Teaching Scale Item Description Clarification Sheet*

Updated January 2024

Some Teaching items may need further clarification.

Please highlight the following sentences or clauses or add comments to the item descriptions in your manual.

Please carefully go through your teaching manual and make sure all of your item description notes match these below. Everything below applies to all manuals, tabbed and non-tabbed!

Sensitivity to Cues and "Praise" items

#1. It's about developmentally appropriate safety, e.g. a mobile 7-month-old sitting on a counter probably isn't safe, whereas a toddler sitting on a coffee table or on a bed is normal, expected behavior. If a 6-month-old is sitting on a couch and parents are right there, it's most likely safe. What we are looking for is whether the parent takes reasonable actions or positioning to allow the child to not only *feel* safe and comfortable to manipulate materials/try the task, in addition to not being in "danger" of falling. PCI looks at what physical abilities are expected at what ages. e.g. sitting at 6 months, cruising at 8-12 months, etc. Adjust, of course, for each individual child's abilities.

Note: if you have a note in your teaching manual that says avoid precarious positions, the above should help clarify.

#5. Remember this is a two-part item. The parent must give all of the task materials to the child (fully let go) before they give any type of instruction AND they must let the child explore the materials for at least five seconds if they are to get a *yes*. So, if the task is *string beads* they need to give the child the string, AND all the beads, AND allow 5 seconds for the child to explore any part of the materials. The exception to this is if the child is 4 months of age or younger or the child doesn't show any interest to explore. (See item description).

Note: If you just read the item 'stem' listed on the Teaching scale you may not get the full picture that includes handing over all the materials to the child. *Please refer to your manuals frequently when scoring.*

- **#7.** Notes in margin to say "If the child doesn't attempt any exploration, score NO." The spirit of this item is "not stay on task the entire time". Four months of age or younger, visual exploration is allowed.
- **#8, 28, 29.** There are 3 items that relate to praise. These are #8, #28, and #29.
- **# 8** is really concerned with the task. If the child does the task or almost does the task and the parent says "good", "that's right", "there" it is scored a *yes* because it is directly related to the task.
- In **#28** this is praise that is general, such as "you sure are a good worker", "good job", "you worked hard and got it done", or "You sure are smart", or "You are terrific". This type of praise is broad and more general about the child's behavior or his whole task effort, not just the specifics of the task. Often heard at the end of the episode. Note that "good job" as the child is working, is most likely task-related praise, and when heard at the end, as a wrap-up comment, it is often broad praise. Timing makes the difference.
- **#29.** These are the remarks caregivers make that encourage or motivate the child to keep going and keep trying such as "you can do it", "try", "that's it", "just one more", "don't give up", "keep trying." These are meant to motivate the child to keep trying to do the task. It is the word, *not the tone* that determines this item. Cheerleading is a statement and never a question, e.g. "do you wanna try?" is not cheerleading.
- **#9**. We are generous in what we consider success on the Teaching task. The purpose of this scale is to assess the interaction between mother and child not whether the child can do the whole task all by him or herself. Therefore, a successful completion of the task can occur following the help or guidance of the parent. For

instance if the parent stacks a couple blocks and the baby stacks blocks on top of those that is considered successful completion. The child doesn't have to do the task *all by himself* to be a 'successful completion'. If the task is to stack 6 blocks and the last one falls off or the tower falls down as they are putting the last blocks on top, consider that a successful completion as well. The caregiver can guide the arm lifting the cloth or guide an infant's arm to reach for the rattle, and so on.

The second part of this item is "how many performances does the parent require when the child is successful at completing the task?" If the parent has the child do the task more than three times, score no.

- **#10**. Highlight third sentence. If the child has only successful attempts, score, yes.
- **#11.** Highlight the last sentence of the description.

