

**Table E: State-wide Assessment and Evidence-based Practice Improvement Strategy**

<b>Evaluation of State-wide Improvement Strategy Implementation</b>		
<b>Implementation of Evidence-Based Practice: Implement content-rich evidence-based practices to build the capacity of parents and other care providers to promote social emotional development within the context of everyday routines and activities using a coaching interaction style.</b>		
<b>Activities/Outputs</b>	<b>Measurement/Data Collection Methods</b>	<b>Timeline (projected initiation and completion dates)</b>
<b>Identify</b> previously trained Master Coaches who demonstrated fidelity to the practices and are currently serving families in their region. Fidelity data was collected by Drs. Sheldon and Rush from previous MT Master Coach trainings.	Participant list (no more than 12 participants).	July 2017
Master Coaches attend <b>two-day workshop</b> to administer and train other Quality Improvement Specialists, Supervisors, and Family Support Specialists how to use the Child Interest & Activity Plan (CIAP) and Newborn Interest Assessment Activity Plan (NIAAP) which will assist users in promoting social/emotional development.	Training agenda, materials, and fidelity checklists developed and disseminated to Master Coaches and Part C Coordinator.	October 2017
<b>Follow-up activities</b> will support Master Coaches in obtaining fidelity in the use of the CIAP and NIAAP.	Master Coaches will submit a total of three videos of themselves administering the CIAP (2) and NIAAP (1) at months two, four, and six post the onsite workshop. Drs. Sheldon and Rush provide support to the Master Coaches during a six month period to obtain fidelity in the administration of the two tools (review of videos and three, web-based meetings).	November 2017 – March 2018
<b>Implement training at all Part C provider(s)</b> (including sharing information, assessing skills and knowledge, providing opportunities for active participation) to Quality Improvement Specialists, Supervisors, and FSS's using structure and materials	Training dates submitted to Part C Coordinator. Role and participants as reported on the Participant Attendance List. Fidelity checklists for three videos by each participant.	April 2018 – September 2018

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supplied by Drs. Shelden and Rush as well as practice videos.	Master Coach review of participants' videos in the FSS professional record.	
<b>FSS's reflect</b> on their practices with their identified mentor/supervisor within an identified supervision structure to support training and implementation.	Supervision structure identified by Part C provider(s). Mentoring documented in professional records for all FSS participants.	April 2018 – September 2018
<b>Protocol and Procedure</b> for Child Interest & Activity Plan (CIAP) and Newborn Interest Assessment Activity Plan (NIAAP) will be developed and accessible to Part C provider(s).	Targeted training protocol available and disseminated. Documented mentoring to FSS's guided by protocol.	April 2018
<b>FSS's will self-evaluate</b> using fidelity criteria.	Coaching logs include fidelity criteria.	April 2018 – June 2019
<b>Fidelity checks</b> of via independent observation will occur within scheduled timelines.	Fidelity checks guided by protocol which includes self-assessment as well as observational assessment.	April 2018 – June 2019
<b>Annual monitoring</b> of EBP via the Comprehensive Monitoring Tool.	Document and fidelity checklist reviews. Family interviews. Supervisor and FSS interviews.	April 2018 – June 2019
Drs. Shelden and Rush participate in the <b>creation of learning module</b> to be accessible on the Extended University.	Extended University staff report to Part C Coordinator and Professional Development Stakeholder/Work Group about status of module and its availability using an implementation checklist.	April 2018 – July 2018

Type of Outcome	Outcome Description	Evaluation Questions	How will we know the intended outcome was achieved? (performance indicator)	Measurement/Data collection methods	Timeline (projected initiation and completion dates)
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<b>Short-term Outcomes</b>	FSS's have increased knowledge and skills using Drs. Sheldon and Rush's materials to promote social-emotional outcomes for infants and toddlers and their families.	Are FSS's implementing interventions and services to meet social-emotional outcomes? Are FSS's implementing strategies for strengthening families' skills and confidence to help their child improve social-emotional outcomes? Are FSS's monitoring progress on social-emotional outcomes and modifying action steps and/or specified outcomes based on data? Are FSS's making referrals to specialists as appropriate?	80% of FSS's implement the evidence-based practice when coaching families.	Program's FSS training records: logs of FSS training. Program's monitoring documentation: Coaching logs; Supervisory reports; Family Reports; Outcomes documentation; Home visit documentation; Referral documentation and observation/self-assessment as defined within the training protocol.  Staff survey.	April 2018 – June 30, 2019
	Fidelity checks are conducted.	Are fidelity checks of the evidence-based practices conducted according to specified timelines?	90% of program's supervisory staff conducts fidelity checks.	Self-assessment completed weekly until fidelity is achieved and then monthly.  Program's monitoring documentation: Coaching logs;	April 2018 – June 30, 2019

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				Supervisory reports. Fidelity checks review by program staff.	
<b>Intermediate Outcomes</b>	FSS's implement evidence-based practices with fidelity.	Do FSS's implement evidence-based practices as intended?	80% of FSS's implement evidence-based practices with fidelity.	Self-assessment completed weekly until fidelity is achieved and then monthly.  Fidelity checks review by program staff and Quality Improvement Specialists.  Quality Improvement Specialists observe up to 12 different FSS's annually.	April 2018 – June 30, 2019
	Increased number of IFSPs with social-emotional outcomes.	Is there an increase in the number of social-emotional outcomes listed in IFSPs?	20% increase in FFY 2017 and each year thereafter.	Random sample of provider's IFSPs using the EI Module: Evidence of connection between assessment and outcomes/plans; Evidence of increased number of IFSPs with social-emotional outcomes.	April 2018 – June 30, 2019
	Ongoing monitoring and support of FSS's training and use of evidence-based	Is the Part C provider(s) implementing a comprehensive staff	100% of new FSS's are trained in evidence-based practices.	Staff survey  Quality Improvement Specialists review	April 2018 – June 30, 2019

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	practices.	development process to ensure FSS's are equipped to implement Montana's Early Intervention model using Montana's professional development resources? Has the Part C provider(s) implemented infrastructure to support implementation of Montana's Early Intervention model?	100% of FSS's receive ongoing support as they implement evidence-based practices.	professional development records and documentation supporting ongoing monitoring and support of FSSs.	
<b>Long-term Outcomes</b>	Families are actively engaged in early intervention services and take ownership in early intervention process.	Are families more engaged in early intervention services for their child?	75% of families report high levels of engagement in early intervention services for their child.	Family survey and randomized interviews with family members.	June 2019
	Families have knowledge, skills to support their child's social-emotional development.	Have families gained skills and knowledge, therefore, strengthening their ability to help their children reach their social-emotional potential?	75% of families report they are able to help their children reach their social-emotional potential.	Family survey and randomized interviews with family members.	June 2019
	Children enrolled in Part C will	Have more infants and toddlers exiting	78% of infants and toddlers exiting early	Data reported for APR Indicator C3,	June 2019

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	demonstrate increased growth in social-emotional development so that they are better equipped to participate in the next steps toward social and academic success following their exit from Part C.	early intervention services demonstrated an increase in the rate of growth in positive social-emotional development?	intervention services demonstrate increased growth in social-emotional development.	which is collected at entry and exit using COSP.	
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