactive process of reflection, information sharing, and action used to provide support and encouragement, refine existing practices, develop new skills, and promote continuous self-assessment and learning (e.g., Joyce & Showers, 1982; Kohler, McCullough, & Buchan, 1995; Morgan, Gustafson, Hudson, & Salzberg, 1992; Munro & Elliott, 1987; Rush, Shelden, & Hanft, 2003; Showers, 1985; Sparks, 1986; Tschantz & Vail, 2000). Coaching of parents and other care providers by early childhood prac-

titioners strengthens the capacity of family members to promote their child's learning and development (Shelden & Rush, 2001).

Significant people in a child's life gain competence and confidence when a coach assists them in using existing abilities and developing new knowledge, skills, and experiences to interact with a child in everyday activities, and then assess and perhaps improve upon the results (Fenichel & Eggbeer, 1992). Coaching is used by early childhood practitioners to facilitate a dynamic exchange of information based on the parent's intentions and current level of knowledge and skills necessary to promote the child's participation in a variety of family, community, and early childhood settings (Bruder & Dunst, 1999; Hanft, Rush, & Shelden, 2004). Coaching is defined as:

> *An adult learning strategy in which the coach promotes the learner's ability to reflect on his or her actions as a means to determine the effectiveness of an action or practice and develop a plan for refinement and use of the action in immediate and future situations* (Rush & Shelden, 2005).

Coaching is used to improve existing practices, develop new skills, and promote continuous self-assessment and learning. The role of the coach is to provide a supportive environment in which the parent and coach jointly examine and reflect on current practices, apply new skills and competencies with feedback, and problem-solve challenging situations.

PRIMARY COACH APPROACH TO TEAMING

The use of teams to accomplish objectives that could not be accomplished otherwise is prevalent (West, Brodbeck, & Richter, 2004). The question before the field of early childhood intervention should not be if teams should be used, but how teams can be configured to work together effectively in an efficient and cost-effective manner to maximize benefits for young children and their families.

Early Childhood Intervention Program Teams

The use of teams comprised of individuals with a variety of expertise and knowledge in the field of early childhood has been an essential component of educational legislation (Individuals with Disabilities Education Act Amendments, 20 U.S.C. § 1400 et seq., 1997), recommended practice (Sandall, Hemmeter, Smith, & McLean, 2005), and the theoretical and research literature (Antoniadis & Videlock, 1991; Briggs, 1997; Nash, 1990; Woodruff & McGonigel, 1988). For example, the importance of teamwork in health care has been recognized in terms of benefits to health care workers (e.g., lower stress, higher retention rates, increased innovation by team members, increased job satisfaction) and recipients of health care services (e.g., lower mortality rates in hospitals, higher quality of care, improved cost-effectiveness) (Borrill et al., 2001; Borrill et al., 2002; West, 2002). As part of a meta-analysis of team design variables and team effectiveness, Bell (2004) stated that a recent survey of U.S. organizations indicated that more than 48% use teams of some sort. The use of teams in the workplace is commonplace in business and industry (Cohen & Bailey, 1997; Hoegl & Gemuenden, 2001) as well as in educational (Flowers, Mertens, & Mulhall, 1999) and health care contexts (Borrill et al., 2001; Borrill et al., 2002).

Effective Teaming Characteristics

The assessment of team effectiveness has received much consideration in the literature. Hackman (1987) and others (Cohen & Bailey, 1997; Guzzo & Dickson, 1996; Kozolowski & Bell, 2003; Sundstrom, DeMeuse, & Futrell, 1990) described three sets of criteria for assessing team effectiveness: (1) team performance, (2) team viability, and (3) team satisfaction. Other researchers have described these same criteria as well as additional criteria that are associated with corresponding organizational benefits (e.g., staff retention, absenteeism, innovation, mental health, cost effectiveness of care) and positive outcomes for team members and recipients of team-based support (Borrill et al., 2001; Borrill et al., 2002; Macy & Izumi, 1993; Thompson, 2000; West, 2002).

Bell (2004) also reviewed studies and analyzed the effects of team design variables on team effectiveness. The studies she examined investigated the effects of individual characteristics of team members and the effects of team task and team structure (i.e., distribution of authority, team size, interdependence of team members, degree of self-management) on the overall effectiveness of teams. In her meta-analysis, Bell (2004) found that effective teams include individuals who: (a) are agreeable; (b) are conscientious; (c) have high general mental ability; (d) are competent in their area of expertise; (e) are high in openness to experience and mental stability; (f) like teamwork; and (g) have been with the organization long enough to be socialized.

