

ECTA Indicators of High-Quality Inclusion
EARLY CARE AND EDUCATION ENVIRONMENT INDICATORS
<https://ectacenter.org/topics/inclusion/indicators-ece.asp>

E2. Children’s Autonomy and Child-Centered Approaches. Providers ensure that children with disabilities are free to and supported in engaging in activities they like and are priorities for their family. Supports focus on access, participation, and belonging, and not on fixing or changing the child.

Providers:

1. Hold high expectations of children, support peer engagement and independence, and include them in all physical activities, making modifications when needed.
2. Offer children the option to complete preferred activities whenever possible. They integrate the child's special interests when doing an adult-directed activity.
3. Develop and implement transition processes that consider necessary supports for each child. The transition plan should consider how children are currently transitioning and what increased fluency and independence in transitions look like.
4. Expose children to new experiences, activities, and materials.
5. Help children with disabilities fulfill their interests and curiosities and expand their capacity for learning, growth, and opportunity.

Rating Scale:

0-No evidence available

1-Few (around 25%) Opportunities Captured Across People, Places, and Circumstances

2-Some (around 50%) Opportunities Captured Across People, Places, and Circumstances

3-Most (around 75%) Opportunities Captured Across People, Places, and Circumstances

4-Practice is implemented in an exemplary manner (No action item is necessary)

Element	Rating	Evidence	Action item/priority
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Develop and implement transition processes that consider necessary supports for each child. The transition plan should consider how children are currently transitioning and what increased fluency and independence in transitions look like.			
Expose children to new experiences, activities, and materials.			
Help children with disabilities fulfill their interests and curiosities and expand their capacity for learning, growth, and opportunity.			

E5. Meaningful Interactions with Peers. Providers use various strategies to promote positive social interactions between children. This includes organizing the environment for teaching specific social skills that encourage peer interactions with multiple exchanges and increased complexity.

Providers:

1. Identify each child's peer social interaction goal.
2. Teach context-specific peer social skills through group lessons and role-playing.
3. Teach children a variety of play skills with varied complexity to support their participation and peer interactions.
4. Select and arrange activities and materials that promote peer interactions.
5. Create consistent opportunities for children to socialize.
6. Model phrases children can use to initiate, respond to, and continue interactions.
7. Encourage peer partnerships that promote mutual learning across routines. Discuss disabilities and inclusion regularly with children in developmentally appropriate ways.
8. Facilitate regular discussions with children about their similarities and differences and how they can be supportive and kind.

9. Demonstrate attitudes and beliefs by using inclusive language when interacting with children, families, and other providers.

Rating Scale:

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routines. Discuss disabilities and inclusion regularly with children in developmentally appropriate ways.			
Facilitate regular discussions with children about their similarities and differences and how they can be supportive and kind.			
Demonstrate attitudes and beliefs by using inclusive language when interacting with children, families, and other providers.			

E7. Instruction. Providers use child-led, culturally responsive and sustaining, embedded, evidence-based, and data-driven instruction during naturally-occurring routines. Group activities and play give children with disabilities sufficient opportunities to learn the skills that the team, including the family, has identified as important. Instructional supports are individualized and effective.

Providers:

1. Observe and record children’s strengths, needs, interests, abilities, and reinforcers to inform instruction.
2. Develop or alter the environment, materials, and instruction to ensure children can engage in activities and reach their individualized goals.
3. Embed instruction and targeted goals into naturally-occurring opportunities for learning.
4. Use repetition, modeling and imitation.
5. Break tasks into smaller steps using familiar and less familiar materials.
6. Use evidence-based instructional practices.
7. Create opportunities to address all stages of the learning cycle.
8. Use materials that show children and families’ various identities.
9. Provide access and opportunities for children to communicate and receive instruction through various methods and languages inside and outside the learning environment.

Rating Scale:

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E1. Physical Environment. Providers arrange and adapt the learning environment and materials to allow children with disabilities to fully participate, learn, play, and socialize.

Providers structure the learning environment to:

1. Encourage participation and interaction.
2. Ensure children with wheelchairs and other mobility devices can safely navigate the space.
3. Provide children multiple ways to engage with the materials, lessons, educators, and peers. This includes visual, verbal, auditory, etc.
4. Integrate the range of communication formats (e.g., AAC) and languages (including sign language) used by children into all routines, instructional, and social interactions both indoors and outdoors.
5. Make materials accessible for children to explore interests and curiosity.
6. Adapt materials so that children with disabilities can manipulate them easily and independently.
7. Use learning materials that represent children with disabilities in non-stereotypical ways.

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Adapt materials so that children with disabilities can manipulate them easily and independently.			
Use learning materials that represent children with disabilities in non-stereotypical ways.			