

# NEVADA



## IDEA PART C

### STATE SYSTEMS IMPROVEMENT PLAN (SSIP)

### PHASE II

**Federal Fiscal Years  
2014-2018**

**Submitted April 1, 2016**

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# NEVADA

## Part C State Systemic Improvement Plan (SSIP) Phase II

### Introduction

The Individuals with Disabilities Education Act (IDEA) Part C Office within the Director's Office of Nevada's Department of Health and Human Services (DHHS) serves as the Lead Agency for the statewide system of early intervention services (EIS). During Phase II of the ongoing development of the State Systemic Improvement Plan (SSIP), the IDEA Part C Office worked with key stakeholders, including families of children with disabilities, to build on the foundation established in Phase I. A brief summary of the key components established in Phase I are provided to set the context for Phase II of the plan.

### Phase I: Review

In the Phase 1 development of the SSIP, Nevada's IDEA Part C Office Leadership team and statewide stakeholders, with the ongoing support of representatives from national TA centers, completed a thorough analysis of the State's child outcomes performance data for children participating in early intervention services as a basis for identifying the most critical area(s) for systemic improvement. The State's performance is based on three (3) specific outcomes with two (2) summary statements that are applied to each outcome as follows.

#### Outcomes:

The percent of infants and toddlers with Individual Family Service Plans (IFSPs) who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

#### Summary Statements:

1. Summary Statement 1 (SS1): Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned three (3) years of age or exited the program.
2. Summary Statement 2 (SS2): The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned three (3) years of age or exited the program.

### Phase I: Child Outcomes Data Analysis Supporting SiMR

The extensive analysis of Nevada's Child Outcomes data included comparison of the data to state-established performance targets as well as national data and the data of other states with similar Part C eligibility definitions. Key highlights of the results of the data analysis and the basis for the determination of Nevada's State-identified Measurable Results (SiMR) are as follows:

#### Nevada's Longitudinal Performance

- For the five (5) previous years, the data for infants and toddlers exiting early intervention services with greater than expected growth, Child Outcomes Summary Statement 1 (SS1), showed fluctuations in performance relative to improvement in children's social-emotional development/positive social relationships with a slight decrease in FFY 2012.
- The percent of infants and toddlers exiting within age expectations for Positive Social-Emotional Skills (including social relationships) increased slightly from FFY 2011 to FFY 2012, but performance is still more than one (1) Standard Deviation (SD) below the national average.
- The State's data for Annual Performance Reports (APR) for FFY 2010 through FFY 2012 showed performance for infants and toddlers who entered or exited the program below age expectations in the area of Positive Social-Emotional Skills (including social relationships) who substantially increased their

rate of growth by the time they exited the program was below the State established target for each of the three (3) years.

Compared to National Averages:

- Nevada data compared to the national data SS1 for all three (3) child outcomes, showed the State's performance to be comparable with the national average.
- Nevada data compared to the national data SS2 for all three (3) child outcomes, showed the State's performance to be significantly below the national average; the lowest performance was in social relationships and acquisition of knowledge and skills.

Compared to States with Similar Eligibility Criteria:

- Nevada's performance was comparable to states with similar eligibility, for SS1 for all three (3) child outcomes measures.
- Nevada's performance was significantly below the average for states with similar eligibility definitions, for SS2 for all child outcomes measures; the lowest performance was in social relationships and acquisition of knowledge and skills.

Analysis of Subcategories:

- Children exiting EIS with greater than expected growth, where the primary language was Spanish or English, performed less well in improved social-emotional development as compared to acquisition of knowledge and skills.
- Children exiting EIS with greater than expected growth, where the primary funding source was Medicaid or Non-Medicaid, performed less well in improved social-emotional development as compared to acquisition of knowledge and skills.
- Children exiting EIS with greater than expected growth, both in foster care and non-foster care, performed less well in improved social-emotional development as compared to acquisition of knowledge and skills.
- One third of the children who spent less than one (1) year in service did not change their trajectory in social-emotional skills by the time they exited.
- Based on the change in performance from entry to exit, the greatest percentage (30%) fell one (1) SD below the mean for change in positive social relationships.