A particular caution stands out in terms of the length of team membership and is the basis for the characteristic of assigning children and families as well as practitioners to the same team when using a primary coach approach to teaming. All team members must be able to readily identify who is on their team. The organiza-

tion must be able to support these teams in ways that minimize turnover, maximize involvement, and promote long-term team membership. Socialization and acculturation to the program, the team, and use of evidence-based practices is less likely to occur when team members rotate or change on a frequent basis. The socialization/acculturation effect described by Bell (2004) and others (Borrill et al., 2001; Borrill et al., 2002) is one of the most positive benefits of implementing a primary coach approach to teaming. This adds an inherent check-and-balance among team members, heightened sense of responsibility, and programmatic accountability regarding the implementation of evidence-based practices and overall quality of supports and services for all families enrolled in an early childhood program.

Team task and structure factors (Bell, 2004; Borrill et al., 2001; Borrill et al., 2002; Flowers et al., 1999; Larsson, 2000; and West, 2002) that influence the effectiveness of teams also prove to be informative and provides evidence to further define and support the characteristics of a primary coach approach to teaming. The following are some of the evidence-based team task and structure factors related to implementation of a primary coach approach to teaming:

- Team tasks should allow members to use a variety of skills that result in meaningful work and have positive consequences for other people (Bell, 2004; Borrill et al., 2001; Hackman, 1987).
- The number of team members should be appropriate to the task (Bell, 2004; Larsson, 2000).
- Teams should have some degree of self-managing abilities because a greater degree of team self-management is related to enhanced team performance (Bell, 2004; Borrill et al., 2001; De Drue & West, 2001; Erez, LePine, & Elms, 2002).
- Teams should have a common planning time (Borrill et al., 2001; Borrill et al., 2002; Flowers et al., 1999; West, 2002).

Use of a Single Practitioner as Team Liaison

The use of one person as the primary contact between team members and families is not new (Woodruff & McGonigel, 1988; York, Rainforth, & Giangreco, 1990). The concept of a primary service provider (i.e., primary coach), however, has neither been well defined nor has there been any previous attempt to identify the individual characteristics of the practice. Several studies from the medical field have identified the benefits of the use of a "key worker" as the single portal of contact for families. These benefits include better partnerships between families and service organizations, higher family morale, less family isolation and feelings of burden, improved receipt of information, fewer unmet needs, and increased family-centeredness of services (Law et al., 2003; Liabo, 2001; Sloper, 2002). Dunst et al. (1998) and found more positive effects on family well-being when one practitioner was involved with families of children with disabilities rather than multiple providers. Additional studies also report benefits for practitioners who serve in the role of key workers in terms of increased job satisfaction (Greco & Sloper, 2004; Prestler, 1998).

Characteristics of a Primary Coach Approach to Teaming

Based on available evidence, the following are considered the key characteristics of a primary coach approach to teaming. All of the characteristics must be adhered to by all team members in order to identify the practices as a *primary coach approach to teaming* and to ensure achievement of optimal benefits for young children and their families.

Identified team. One characteristic of a primary coach approach to teaming is that an identified team of individuals from multiple disciplines having expertise in child development, family support, and coaching is assigned to each family in a program. Programs using a primary coach approach to teaming include practitioners from a variety of disciplines that are assigned to provide supports within a geographic region or designated catchment area.

A core team must minimally include an early childhood educator and/or early childhood special educator, occupational therapist, physical therapist, and speech-language pathologist. Parents are always members of their child's team. The team must also include a service coordinator who is either one of the above core team members or a dedicated service coordinator depending upon the state's service coordination model. Where practitioners are also responsible for the role of service coordination and/or in situations that require extensive travel times, the number of families supported by the core team may need to be decreased.

Other core team members may also include audiologists, nurses, dieticians, psychologists, social workers, teachers of children with vision and/or hearing impairments, mobility specialists, physicians, assistive technology specialists, and other professionals. Circumstances specific to a particular child may require additional team members such as Head Start and Early Head Start teachers, Parents as Teachers home visitors, child care providers, and any others parents deem important in the life of the child.

