**Individual Professional Development Plan (IPDP) for**

**Early Childhood Teacher Assistants**

**Instructions**

This document has been developed to help early learning educators create individual professional development plans (IPDPs) for their professional growth and improvement. IPDPs include specific, concrete professional development goals based on your evaluation of your current knowledge and competencies in the domains of Rhode Island’s Workforce Knowledge and Competencies frameworks (WKCs) for early learning educators.

For your convenience, we include on page 2 a link to the RIDE website where you can access the WKCs. We also include a link to the Center for Early Learning Professionals website, where beginning in January 2015 you will find resources that can assist you in completing a self-reflection of your professional strengths and needs. Once you have determined your professional development goals, your next step is to develop an action plan for achieving each goal. If you work in an early education center-based program, we recommend you engage your supervisor in this process.

Programs can use this form to develop an IPDP that meets requirements for DCYF licensing, BrightStars participation, and RIDE CECE program approval. If your program uses its own form to document IPDPs, this form will need to include the following elements:

* Concrete professional development goals
* A description of the process used to determine those goals
* The specific domains and sub-headings of the WKCs related to each goal
* Concrete action steps for achieving each goal
* Checkpoints to assess and document the progress made toward achieving each goal

To complete your IPDP, fill in the information on page 2. Then, use the attached goal sheets to list your goals and your plan for achieving them. Use one goal sheet for each goal in your IPDP. You can copy and paste in additional sheets for additional goals, as needed. When you are finished, save and store a copy of your IPDP in a safe place so you can retrieve it to track your progress and revise your goals, if necessary.

This document can be completed electronically, by typing directly into the form and then saving it to your computer. We recommend that each time you update this IPDP, you save it as a new document with a new date. If you prefer, you can print this form and fill it out by hand. Be sure to print additional goal sheets for each additional professional development goal.

**Individual Professional Development Plan (IPDP) for**

**Early Childhood Teacher Assistants**

**Cover Sheet**

|  |  |
| --- | --- |
| **Name:** |  |
| **Signature:** |  | **Date:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Age Group I Work With** *(select one)*: | | | | | |
|  | Infants and Toddlers | |
|  | Preschoolers |
|  | School-age | | |
|  | Birth to 5 | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **I created this plan collaboratively with my supervisor:** | | | |  | |
| **Supervisor’s Name:** |  | | | | | | |
|  | | | | |  | |
| **I created this plan on my own:** | |  |

|  |  |
| --- | --- |
| **Total number of professional development goals in this plan:** |  |

To access the WKCs, visit: [www.ride.ri.gov/InstructionAssessment/EarlyChildhoodEducation/Workforce.aspx](http://www.ride.ri.gov/InstructionAssessment/EarlyChildhoodEducation/Workforce.aspx)

Download this form at the Center for Early Learning Professionals website: [www.center-elp.org](http://www.center-elp.org)

**Early Childhood Teacher Assistant**

**IPDP Goal Sheet**

|  |  |
| --- | --- |
| **Name:** |  |

**Goal Number:**

**Professional Development Goal:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Information I used to develop this goal:** *(Select those that apply.)* | | | | | | | | | | |
|  | DCYF Monitoring Report | | | |
|  | BrightStars Assessment Report | |
|  | Center for Early Learning Professionals WKC Self-Reflection ([www.center-elp.org](http://www.center-elp.org)) | | | | | | |
|  | Supportive Supervision | | | | |
|  | Observation and Feedback *(supervisor, peer, family, community, etc.), s*pecify: | | | | | |
|  |  | | | | | | | |
|  | Teacher observation tool (*CLASS, ERS, etc.)*, specify: | | |  | | | | |
|  | School District Observation System | | | | |
|  | Other, specify: |  | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***Workforce Knowledge and Competencies* Domain and sub-heading(s) related to this goal:** *(Select all that apply.)* | | | | | | | |
|  | Physical and Mental Health, Safety, and Wellness | | |
|  | Compliance with State and Federal Regulations | |
|  | Safety and Emergency Procedures | |
|  | Health | |
|  | Food and Nutrition | |
|  | Family Engagement | | |
|  | Creating Respectful, Reciprocal Relationships with Families | | |
|  | Engaging Families in Their Children’s Development and Learning | | |
|  | Utilizing Community Resources to Support Families | |
|  | Development and Learning | | |
|  | Child Development | | |
|  | Influences on Development and Learning | | |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Curriculum | | |
|  | Content | |
|  | Process | |
|  | Teaching and Facilitating | |
|  | Context | |
|  | Building Meaningful Curriculum | |
|  | Child Assessment | | |
|  | Knowledge of Early Childhood Assessment | |
|  | Contributing to Classroom Assessment | | |
|  | Using Assessment Data to Inform Interactions with Children and Contribute to Curriculum Planning | | |
|  | Professionalism | | |
|  | Ethical Standards and Professional Guidelines | | |
|  | Valuing Diversity | | |
|  | Commitment to Ongoing Professional Development | | |
|  | Fostering Respectful, Collaborative Relationships with Other Professionals | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Current Workforce Knowledge and Competencies Career Pathway Level related to this goal:** | | | | | | | |
|  | Level 1 |  | Level 2 |  | Level 3 |