As a result of the data analysis, Nevada's IDEA Part C Office team and stakeholders collectively determined the area with the greatest need for improvement and potential for change was Outcome A, SS1. (Of those infants and toddlers who entered or exited early intervention below age expectations, the percent who substantially increased their rate of growth by the time they turned three (3) years of age or exited the program). It was therefore determined that Nevada's SiMR is:

***“Infants and toddlers exiting early intervention services in Nevada will demonstrate a significant increase in the rate of growth in positive social-emotional skills (including social relationships).”***

**Phase I: Infrastructure Analysis Supporting SiMR**

During Phase 1 of the SSIP, stakeholders also looked at the State's strengths, weaknesses, opportunities and threats (SWOT) relative to critical systems infrastructure components including Governance, Accountability, Professional Development, Data, Quality Standards, Technical Assistance, and Finance. This analysis identified a number of key strengths relative to infrastructure components that support the decision of the identified SiMR and can be built on to achieve the ultimate result of improving social emotional outcomes for infants and toddlers. Examples of the key strengths of the state infrastructure components include the following.

#### Governance:

- High level of awareness of the importance of appropriate supports for young children, especially in the earliest years
- Existing collaboration across State agencies and programs to improve systems of support during early childhood
- Public/Private collaborations to improve systems of care for young children
- Policies are in place to support consistent implementation of requirements
- State legislated program for identification and treatment of children with Autism Spectrum Disorders (ASD)
- The Early Childhood Advisory Council (ECAC) and the State Interagency Coordinating Council (ICC) collaboration

#### Fiscal:

- Increased funding for early intervention and early childhood initiatives
- Success in maximizing funding from various resources, including Medicaid
- Collaborative funding of early childhood initiatives

#### Quality Standards:

- Ongoing development of early learning standards
- Awareness of, and training on, Division for Early Childhood (DEC) Recommended Practices; Use of recommended practices as foundation for program quality and improvement
- Silver State Stars Quality Rating & Improvement System (QRIS); a systemic approach to improve and assess the level of quality in child care centers
- Initiation of development of provider certification standards that are quality based and linked with monitoring and accountability
- Autism Subcommittee developing quality standards for services for children diagnosed with ASD

#### Professional Development:

- ICC subcommittee on Endorsement/Certification of Developmental Specialists for EIS
- Grants to support individuals in obtaining State endorsement in Early Childhood Special Education (ECSE)
- Collaboration across programs to provide training based on identified needs
- Training modules for foster parents
- On-line training modules for child care providers regarding administering Ages and Stages Questionnaire – Social Emotional (ASQ-SE)
- Nevada's Technical Assistance Center on Social Emotional Intervention for Young Children (TACSEI) Pyramid Model Partnership
- Training supports instituted by local programs that have been shown to be effective and can be replicated statewide

#### Data:

- Ongoing development of the Tracking Resources and Children (TRAC) Data collection and reporting system
- Data collected through various projects serve as basis to potentially expand in order to have more comprehensive data across early childhood efforts (e.g., Screening, training and follow-up data)

#### Technical Assistance:

- The State has access to technical assistance (TA) and resources on a broad array of topics through the various national TA centers
- TA for providers is facilitated or provided through the IDEA Part C Office using multiple approaches including meeting with providers, distribution of information on webinars or other media and through printed materials developed collaboratively with providers to ensure they address the identified need

#### Accountability:

- Ongoing development of the TRAC Data System to support expanded use of data by state and local programs to evaluate performance and for program improvement

### **Phase I: Identification of Root Causes and Selection of Coherent Improvement Strategies**

Based on the infrastructure analysis, Nevada's stakeholders formulated hypotheses of potential root causes for Nevada's low performance in social-emotional outcomes (including positive social relationships) for infants and toddlers participating in EIS. The hypotheses were confirmed through provider input gathered and compiled through a questionnaire process. Based on stakeholder recommendations, the IDEA Part C Office Leadership team developed broad improvement strategies to address the root causes in order to demonstrate improved results in the positive social-emotional skills for children who enter EIS below age expectations and significantly increase their rate of growth by the time they turn three (3) years of age or exit the program. The broad improvement strategies identified were as follows.

