

## **Welcome to all DIR C1 Participants!**

The DIR® Faculty is very pleased you will be attending the DIR®/Floortime™ Training Program. We hope this intensive immersion in DIR®/Floortime™ concepts and practice will enhance your competencies in DIR®/Floortime™ so that you can complete the Certificate program.

## **What you will be doing in DIR C1**

All DIR®/Floortime™ training programs are organized around small group case discussions. Training groups will be interdisciplinary and have multiple faculty members and facilitators to support your presentation and learning experience. Groups will meet to present and discuss cases and will be very small to encourage participation and provide for emotional safety. The rest of the educational program involves attending larger group presentations (Clinical case discussion and/or plenary sessions). These larger sessions may overlap with the other DIR®/Floortime™ programs going on at the same time. In addition, you will also have the opportunity to select various conversation hours in topics of interest to you, take advantage of networking opportunities, participate in research projects (as available), and attend panel programs in the evenings.

Each day begins with a model presentation by our faculty or facilitators. All participants are expected to attend all morning sessions. New DIR C1 participants will be presenting case vignettes in the interdisciplinary groups to which they have been assigned. These presentations and small group discussions are one of the main features of the DIRFloortime™ Training Program.

In addition to the opportunity for presentation and discussion, the schedule includes time for individual feedback for each of the participants. The schedule for presentation time and individual feedback will be established at each training event. Due to the many logistical factors (missed flights, change of groups, rooms etc...) it is not unusual for just a few changes to be made at the last moment, so we ask for your flexibility and patience. Any changes to the schedule will be announced at the morning opening session.

The teaching and discussions that will be facilitated by the faculty and facilitator training team around the DIR C1 Case Vignettes will include:

- Increasing understanding related to the contribution of the “I” to the child’s (and family’s) functioning; speech language, sensorimotor, processing, genetic, medical conditions, medications, etc.
- Identifying complete circles of communication
- Maintaining a continuous flow of interaction

## **By the end of their participation at the DC Regional training - DIR C1 program, DIRFloortime Certificate Candidates will be able to:**

1. Apply, at an intermediate level of understanding, the concepts of the DIRFloortime model (D, I, R, & Floortime principles) and how they influence each other, when describing a vignette (video and narrative) illustrating the work with a child or adult with special needs.
2. Differentiate the core elements of each of the 9 Functional Emotional Developmental Capacities or Levels, and explain how the first 6 capacities support the development of higher thinking capacities (levels 7, 8 and 9)
3. Examine, based on discipline specific contributions, the individual differences of a child or adult with special needs, and identify areas of strengths and needs supported by discipline specific interventions

4. Reflect and give examples of basic strategies that could help improve problem solving and strengthening of a child's or adult's sense of self, symbolic capacity, and representation through the use of emotional ideas and logical emotional thinking, illustrated in selected video clips

### Case Vignette Guidelines

The DIRFloortime™ Training Program is based primarily on small case-based workshops which allow participants to present their work and discuss the material with a small group of interdisciplinary peers and faculty, *usually* no larger than ten DIR C1 Candidates. Everyone in this course has already attended some form of introductory level program and may have engaged in self study or group efforts...

By presenting a case vignette, you have the opportunity to apply the concepts of DIR®/Floortime™, examine the interactions of the child with his or her parents and yourself, evaluate the child's functional emotional developmental capacities, consider the way you work, and reflect upon your experience. We have found that the process of showing (via brief videotaped selections) and discussing your work promotes the best integration of the multi-facets of the DIRFloortime™ model.

This will take some preparation on your part but please keep in mind that the presentation of the case vignette is an ***exercise in learning and reflection***. It is not a “test” but an opportunity to conceptualize and communicate your thoughts and experiences working with a child within the DIRFloortime™ model. You will have the benefit of discussing your case in a small, supportive environment, as well as the chance to listen, learn and respond to others. The faculty will facilitate this process and are available to further discuss any questions you may have. Be assured our experienced faculty helps provide for the emotional safety and confidentiality of the group process.

If you are a returning candidate you should review your presentation with your tutor as you prepare. You will receive feedback during the sessions as well as have an opportunity for individual 1:1 feedback and discussion with the faculty and/or facilitator from your group. The purpose of the feedback is to further your development and guide you to the next steps in the DIR®/Floortime™ Training Program. As part of your preparation, it is important (if you haven't already) to become familiar with the ICDL-DMIC.