Individuals serving a support role such as aides, assistants, and paraprofessionals are not members of the

core team because they are required to work under the direction of one of the aforementioned core team members. A primary coach approach to teaming focuses on promoting parent competence and confidence in using everyday activities as opportunities for interest-based child learning. This requires the expertise of and accessibility to the supervising therapist or educator to maximize just-in-time learning opportunities and continue the ongoing coaching conversation with the parent or other care provider rather than using an assistant to implement an approved exercise program or standard set of activities.

Primary coach as team liaison. A second characteristic is that one team member serves as primary coach to the care provider(s). All team members must be competent and confident in their own discipline, child development, parenting supports, natural learning environment practices, and coaching. Any core team member may be the primary coach with the exception of the service coordinator in programs that use a dedicated service coordinator. While a dedicated service coordinator may use a coaching style of interaction, he or she would not be the primary coach. The person selected to be primary coach is the member of the team who is the best possible match for a child and family. The primary coach may be selected based on four criteria: Desired outcomes of the family; relationship with the parent, care provider, or other primary learner; special knowledge of the coach; and availability of the team member to be a family's primary coach.

The stage of a team's development generally determines how the primary coach is selected. In the early stages when team members are just beginning to get to know one another and use natural learning environment practices as well as a coaching interaction style and primary coach approach, teams typically assign the primary coach based on a match between parent priorities and the primary coach's discipline. As team members get to know one another's strengths and challenges, primary coach selection is often based on the person rather than discipline. Once teams have experience working together, any member of the team may be an appropriate choice for primary coach because he/she is competent and confident in his/her discipline, child learning and development, parenting supports, and coaching. He/she also knows when to request coaching and support from other team members.

Coaching interaction style. A third characteristic of a primary coach approach to teaming is that the primary coach receives coaching from other team members through ongoing formal (planned) and informal interactions. Coaching is used among colleagues to improve existing practices, develop new skills, provide support, and promote continuous self-assessment and learning. Coaching is also used with parents and other care providers by early childhood practitioners to build their capacity to promote the child's learning and development. Coaching interactions may include opportunities for observation, practice, reflection, feedback, and joint planning. Every coaching interaction should minimally include an opportunity for the parent or another primary care provider to reflect on what he or she is doing to support the child in accomplishing the desired priorities and other strategies or ideas he or she might try within the context of child interest-based learning activities. In addition, each coaching interaction includes informative feedback by the practitioner that consists of evidence-based information and strategies to assist the parent in achieving his or her priorities. Every coaching interaction ends with the formulation of a joint plan in which the parent and coach outline specifically what each will actively do between visits based on their discussion.

Implementation Conditions

Specific implementation conditions must be followed to operationalize the characteristics of a primary coach approach to teaming. As stated above, these conditions are critical to effective implementation of the approach.

- *All therapists and educators on the team must be available to serve as a primary coach,*
- *All team members attend regular team meetings for the purpose of colleague-to-colleague coaching,*
- *The primary coach is selected based on desired outcomes of the family, rapport/relationship between coach and parent or other primary care provider, and knowledge and availability of the coach and family,*
- *Joint visits should occur at the same place and time whenever possible with/by other team members to support the primary coach, and*
- *The primary coach for a family should change as infrequently as possible.*

Justifiable reasons for changing the primary coach include a request by a family member or other care provider; or when a primary coach believes that even with coaching from other team members he or she would be ineffective in supporting the parent or other primary care providers.

CONCLUSION

This *CASEinPoint* included a description of a primary coach approach to teaming. Research indicates that early childhood intervention programs must use natural

learning environment practices that are promotional, strengths-based, resource-based, family-centered, and build the capacity of care providers to be confident and competent in promoting child growth and development of the children in their care. The IDEA Federal Regulations are clear in prescribing the involvement of teams comprised of individuals from multiple disciplines in the design and delivery of early childhood supports and services. Further, research evidence, practical experience, and common sense tell us that having one primary liaison from the team to the family is an effective means of providing supports. The primary coach is responsible for implementing natural learning environment practices using a coaching style of interaction for enhancing the knowledge and skills of the primary care provider(s) in order to promote positive family functioning, maximize opportunities for child learning, and facilitate expansion of existing development-enhancing experiences within the context of everyday learning activities.

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