1. Develop and provide consistent training and ongoing support to increase early intervention service provider's knowledge and skills on evidence-based practices that focus on the role and impact of social-emotional development on successful interventions and improved outcomes for children.
2. Research and identify appropriate evidence-based assessment instruments to support service provider's ability to identify social-emotional skills in infants and toddlers.
3. Identify professional development resources and procedures to support the use of functional assessments and ensure assessments are consistently administered as appropriate.
4. Establish and maintain a statewide system for ongoing quality assurance to assess the implementation of evidenced-based practices and identify elements that support or impede the ability to effectively improve outcomes.
5. Increase statewide collaborations across early childhood initiatives to ensure all service providers have knowledge of how to access resources in the area of promoting, supporting and improving social-emotional skills for children and families.
6. Improve the ability and capacity of the data system (TRAC) processes to efficiently provide qualitative and quantitative reports to support the evaluation of program performance and identify areas for targeted training and technical assistance for improvement planning at the state and local levels.

### **Phase I: Theory of Action**

Nevada's Theory of Action (TOA) includes four (4) strands that originated from the broad improvement strategies and describes a flow of action steps from the State Lead Agency and other State level initiatives to local early childhood programs and early intervention providers and children and families, to the State Identified Measurable Result (SIMR). The strands include Evaluation and Assessment, Practitioner Knowledge and Skills/Local System Supports, State and Local Provider Collaboration, and Data Systems and Accountability.

**Table A - Theory of Action**

Nevada Theory of Action				2015
Strands of Action	If the State	Then	Then	Then
Evaluation and Assessment	.....identifies evidence-based assessment instruments	...service provider's confidence level will improve when identifying social-emotional needs for infants and toddlers	evidence-based practices will improve, be sustainable and implemented with fidelity  ...meaningful conversations will occur with families to gather information regarding their child's social-emotional development	...Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships)
	...enhances professional development resources and provides ongoing support to ensure evidence-based functional assessments are implemented with fidelity	... service provider's will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers		
Practitioner Knowledge and Skills/ Local System of Support	... further develops and provides ongoing training and resources to support the utilization of evidence-based practices for social-emotional development	..... service provider's knowledge and ability to communicate with families about the role and impact of social-emotional development on successful interventions will increase	...more appropriate outcomes and strategies will be included in IFSPs, including social-emotional skills when appropriate	
	...establishes and facilitates strong collaborations with early childhood partner agencies to help link families with appropriate resources related to addressing their child's social-emotional skills	...all service providers will know how to access resources to effectively improve and effectively implement EBP	...families will be better able to support and enhance their child's social-emotional skills and overall development	
Data System and Accountability	...enhances and implements a data reporting system that has the ability and capacity to allow for effective program planning, monitoring and overall improvement	.....local providers will be able to produce ongoing qualitative and quantitative reports to improve program performance and identify areas for targeted coaching and TA  ... the state will be better able to monitor and support the full implementation of evidence-based practices		

## Development of Phase II of Nevada's SSIP

Phase II of Nevada's SSIP is designed to build on the data and infrastructure analyses, the broad improvement strategies and the Theory of Action (TOA) developed during Phase I. The IDEA Part C Office Leadership team began the process of organizing and developing Phase II of Nevada's SSIP by identifying critical activities needed to support the implementation of each of the broad improvement strategies identified in Phase I.

With support from the Early Childhood Technical Assistance (ECTA) Center, the Center for IDEA Early Childhood Data Systems (DaSy), and the National Center for Systemic Improvement (NCIS), logic models were developed based on each of the four (4) strands of action identified in the TOA (Evaluation and Assessment, Practitioner Knowledge and Skills/Local System Support, State and Local Provider Collaboration, and Data System and Accountability). These logic models (see Attachment A) demonstrate the logical flow of the work outlined in Phase II of the SSIP from each of the stated priorities to the ultimate outcome of ensuring infants and toddlers participating in EIS demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships). Improvement plans were also drafted to further define the work associated with each of the TOA strands.

