Component #3: Evaluation

3(a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR for infants and toddlers with disabilities and their families.

The evaluation of the three proposed EBPs will focus on fidelity of implementation and impact on achieving measurable improvement in the SIMR. The evaluation will be closely aligned to Indiana's theory of action. The Theory of Action proposes that an improved family assessment process will help practitioners to get to know families and culturally responsive home visiting practices will help practitioners connect effectively with diverse families. Both of these practices will lead to improved family engagement, which will lead to increased attendance and family participation with early intervention, which will then contribute to improvement in children's social emotional outcomes. The EBP concerning improving the quality of the exit assessment data is less directly tied to the theory of action and more about data quality. This EBP focuses on assessing and improving quality of the outcome data so that the State can make decisions based on the most accurate data possible, and look to the data to provide information surrounding any potential trends and patterns regionally or across the State as a whole.

During Year 1, an evaluation of current practices related to the three EBPs will be conducted. Indiana's Part C Coordinator will be responsible for overseeing and facilitating this evaluation with support from members of Indiana's Part C team. This team will be supported by a quality contractor who will facilitate much of the on-going work of this initiative under the direction of the Part C Coordinator. The purpose of this evaluation will be to gather information from a representative sample of practitioners from all regions and disciplines and will focus on gauging practitioners' understanding of relevant policies and procedures, learning about strengths and weaknesses of current practice and identifying gaps and needed supports for implementing EBPs moving forward. This Year 1 evaluation will allow us to establish an overall professional development plan and an agreed-upon, relevant set of criteria for the proposed EBPs, which will then be measured in subsequent years to determine successful implementation.

During Years 2 through 4, evaluation will focus on the fidelity of implementation of high quality professional development activities to support adoption of the proposed EBPs. Quality contractors under the direction of the Part C Coordinator and Part C staff will design and use a series of surveys based on agreed-upon criteria informed by Year 1 evaluation data. These surveys will include measures of the fidelity with which professional development was implemented, practitioner evaluation of the quality of the professional development and material presented, and practitioner report concerning level of understanding of new content, policies and procedures. In addition to survey measures, a method for evaluating overall fidelity of implementation (are practitioners going back to their regions and consistently and effectively using the information shared during professional development) will be designed after reviewing information gained from the Year 1 evaluation. Finally, child outcome data, particularly social emotional skills, will be monitored continuously to determine if the proposed EBPs are impacting child outcomes. Each year, the State will review the results from the above evaluations to determine if changes are needed to improve or supplement professional development for each successive year.

During Year 5, evaluation will focus on the sustainability of the EBPs. Activities will include the continued monitoring of implementation fidelity of the professional development in place during Years 2-4, as well monitoring of the implementation of new practices to sustain the three EBPs beyond Year 5. It is anticipated that continued PD and TA will be needed to bring new programs and providers on board, as well as the need for ongoing 'refresher' professional development to ensure high fidelity implementation.

During the course of the initial three year training, PD and TA materials will be developed in a way that allows for ongoing usage and contributes to the sustainability of this work.

3(b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.

The evaluation will include stakeholders at many different points in the process. During Year 1, a representative sample of practitioners will be actively engaged as part of the evaluation to help the State determine current practices and needs. In addition, during Years 2 through 5, practitioners will be evaluated in multiple way to determine fidelity of implementation, perception of effectiveness of intervention and knowledge gained.

Information from the evaluation will be disseminated to stakeholders in a variety of ways. Stakeholders will be updated regarding the SSIP quarterly at ICC meetings. Information will also be shared periodically at monthly DDRS Advisory committee meetings and workgroup meetings for Indiana's regional directors. Other possible venues include provider forums and Local Planning and Coordinating Councils (LPCCs). Information may also be shared via webinars, focus groups and the First Steps Part C website.

As these stakeholder groups will be active participants in this process, their feedback will be valuable in ensuring Indiana's evaluation meets our intended outcomes.

3(c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SIMR and the progress toward achieving intended improvements in the SIMR.

As part of Year 1, an agreed-upon, relevant set of criteria for the proposed EBPs will be developed which will then be measured in subsequent years to determine successful implementation. Part of this process will include clarifying and expanding our data analysis strategy and identifying any additional data comparisons that may allow the State to demonstrate impact.

In order to gather meaningful data, Indiana will conduct evaluations on a randomized sample that are reflective of the overall state and cluster populations. Data from the overall sample will be compared to overall data in previous years to determine if the implementation of our proposed EBPs was effective. In addition, data analyses comparing subgroups will be conducted to determine if our proposed EBPs impacted some groups more than others and inform the state as to which subgroups are not meeting the target and ultimately inform planning moving forward specific to identified subgroups.

3(d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation, assess the State's progress toward achieving intended improvements, and make modifications to the SSIP as necessary.

The State will use the evaluation data to examine the effectiveness of implementation by purposefully structuring evaluation tools to gather this data. As described in 3(a), during Year 1, an evaluation of current practices related to the three EBPs will be conducted. The purpose of this evaluation will be to gather information from a representative sample of practitioners from all regions and disciplines and will focus on gauging practitioners' understanding of relevant policies and procedures, learning about strengths and weaknesses of current practice and identifying gaps and needed supports for implementing EBPs moving forward. This Year 1 evaluation will allow us to establish a relevant and targeted professional development plan and an agreed-upon, relevant set of criteria for the proposed EBPs which will then be measured in subsequent years to determine successful implementation.