Response to Distress

Remember (1) scoring is cumulative; (2) the caregiver must attempt to alleviate the child's distress within 10 seconds of the potent disengagement cue(s); (3) the potent disengagement cue(s) that terminate the teaching are not scored in this subscale; (4) if any of the caregiver's responses occur only in response to distress they are not scored elsewhere. Example: the caregiver uses affectionate touch (patting) in response to crying, they get a *yes* on #16 but NOT on #26.

#17. Highlight the NOTE at the end of the item description.

Social-Emotional Growth Fostering

- **#24.** If either party must turn their head to be in the face-to-face position, score this item no.
- **#25.** Highlight second sentence: *It is not necessary that the child see this smile*.
- **#26.** Affectionate touch must occur at another time other than RTD to score a *yes* on this item. Fist bumps and high fives are not counted as affectionate touch. They are celebratory and don't meet the item criteria.
- #30. Highlight NOTE at the end of the description: If the child does not vocalize, score no.

Cognitive Growth Fostering

- **#37.** Highlight the last sentence: Visual exploration is acceptable four months or younger.
- #38. Describes a quality of the task materials. These include descriptions of the task materials that involve the senses (can also be adjectives or adverbs), things like texture, color, shape, taste, feel, size, sound, etc. count as descriptive qualities. In order to make sense to the child the description needs to be connected to the task material. However, they don't have to be connected in the same sentence—they just must be close enough for the child to make the connection e.g. "Look at these beads." A bit later, "There is a white, round one." Other phrases/words that meet the descriptive qualities item might be: the *square* book with *hard* pages, the *blue* blocks, the *white smooth* cup, it has a *handle* to hold on with, the rattle makes a sound, the car rolls, etc. Many caregivers say "there are six of these, can you stack them." Although *we* know they are called blocks, children have not been exposed to the same vocabulary as adults and may not know what "these" are. To develop good *cognitive* skills everything should be labeled and subsequently described. Thus the descriptive qualities item!
- #39. Two different sentences to describe the task. These can be just small variations such as "lift the cloth"

and "pick up the cloth"; we are looking for different ways caregivers give instructions. We hope that they vary their instruction even if it is *slight*.

- **#40. Explanatory** style includes statements, questions, explaining consequences. *Explanatory language is anything that is not imperative* (alerting is explanatory). **Imperative** style includes commands only such as "do it", "don't do it", "put it here", "over here", "stop it", "start", etc. To score a yes the caregiver has to have **more** explanatory remarks than imperative remarks during the teaching.
- **#41.** For this item all the parts of the task must be *labeled at some point* during the teaching. A caregiver might start the task to *String Beads* by saying "String them." Later on in the teaching she may say, "Do you like playing with the beads?" She would score a yes because she has said "string" and "beads" at some time during the teaching.
- **To do well in the Cognitive Growth subscale as well as others we recommend you write down all that the caregiver says without taking your eyes off the video. This practice seems to improve scores in this area. All you need to do is refer back to what you have written down about what the caregiver says and determine whether it was specific praise, general praise, encouragement; or whether perceptual qualities were described; how many different statements were made; were there more imperative statements than explanatory ones, etc. Your writing may look like scrawl but your scores will most likely improve.
- **#44 & 45.** This is rated a yes on children who show improvement in doing the task during the teaching. If a child does the task correctly, right away, this is scored a *no*. Or if the child does the task twice but the first time he does it much better than the second time he scores a *no*. In order to score a *yes* he needs to be better, quicker, or more efficient in doing it than the first time AND the caregiver must recognize it through giving verbal praise in #44 and nonverbal praise (nod or smile) in #45. We also score *yes* if the parent recognizes improvement toward completion of the full task.