***The DIR C1 case vignette is intended to be a vignette and not a full case presentation. You will only have about 20 – 25 minutes to present your material (including a 5- 8 minutes video) and 35-40 minutes for the discussion of each case (total time one hour). The biggest challenge is selecting the vignette you would like to present since this will require focusing in on a child or issue without telling a long story. The case you choose should be at least 9-12 months duration so that you can address the course of development during this period of intervention. Do prepare a time line and summary of profiles to hand out.***

The time line should identify:

- The date of birth and family constellation
- When parents became concerned
- When a diagnosis was made
- When each intervention was started and frequency
- And other situational changes such as:
  - A move
  - A new birth
  - Change in employment,
  - A death of significant person, etc...

Also, summarize the beginning and current FEDL profiles and if you are familiar with the FEAS, present your ratings. **You will need to bring additional copies to distribute to your group and faculty, as well as for your file. We will let you know in advance how many copies you will need to bring. These need not be more than 3-4 pages.** You will present your vignette verbally in the group and prepare notes for your presentation

Preparing the timeline and profiles in advance will enhance your learning experience. You should feel free to indicate anything you are unsure of so the group discussion can address your questions. We want you to illustrate how the DIR®/Floortime™ model has helped you better assess, understand, treat and move a child forward, whether progress is slow or rapid. **Be sure to hide all identifying information related to the child of whom your case is based and be sure to obtain a written consent to show the video for this limited purpose. It is important that you fax (301-979-7011) or send a copy of the written consent form to the ICDL Drop box (please see website for appropriate deadline)!!! For your convenience, this form is attached as an appendix to this document.**

**Please prepare an MP4 video file and bring it with you on your USB flash drive. We do NOT require that you submit your video clips in advance, but that you bring it with you for the training. To ensure the confidentiality of your clients, please do not email your consent form, as it is like sending a postcard in the mail!**

You may select a vignette which focuses in on any of the following:

- **Assessment** – Present how you evaluated the child and applied the DIR® Developmental framework and sensory processing and family profiles. Try to focus on the interaction between functional developmental capacities and sensory and sensory motor processing, e.g., to what degree do the various sensory processing, motor planning, under-reactivity, over stimulating environments, interactive patterns, etc. impede or support shared attention or intentional behavior. Identify the challenges in the assessment and the questions you had before, during and following your evaluation. Point out when you notice critical challenges and solutions in the child, family, or service system. Indicate how your assessment guided your treatment planning. Discuss what you may have done differently using the DIRFloortime™ model and how you included the family. What are your remaining questions? What did you predict as the course of progress at the time? What is the follow-up? If you are familiar with the FEAS, present your ratings.
- **Intervention** - Select an intervention module which reflects your working with the child to promote functional emotional developmental capacities. Present a very brief overview and rationale for the treatment program and use a time line to identify the various components and others providing treatment, as well as the home program. Your selection should focus on the interaction between the sensory and sensory motor challenges and functional capacities, shifting from one developmental level to another, coaching parent child interactions, maintaining affect co-regulation, reaching into higher symbolic levels, getting stuck, challenges which slow progress or relative strengths which move it forward. Prepare a time line to summarize the other intervention components and comment on how you worked with others. Remember time is short and you only need to focus on just a few treatment issues, illustrated by even one video clip, e.g., keeping the affect flow and engagement going, working with the weaker processing modalities, diffusing the anxiety as reality and fantasy merge, etc. The example you choose should represent what it is like to work with this child and how you feel during and doing this work. Indicate your questions and predictions in the course of your work. You are welcome to apply the FEAS as well.
- **Early Intervention or Educational Program** – Select a child in a program of which you are a part and how the program is designed to meet the needs of the child from a DIR® perspective. Describe the individual and group work carried out, how social interactions are facilitated, how the team works, how the family is involved, and how you may be working with the child and parents individually. We are especially interested in the various efforts made to apply the DIRFloortime™ model in pre-school programs and the relative strengths and challenges this

poses. Be sure to focus on the profiles of one child or compare two different children in the group to highlight the group process. If group video is not possible, just obtain some of the child on which you are focusing. What are your questions and predictions in the course of your work?

Remember the above are guidelines. You can select the material you think is most relevant to discuss. You are welcome to suggest something else as but include the components described below and check with us before you prepare.

**The following outline can be used to guide your preparation of the profiles:**

Please state your impressions of the following:

**I. Developmental Levels:** Indicate if level present solidly, constricted, emerging, not evidenced (though expected), not expected for age. **Comment on Quality** (You can use the FEDL form to share this information on the child)

1. Shared Attention and Regulation: \_\_\_\_\_
  2. Engagement & Relating: \_\_\_\_\_
  3. Two Way Intentional Communication: (Affect, gesture, vocalizations, language to convey intent) \_\_\_\_\_
  4. The Capacity to Stay in a Lon Continuous Flow of Interaction and Shared Social Problem Solving: \_\_\_\_\_
  5. Creating Representations (ideas) and elaboration: \_\_\_\_\_
  6. Representational Differentiation and Emotional Thinking: \_\_\_\_\_
- NDRC Group (if applicable): \_\_\_\_\_
- Other Diagnosis (if applicable): \_\_\_\_\_

