

ITC Family & Community Resources Master Rubric

Competency	Distinguished	Proficient	Needs Improvement	Unsatisfactory	Unable to Assess
<p>FCR1: Describes the inter-relationship between children, family, practitioners, and community contexts, their influence on families' approaches to parenting children birth to age three, and the impact on family-practitioner collaboration.</p> <p>NAEYC: 1a, 1b, 2a, 2b IPTS: 9C, 9H ITC: 2-4F1, 2-4F8, 5F1, 5F8</p>	<p>Provides examples demonstrating understanding of how family structures, diversity in social, cultural, linguistic, or religious background influence families' approaches to parenting children birth-3, and to practitioners' approaches to collaboration.</p> <p>Describes how community characteristics, family structures, and diversity in social, cultural, linguistic, or religious background influence families' and practitioner's perspectives and interactions with children birth-3, each other, and the community.</p> <p>Explains how relationships among practitioners, infants/toddlers, and families can impact other child-family, child-practitioner, and practitioner-family relationships.</p> <p>Uses research and evidence-base to support explanation.</p>	<p>Provides examples demonstrating understanding of how family structures, diversity in social, cultural, linguistic, or religious background influence families' approaches to parenting children birth-3, and to practitioners' approaches to collaboration.</p> <p>Describes how community characteristics, family structures, and diversity in social, cultural, linguistic, or religious background influence families' and practitioner's perspectives and interactions with children birth-3, each other, and the community.</p> <p>Explains how relationships among practitioners, infants/toddlers, and families can impact other child-family, child-practitioner, and practitioner-family relationships.</p>	<p>Provides limited examples demonstrating understanding of how family structures, diversity in social, cultural, linguistic, or religious background influence families' approaches to parenting children birth-3, and to practitioners' approaches to collaboration.</p> <p>Describes, in part, how community characteristics, family structures, and diversity in social, cultural, linguistic, or religious background influence families' and practitioner's perspectives and interactions with children birth-3, each other, and the community.</p> <p>Provides surface explanation of how relationships among practitioners, infants/toddlers, and families can impact other child-family, child-practitioner, and practitioner-family relationships.</p>	<p>Provides examples demonstrating a lack of understanding of how family structures, diversity in social, cultural, linguistic, or religious background influence families' approaches to parenting children birth-3, and to practitioners' approaches to collaboration.</p> <p>Inaccurately describes how community characteristics, family structures, and diversity in social, cultural, linguistic, or religious background influence families' and practitioner's perspectives and interactions with children birth-3, each other, and the community.</p> <p>Provides an inaccurate explanation of how relationships among practitioners, infants/toddlers, and families can impact other child-family, child-practitioner, and practitioner-family relationships.</p>	
<p>FCR2: Demonstrates behavior that reflects confidentiality and awareness of the unique role of providing services to infants/toddlers and their families.</p> <p>NAEYC: 6d IPTS: N/A ITC: 2-4G11, 2-4G12</p>	<p>Provides examples of unique confidentiality issues and responsibilities that may arise in providing services to infants/toddlers and their families.</p> <p>Engages in behavior reflective of confidentiality.</p> <p>Engages in behaviors reflective of understanding the unique role of providing services to infants/toddlers and their families.</p> <p>Identifies strategies that would support colleagues in developing and engaging in confidential behaviors and behaviors that demonstrate awareness of the unique role of providing services to infants/toddlers and their families.</p>	<p>Provides examples of unique confidentiality issues and responsibilities that may arise in providing services to infants/toddlers and their families.</p> <p>Engages in behavior reflective of confidentiality.</p> <p>Engages in behaviors reflective of understanding the unique role of providing services to infants/toddlers and their families.</p>	<p>Provides limited examples of unique confidentiality issues and responsibilities that may arise in providing services to infants/toddlers and their families.</p> <p>Engages in behavior reflective of confidentiality on a fairly consistent basis.</p> <p>Generally, engages in behaviors reflective of understanding the unique role of providing services to infants/toddlers and their families.</p>	<p>Does not maintain confidentiality.</p> <p>Behavior not reflective of understanding the unique role of providing services to infants/toddlers and their families.</p>	