**I have identified the following strengths and areas I need to strengthen in this domain area:**

*Current Strengths:*

*Knowledge and Competencies I need to strengthen:*

**My plan for achieving this professional development goal:**

|  |  |  |
| --- | --- | --- |
| **Steps I will take to make progress toward achieving my goal** | **Time Frame** | **Date Completed** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Resources and supports that will help me achieve this goal:**

**Progress Notes:**

*3 Months:*

*6 Months:*

*9 Months:*

*12 Months:*

**Early Childhood Teacher Assistant**

**IPDP Goal Sheet**

|  |  |
| --- | --- |
| **Name:** |  |

**Goal Number:**

**Professional Development Goal:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Information I used to develop this goal:** *(Select those that apply.)* | | | | | | | | | | |
|  | DCYF Monitoring Report | | | |
|  | BrightStars Assessment Report | |
|  | Center for Early Learning Professionals WKC Self-Reflection ([www.center-elp.org](http://www.center-elp.org)) | | | | | | |
|  | Supportive Supervision | | | | |
|  | Observation and Feedback *(supervisor, peer, family, community, etc.), s*pecify: | | | | | |
|  |  | | | | | | | |
|  | Teacher observation tool (*CLASS, ERS, etc.)*, specify: | | |  | | | | |
|  | School District Observation System | | | | |
|  | Other, specify: |  | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***Workforce Knowledge and Competencies* Domain and sub-heading(s) related to this goal:** *(Select all that apply.)* | | | | | | | |
|  | Physical and Mental Health, Safety, and Wellness | | |
|  | Compliance with State and Federal Regulations | |
|  | Safety and Emergency Procedures | |
|  | Health | |
|  | Food and Nutrition | |
|  | Family Engagement | | |
|  | Creating Respectful, Reciprocal Relationships with Families | | |
|  | Engaging Families in Their Children’s Development and Learning | | |
|  | Utilizing Community Resources to Support Families | |
|  | Development and Learning | | |
|  | Child Development | | |
|  | Influences on Development and Learning | | |
|  | Curriculum | | |
|  | Content | |
|  | Process | |
|  | Teaching and Facilitating | |
|  | Context | |
|  | Building Meaningful Curriculum | |
|  | Child Assessment | | |
|  | Knowledge of Early Childhood Assessment | |
|  | Contributing to Classroom Assessment | | | |
|  | Using Assessment Data to Inform Interactions with Children and Contribute to Curriculum Planning | | | |
|  | Professionalism | | |
|  | Ethical Standards and Professional Guidelines | | | |
|  | Valuing Diversity | | | |
|  | Commitment to Ongoing Professional Development | | | |
|  | Fostering Respectful, Collaborative Relationships with Other Professionals | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Current Workforce Knowledge and Competencies Career Pathway Level related to this goal:** | | | | | | | |
|  | Level 1 |  | Level 2 |  | Level 3 |

**I have identified the following strengths and areas I need to strengthen in this domain area:**

*Current Strengths:*

*Knowledge and Competencies I need to strengthen:*

**My plan for achieving this professional development goal:**

|  |  |  |
| --- | --- | --- |
| **Steps I will take to make progress toward achieving my goal** | **Time Frame** | **Date Completed** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Resources and supports that will help me achieve this goal:**

**Progress Notes:**

*3 Months:*

*6 Months:*

*9 Months:*

*12 Months:*

**Early Childhood Teacher Assistant**

**IPDP Goal Sheet**

|  |  |
| --- | --- |
| **Name:** |  |

**Goal Number:**

**Professional Development Goal:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Information I used to develop this goal:** *(Select those that apply.)* | | | | | | | | | | |
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|  | Teacher observation tool (*CLASS, ERS, etc.)*, specify: | | |  | | | | |
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|  | Compliance with State and Federal Regulations | |
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|  | Ethical Standards and Professional Guidelines | | | |
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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Current Workforce Knowledge and Competencies Career Pathway Level related to this goal:** | | | | | | | |
|  | Level 1 |  | Level 2 |  | Level 3 |

**I have identified the following strengths and areas I need to strengthen in this domain area:**

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**My plan for achieving this professional development goal:**

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| **Steps I will take to make progress toward achieving my goal** | **Time Frame** | **Date Completed** |
|  |  |  |
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|  |  |  |
|  |  |  |

**Resources and supports that will help me achieve this goal:**

**Progress Notes:**

*3 Months:*

*6 Months:*

*9 Months:*

*12 Months:*