Improvement plans (see Attachment B) were drafted to support the strategy(s) identified in each strand of the TOA and to align with the activities, outputs and outcomes included in the logic model. The strategies and associated strands include:

1. State identifies evidence-based assessment instruments to support the service provider's ability to identify social-emotional skills in infants and toddlers (Evaluation and Assessment).
2. State enhances professional development resources and provides ongoing support to ensure evidence-based functional assessments are implemented with fidelity (Evaluation and Assessment).
3. State further develops and provides ongoing training and resources to support the utilization of evidence-based practices for social-emotional development (Practitioner Knowledge and Skills/Local System Support).
4. State enhances and implements a data reporting system that has the ability and capacity to allow for effective program planning, monitoring and overall improvement (Data System and Accountability).
5. State establishes and facilitates strong collaborations with early childhood partner agencies to help link families with appropriate resources related to addressing their child's social-emotional skills (State and Local Provider Collaboration).

The process of development of each section of the Improvement Plan (IP) included reviewing the infrastructure analysis from Phase I and identifying which infrastructure components would be most impacted for each section of the plan. The IP also identified the specific outcomes expected to be achieved based on each strategy. While there was overlap in the outcomes across the four (4) sections of the improvement plan, addressing each as a separate component was more productive in working with stakeholders to address each of the strategies. The logic models were utilized both in the development and refining of the improvement plans to ensure the content was clear and consistent. The intended outcomes compiled and unduplicated across the four (4) strands are listed in Table B below.



**Table B - SSIP Phase II Outcomes**

Type of Outcome	Outcome Description
Short term	Service provider’s confidence and competence level will improve when identifying social-emotional needs for infants and toddlers.
Short term	Service providers will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers.
Short term	Local providers will have a better understanding of how to complete child outcomes ratings and how to use child outcomes data for program improvement.
Short term	There will be an increase in service providers’ knowledge and ability to communicate with families about the role and impact of social-emotional development on successful interventions.
Short term	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child’s social-emotional development and their needs relative to their ability to effectively support their child’s social-emotional development.
Short term	Service providers’ working knowledge and understanding of the use of evidenced-based practices (EBP) to support the social-emotional development of infants and toddlers will increase.
Short term	Service providers have knowledge of how to access resources relative to the use of evidence-based practices and wrap-around supports to address the social emotional needs of children and families.
Short term	Local communities and service providers have knowledge of the system’s resources for supporting the social-emotional needs of children and families and will engage in strategic planning to address areas of need.
Short term	The IDEA Part C Office will have access to system data and be better able to monitor and support the full implementation of evidence-based practices.
Intermediate	Service providers’ use of evidence-based practices in assessing the social-emotional skills and needs of infants and toddlers will improve, be sustainable and implemented with fidelity.
Intermediate	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.
Intermediate	Service providers’ use of EBP to support the social-emotional development of infants and toddlers will improve, be sustainable and implemented with fidelity.
Intermediate	The use of evidence-based practices will improve and be implemented with fidelity to reach IFSP goals, strategies and outcomes to meet the social-emotional needs of the child and family.
Intermediate	Families will be better able to support and enhance their child’s social-emotional skills and overall development.
Intermediate	Local providers will be able to produce ongoing qualitative and quantitative reports to improve program performance and identify areas for targeted coaching and TA .
Long term	Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships).

**Stakeholder Process in the Development of Phase II:**

Three (3) primary stakeholder groups were organized to review the draft Logic Models (LM) and Improvement Plans (IP) for Phase II of the SSIP. The process and involvement of each group was designed to build on the work of the previous group.

**Evaluation Stakeholder Workgroup:**

The Evaluation Stakeholder Workgroup was convened on February 9, 2016, to review the first draft of all logic models relative to development of Component III of Phase II of the SSIP – the Evaluation Plan. Technical assistance support for this meeting was provided by Abby Schachner with the ECTA Center and DaSy. Additional information is provided in Component III of the SSIP.

Members of the Evaluation Stakeholder Workgroup were asked to review the draft LMs and determine whether there was a logical connection between the activities and outcomes then identify any gaps between activities and outcomes. The workgroup was also asked to recommend specific activities needed to implement each strategy as well as addressing any steps not specified, but assumed. They were also asked to indicate whether any of the root causes identified in Phase 1 had not been addressed. The group also drafted preliminary evaluation questions, performance indicators and data sources/methods for each evaluation question and measures key to evaluating SSIP outcomes. These will be addressed in Component III.