<p>FCR3: Engages in interactions and demonstrates practice with children, families, and practitioners reflective of a strengths-based, family-centered, relationship-based approach.</p> <p>NAEYC: 1b, 2a, 2b IPTS: 9C, 9D, 9G ITC: 2-4F2, 2-4F6, 2-4F7, 5F2, 5F6, 5F7</p>	<p>Engages in strengths-based, family-centered, relationship-based interactions with children, families, and other practitioners.</p> <p>Demonstrates strengths-based, family-centered, relationship-based practice within settings serving infants and toddlers.</p> <p>Recognizes the strengths and benefits, and supports any potential challenges of families of infants and toddlers who are learning English as a second language and/or multiple languages and families with infants and toddlers with developmental delays, disabilities, and/or other special needs, (e.g., stressful circumstances, illness).</p> <p>Uses research and evidence-base to support and advocate for a strengths-based, family-centered, relationship-based approach.</p>	<p>Engages in strengths-based, family-centered, relationship-based interactions with children, families, and other practitioners.</p> <p>Recognizes the strengths and benefits, and supports any potential challenges of families of infants and toddlers who are learning English as a second language and/or multiple languages and families with infants and toddlers with developmental delays, disabilities, and/or other special needs, (e.g., stressful circumstances, illness).</p>	<p>Engages in positive interactions with children, families, and other practitioners.</p> <p>Demonstrates supportive practices within settings serving infants and toddlers.</p> <p>Recognizes the strengths of families of infants and toddlers who are learning English as a second language and/or multiple languages and families with infants and toddlers with developmental delays, disabilities, and/or other special needs, (e.g., stressful circumstances, illness).</p>	<p>Engages in interactions with children, families, and other practitioners that are not reflective of a strength-based lens.</p> <p>Demonstrates practices that are not supportive of children, families, and colleagues within settings serving infants and toddlers.</p> <p>Does not recognize the strengths of families of infants and toddlers who are learning English as a second language and/or multiple languages and families with infants and toddlers with developmental delays, disabilities, and/or other special needs, (e.g., stressful circumstances, illness).</p>	
<p>FCR4: Collaborates with families to nurture healthy development, learning, mental health and well-being within and between infant and toddler social and cultural contexts.</p> <p>NAEYC: 1b, 2b, 2c, 4a, 4b, 4c IPTS: 9C, 9E ITC: 2-4E10, 2-4F3, 2-4F10, 5E10, 5F3</p>	<p>Provides examples of a range of strategies to promote socialization and nurture social competence in infants and toddlers within their cultural and societal contexts.</p> <p>Collaborates with families as partners to nurture healthy development, learning, mental health and well-being within and between infant and toddler social and cultural contexts.</p> <p>Identifies strategies that support families and other colleagues as advocates for family-practitioner collaboration nurturing healthy development, learning, mental health and well-being within and between infant and toddler social and cultural contexts.</p>	<p>Provides examples of a range of strategies to promote socialization and nurture social competence in infants and toddlers within their cultural and societal contexts.</p> <p>Collaborates with families as partners to nurture healthy development, learning, mental health and well-being within and between infant and toddler social and cultural contexts.</p>	<p>Provides examples of strategies to promote socialization and nurture social competence in infants and toddlers within their cultural and societal contexts.</p> <p>Collaborates with families to nurture healthy development, learning, mental health and well-being within and between infant and toddler social and cultural contexts.</p>	<p>Provides inaccurate examples of strategies to promote socialization and nurture social competence in infants and toddlers within their cultural and societal contexts.</p> <p>Engages in behavior that undermines collaboration with families.</p>	
<p>FCR5: Employs a developmental approach to understanding and collaborating with families of infants and toddlers.</p> <p>NAEYC: 1a, 1b, 2b, 2c, 6d IPTS: 9C, 9E, 9H ITC: 2-4A19, 2-4F5, 5A19, 5F5, 5F9, 5F10</p>	<p>Recognizes aspects of early care and education that may be emotionally salient and/or particularly difficult for families of infants and toddlers (e.g., leaving their children for the first time, the families' first experience with practitioners), and names ways to support families and ensure parent-practitioner partnerships.</p> <p>Uses research and developmental theory to support rationale.</p>	<p>Recognizes aspects of early care and education that may be emotionally salient and/or particularly difficult for families of infants and toddlers (e.g., leaving their children for the first time, the families' first experience with practitioners), and names ways to support families and ensure parent-practitioner partnerships.</p>	<p>Recognizes aspects of early care and education that may be emotionally salient and/or particularly difficult for families of infants and toddlers (e.g., leaving their children for the first time, the families' first experience with practitioners).</p>	<p>Recognition of aspects of early care and education that may be emotionally salient and/or particularly difficult for families of infants and toddlers (e.g., leaving their children for the first time, the families' first experience with practitioners) inaccurate or incomplete.</p>	
<p>FCR6:</p>	<p>Plans and implements collaborative</p>	<p>Plans and implements collaborative</p>	<p>Plans and implements learning</p>	<p>Plans and implements learning</p>	