**II. Sensory/Motor Profile:** Give your impressions of the following - specify areas (You can use the Individual Differences Form to share this information on the child):

- A. Under-reactive \_\_\_\_\_
- B. Over-reactive \_\_\_\_\_
- C. Mixed Reactivity \_\_\_\_\_
- D. Motor Planning \_\_\_\_\_
- E. Motor Development \_\_\_\_\_
- F. Language-Receptive and expressive \_\_\_\_\_
- G. Visual Spatial Thinking \_\_\_\_\_

**III. Caregiver Patterns:** Rate 1 (low) to 5 (high) and comment on the following:

- A. Comforting \_\_\_\_\_
- B. Finds appropriate level of stimulation \_\_\_\_\_
- C. Engages in relationship \_\_\_\_\_
- D. Reads cues and signals \_\_\_\_\_
- E. Maintains affective flow (for co-regulation) \_\_\_\_\_
- F. Encourages development \_\_\_\_\_

*Tell us how the DIRFloortime™ model made a difference in your work with this child and family.*

*Tell us what else you would like to learn to enhance your work.*

#### Some “pitfalls” –

- Not having your videos ready to go. **Be sure to do your editing at home** so you don't lose time looking for sections. You will have access to the rooms to check out your video in advance and you will be given your schedule for presenting when you arrive. You are welcome to bring your computers as a back up. **Be sure to bring your video clip in an MP4 format.** Since we find that last-minute changes are often necessary, it is not always possible to let you know the order of presentation. Please come prepared with the idea that you may be presenting on the first day of the training.
- Not staying within the time frame. Every effort will be made not to interrupt your presentation because we want to be sure there is time for discussion. Your handouts, which include the time line and profiles, will be very helpful in saving time. Even if you are used to presenting, we encourage you to **do a trial run** and see how long it takes.

#### **Feedback to You!**

You will receive feedback in the group and during individual feedback meetings with your training team. **Remember, the goal of this first DIRC presentation is to monitor your development as a DIRFloortime educator or clinician and provide guidance for your further mastery of this model. This is just the start of your presenting competencies and it is designed to be an opportunity to learn and apply the model.** As indicated above, it is not a “test” but opportunity to show your emerging use of the model. Our goal is to provide an educational experience which will allow you to more fully integrate DIRFloortime™ into your work.

We will consider the following to help identify strengths and areas for growth:

**I. General Competencies:**

- \_\_\_\_\_ Demonstrates competence in own discipline
- \_\_\_\_\_ Demonstrates conceptual knowledge of DIR principles and practices
- \_\_\_\_\_ Demonstrates a working knowledge of dyadic work
- \_\_\_\_\_ Warm well related ability to work with the child
- \_\_\_\_\_ Demonstrates attunement to family
- \_\_\_\_\_ Demonstrates maturity and a capacity for rapid learning
- \_\_\_\_\_ Demonstrates capacity for self-reflection
- \_\_\_\_\_ Demonstrates an ability to “conversant” in DIR

**II. Clinical or Educational Competencies based on vignette that illustrates:**

- \_\_\_\_\_ Competence to conduct discipline-specific assessment in a DIR context (accurately assesses NDRC, FEDL and sensory profile)
- \_\_\_\_\_ A working knowledge of the role of mental health principles and practices in the DIR process
- \_\_\_\_\_ A working knowledge of educational implications and goals
- \_\_\_\_\_ How weaknesses in one area of development may impact on related areas of function
- \_\_\_\_\_ The contributions of family dynamics to the developmental and treatment processes
- \_\_\_\_\_ How you work with team members or how you coordinate with other interveners
- \_\_\_\_\_ Ability to identify challenges



## Permission for Use of Video Tape for Educational and Training Purposes

Client Name: \_\_\_\_\_

DOB: \_\_\_\_\_

I hereby authorize \_\_\_\_\_, a participant in DIR® Floortime™  
Name of DIR® Floortime™ Training Program participant

Training Program, to video tape my child for educational and training purposes only. This

video tape will be used for the sole purpose of \_\_\_\_\_'s participation  
Name of DIR® Floortime™ Training Program participant

in the DIR® Floortime™ Training Program.

I understand that our faces and first names may be revealed to faculty, facilitators, participants, readers and other staff associated with the DIR® Floortime™ Training Program. The faculty, facilitators, participants, readers and staff agree to maintain the family's confidentiality. This video will not be used for any other purpose without the expressed consent of the persons in the video.

A photocopy of this document shall be considered to be as valid as the original.

Parent/Guardian Name (Please print): \_\_\_\_\_

Relationship to the child: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_