Subsequently, during Years 2 through 4, evaluation will focus on the fidelity of implementation of high quality professional development activities to support adoption of the proposed EBPs. The quality contractor, under the direction of the Part C Coordinator and Part C staff, will design and use a series of surveys based on agreed-upon criteria informed by Year 1 evaluation data. These surveys will include measures of the fidelity with which professional development was implemented, practitioner evaluation of the quality of the professional development and material presented, and practitioner report concerning level of understanding of new content, policies and procedures. In addition to survey measures, a method for evaluating overall fidelity of implementation will be designed after reviewing information gained from the Year 1 evaluation. Each year, the State, in collaboration with stakeholders, will review the results from these evaluations to determine if changes are needed to improve or supplement professional development for each successive year. If a professional development activity is found to be ineffective, that activity will be revised based on identified areas of weakness. The revised activity will replace the ineffective activity moving forward. Additionally, quality contractors led by Part C staff will create a series of ongoing/refresher professional development activities for practitioners who may require additional support after completing initial professional development or need to be reminded about one or more of the EBPs.

During Year 5, evaluation will focus on the sustainability of the EBPs. Activities will include the continued monitoring of implementation fidelity of the professional development in place during Years 2 through 4, as well as monitoring of the implementation of new practices to sustain the three EBPs beyond Year 5. It is anticipated that continued PD and TA will be needed to bring new programs and providers on board, as well as the need for ongoing 'refresher' professional development to ensure high fidelity implementation.

The evaluation will also assess the State's progress toward achieving intended improvements, as detailed in 3(a). Child outcome data, in particular, social emotional skills, will be monitored continuously to determine if implementation of the EBPs are impacting child outcomes. Outcomes data will be monitored to determine if the interventions are impacting all populations, and highlight subgroups who are not meeting outcomes. Each year, the State, in collaboration with stakeholders, will review trends in outcome data to determine if the EBPs are having the intended impact and to determine if changes are needed to improve or supplement professional development for each successive year.

Indicator 11 – Indiana's State Systemic Improvement

Plan Phase II - Evaluation Plan

Logic Model

<u>State-identified Measurable Result:</u> Indiana's First Steps (Part C) program will increase the percent of infants and toddlers with IFSPs who enter the system below the expectations of same aged peers and demonstrate substantial growth in the area of positive social emotional skills by the time they exit the program.

Inputs

- Evidence Based Practices of:
 - Exit Assessment
 - o Family Assessment
 - Culturally Responsive Home Visits Equitable
 - Equitable Access
- Stakeholder involvement:
 - State Interagency Coordinating Council Meetings (SICC)
 - Division of Disability and Rehabilitative Services (DDRS) Advisory Group meetings
 - SPOE Workgroup meetings
 - Advocacy group involvement
 - Provider professional organization involvement
- Stakeholder involvement through:
 - Meetings
 - Webinars
 - Focus Groups
 - Surveys
- Support of program area staff and quality contractor
 Indiana SSIP Phase II

Strategies/Activities

- A. Evaluate existing practices in conducting the Exit Assessment
- B. Evaluate disaggregated child outcome data to identify subgroups
- C. Evaluate the current Family Assessment
- D. Evaluate statewide home visit practices conducted by all professionals interacting with families related to First Steps
- E. Create a sustainability survey to identify (post 3-year PD/TA cycle) statewide understanding and fidelity of implementation for all three EBPs

Outputs

- Identify statewide needs
- Determine provider capacity and readiness
- Develop (then implement) trainings and resources to support Exit Assessment practices
- Identify EBPs to meet the needs of identified subgroups
- Identify any gaps in state and federal requirements
- Identify needed consistencies
- Develop (then implement) trainings and resources to support Family Assessment practices
- Identify needed consistencies in practices
- Identify areas for improvement surrounding cultural competency (best practice)
- Develop (then implement) trainings and resources to support culturally responsive home visiting practices

 Identify gaps in knowledge and implementation

 Adapt training materials and resources to serve as ongoing support for new providers

Outcomes

Participants of PD/TA will increase their capacity in the EBP areas.

Short-term

Indiana's Family Assessment tool will be compliant with all state and federal regulations.

Establish statewide best practice in culturally responsive home visiting practices

Intermediate

For all EBPs, participants of PD/TA will demonstrate a consistency in learned practice and maintain an ongoing level of fidelity of implementation.

Increase the percent of infants and toddlers with IFSPs who enter the system below the expectations of same aged peers and demonstrate substantial growth in the area of positive social emotional skills by the time they exit the program.

Long-term

Increase the percent of infants and toddlers with IFSPs who enter the system below the expectations of same aged peers and demonstrate substantial growth in the area of positive social emotional skills by the time they exit the program.

Indicator 11 – Indiana's State Systemic Improvement Plan Phase II – Evaluation Plan Overall Timeline

Year 1: Evaluation of Existing Evidence Based Practices

Years 2-4: Professional Development and Technical Assistance in each of the 3 Evidence Based Practices (Using a cohort-based delivery method)

	Year 2	Year 3		Year 4	
	Intensive	Intensive	Ongoing Support	Intensive	Ongoing Support
Cohort 1	Exit Assessment	Culturally Responsive Home Visits	Exit Assessment	Family Assessment	Exit Assessmen and Culturally Responsive Home Visits
Cohort 2	Family Assessment	Exit Assessment	Family Assessment	Culturally Responsive Home Visits	Family Assessment and Exit Assessment
Cohort 3	Culturally Responsive Home Visits	Family Assessment	Culturally Responsive Home Visits	Exit Assessment	Culturally Responsive Home Visits and Family Assessment

Note: The cohort groups and rotations provided here have been developed for illustrative purposes only. Actual cohort groupings and rotations will be determined during the development of the Professional Development and Technical Assistance process.

Year 5: Sustainability Survey and Continuation of Ongoing Support