<p>Plans and implements collaborative learning opportunities, in partnership with families, that are supportive of the healthy development, learning, mental health and well-being of infants and toddlers.</p> <p>NAEYC: 2b, 2c IPTS: 8A, 8E, 9H ITC: 2-4E18, 2-4F11, 2-4F13, 5E18, 5F11, 5F13</p>	<p>learning opportunities, in partnership with families, that are supportive of the healthy development, learning, mental health and well-being of infants and toddlers.</p> <p>Identifies strategies that support families and other colleagues as advocates for family-practitioner collaboration in planning learning opportunities for infants and toddlers.</p>	<p>learning opportunities, in partnership with families, that are supportive of the healthy development, learning, mental health and well-being of infants and toddlers.</p>	<p>opportunities, based on family knowledge, that are supportive of the healthy development, learning, mental health and well-being of infants and toddlers.</p>	<p>opportunities.</p>	
<p>FCR7: Designs and advocates for program policies and practices that support a collaborative team approach, with families as essential partners, in supporting the healthy development, learning, mental health and well-being of infants and toddlers.</p> <p>NAEYC: 1c, 2c, 4c IPTS: 9C ITC: 2-4F9, 2-4F15, 5F15</p>	<p>Utilizes the positive benefits of a collaborative team approach to working with families and colleagues when supporting the development and learning of infants and toddlers, including children from all cultural backgrounds, who have varying abilities as well as those who are multilingual.</p> <p>Designs and supports program practices and practitioner strategies that can be used to encourage families to share information about home care giving routines, practices, and preferences, and support them in their parenting roles.</p> <p>Advocates for program practices and practitioner strategies that can be used to encourage families to share information about home care giving routines, practices, and preferences, and support them in their parenting roles.</p> <p>Supports families and colleagues as advocates and equal participants in supporting the healthy development, learning, mental health and well-being of infants and toddlers, identifying strategies that support essential knowledge and skills.</p>	<p>Utilizes the positive benefits of a collaborative team approach to working with families and colleagues when supporting the development and learning of infants and toddlers, including children from all cultural backgrounds, who have varying abilities as well as those who are multilingual.</p> <p>Designs and supports program practices and practitioner strategies that can be used to encourage families to share information about home care giving routines, practices, and preferences, and support them in their parenting roles.</p> <p>Advocates for program practices and practitioner strategies that can be used to encourage families to share information about home care giving routines, practices, and preferences, and support them in their parenting roles.</p>	<p>Utilizes the positive benefits of a collaborative team approach to working with families and colleagues when supporting the development and learning of infants and toddlers.</p> <p>Designs and supports program practices and practitioner strategies that can be used to encourage families to share information about home care giving routines, practices, and preferences.</p> <p>Advocates for program practices and practitioner strategies that can be used to encourage families to share information about home care giving routines, practices, and preferences.</p>	<p>Engages in actions that are detrimental to developing and maintaining a collaborative team approach.</p> <p>Designs and supports program practices and practitioner strategies ignore or undermine family sharing of information about home care giving routines, practices, and preferences.</p> <p>Engages in actions that undermine families' sharing of information about home care giving routines, practices, and preferences.</p>	

Yellow= Level 2

Green=Level 3

Orange=Level 4

Blue=Level 5