Further clarification on #44 and #45 from our friends in Ontario that might be helpful:

These items fall within the Cognitive Growth Fostering subscale, which ultimately means we are looking most closely at how the parent responds to the child's performance and less about the child's actual performance. Be VERY generous in what is considered "improvement". The concept of "always success" is different than that of "instantly successful". The "always successful" child completes the steps, or multi-steps, toward task completion perfectly every single time. No mistakes and with no help; this is probably very unlikely. The "instantly successful" child may start off looking perfect, but their performance changes during the interaction, they may make mistakes, or struggle as parental support (scaffolding) decreases over subsequent attempts. In the home you could suggest that the dyad choose another activity to score if the child is "instantly successful", but while scoring practice and reliabilities videos this is not an option, so watch closely to the child's subsequent attempts after their initial success. They may struggle as the parent reduces their support, they may make mistakes, become tired or frustrated, and then re-engage and improve, accessing their resilience. It is following these improvements that you will be scoring if the parent acknowledged this recovery as improvement. Highlight the sentence on the 'Teaching Item Description Clarification Sheet": We also score 'yes' if the parent recognizes improvement toward completion of the full task. This has also been described as, "Progress towards completion of a multi-step task". Encourage learners to note this in their manuals.

#49. The intent of item 49 has *always* been that the parent needs to provide clear signals to the child that they are finished working on the task. Asking "are you done?" with no acknowledgement from the child or without putting the materials aside, isn't clear to the child that they have finished the task. Parents often look at the person administering the scale for approval OR they say, "Are you done?" to the child and then the parent looks at the nurse/visitor and shrugs their shoulders or says, "Yeah I guess we're done." Statements of being finished must be directed at the child and not the visitor. Young children do well with structure and predictability. It is up to the parent to provide that. If the child is old enough to say, "I'm done, or "I don't want to do this anymore" the parent needs to acknowledge that as well with an "ok" or "that's fine" or something similar.

Please make sure the following is in your notes: "if the caregiver asks a question about being done, the child needs to acknowledge with an affirmative response like a head nod, an "uh huh", "yup", "yes" etc. For preverbal children, if the parent merely asks if they are done, they will also need to remove the items from the child's view to qualify as a YES for that age group. "I think you're done" or "you did it! that's good!" would count as YES also.

Clarity of Cues:

- **#52.** The child can widen eyes or show postural attention to caregiver **OR** task materials at any time during the interaction to score yes.
- **#53.** This is a change in intensity or motor activity when the materials are **first** presented to the child. If the caregiver works with the materials and then presents it to the child, it's at that point you look at the child's response. If the mother presents the materials, such as in Olivia's case (Teaching Practice video #2), and Olivia doesn't respond for 18 seconds she scores a *no*.
- **#55.** Some arm movements listed are potent disengaging cues such as pushing away and pounding (as in tray pounding) while the others are not. If you see clapping (hands meeting each other or object near midline); reaching toward anything other than caregiver; waving or pointing **do not** score these movements as cues. Count them for this item but ignore them as disengaging or engaging cues. They are behaviors that have not been categorized as cues.
- **#57.** Highlight in the second line the caregiver does not need to see the child smile or laugh to score a yes.

Responsiveness to Caregiver:

- #61. Circle child gazes at the caregivers face OR the task materials. Be sure to highlight the "or."
- **#64 & 65.** Should say vocalizing or babbling excludes fussing, crying, or whining (which are verbal potent disengagement cues). Responding with a potent disengagement cue would be reflected on items 69 and 70 and would not reflect the intent of these items.
- **#66 & 67.** Highlight the note: *The smile must be at the caregiver and the caregiver must see this smile. They must be looking at one another.*
- #71 & 72. The caregiver must intrude to score a yes on these items. If the caregiver never intrudes, score no.
- **#73.** There are three parts to this item. If any part is missing, you must score *no*.

NOTE: All but one item in the **Responsiveness to Caregiver Subscale** are **contingency items** meaning that both parts of the item must happen, e.g. for #68 the caregiver must loom and the child must show some disengaging cue. If the caregiver looms but the child shows engaging cues or no cues at all, score *no*. If the caregiver never moves closer than 8 inches/20 cm, also score a *no*.