Input from the group was compiled and reviewed by the IDEA Part C Leadership team. Each of the four (4) Logic Models and Improvement Plan components were updated based on the compiled feedback. Drafts for evaluating the outcomes of each corresponding components/strands were developed for Component III of Phase II of the SSIP (Evaluation) based on the feedback from this stakeholder workgroup.

The Practitioner Knowledge and Skills Stakeholder Workgroup

The Practitioner Knowledge and Skills Stakeholder Workgroup was convened on February 18, 2016. Technical assistance support for this meeting was provided by Ardith Ferguson with NCIS. This group was asked to review current drafts of the Evaluation and Assessment and the Practitioner Knowledge and Skills/Local System Support logic models and improvement plans. Members of this group are listed in Table C below.

**Table C - Practitioner Knowledge and Skills Stakeholder Workgroup**

Participant	Role	Agency/Organization
Alisa Koot	Parent	Nevada Interagency Coordinating Council (ICC) Member
Arielle Parrish	Early Intervention Service (EIS) Provider, Developmental Specialist	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, Northeast, Elko
Britney Rauh	Early Intervention Service (EIS) Provider, Developmental Specialist	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, Northwest, Carson City
Janice Lee	State Coordinator, Nevada Technical Assistance Center on Social-Emotional Interventions (TACSEI)	University of Nevada, Reno, Nevada Center for Excellence in Disabilities (NCED)
Lori Schoen	Early Intervention Service (EIS) Provider, Developmental Specialist	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, Northwest, Reno
Nicole Atwell	Early Intervention Service (EIS) Provider, Program Manager; ICC Member	Therapy Management Group
Patti Oya	Director	Office of Early Learning and Development, Nevada Department of Education (NDE)
Tricia Woodliff	Mental Health Counselor	Nevada Department of Child and Family Services (DCFS)

The Practitioner Knowledge and Skills Stakeholder Workgroup included a larger number of EIS providers than the previous Evaluation stakeholder workgroup. The purpose for this workgroup was to review the most current versions of the LMs and IPs for Evaluation and Assessment and Practitioner Knowledge and Skills/Local System Support. The group process informed key stakeholders of the progress in development of these strands and strategies to support implementation of the SSIP. Participants were asked to provide feedback on the LMs, IP and strategies, and the draft evaluation plans. Participants were asked to provide feedback on whether the proposed strategies would provide support for implementation of EBP related to social-emotional development and to identify preliminary performance measures to scaling up EBPs to support social-emotional development. Key areas that the group indicated needed further clarification were: Ensuring the training be provided equally for State operated and private programs; defining “cohorts”; and determining how the improvements would be funded.

Again, the input from the group was compiled and reviewed by the IDEA Part C Office Leadership team. The Evaluation and Assessment and Practitioner Knowledge and Skills/Local System LMs and IP components were updated based on the compiled feedback. LMs and IPs for the other two (2) components were also reviewed to ensure consistency across the plan as a whole. All components were reviewed again with national TA consultants. It was suggested the IDEA Part C Office Leadership team conduct a feasibility study of the number of activities included across the four (4) strands of the IPs.

The IDEA Part C Office Leadership team met on February 26, 2016, to conduct a feasibility study of all proposed activities across the four (4) strands to determine which activities would have the highest impact on achieving the SiMR. Activities were considered based on high feasibility/high impact; low feasibility/high impact; high feasibility/low impact; low feasibility/low impact. Through this process, it was determined some of the activities, as stated, were more appropriate as steps to address another activity. It was also determined some activities were good ideas but were not likely to have a direct impact on achieving the SiMR. The activities that were determined to have High Feasibility/High Impact were established as the priority activities. The logic models and improvement plans were updated to reflect the results of the analysis. The revised documents were again reviewed with TA consultants to arrive at the final drafts of the documents.

**The Comprehensive Review Stakeholder Workgroup**

The Comprehensive Review Stakeholder Workgroup was convened on March 8, 2016. Technical assistance support and facilitation for this meeting was provided by Anne Lucas with the ECTA Center and DaSy. The purpose of this group was to review final drafts of all four (4) LMs and IPs. The group was structured to have representation from the two (2) previous workgroups as well as representatives from the broader early childhood system (including several ICC members). Participants in the Comprehensive Review Stakeholder Workgroup included the following individuals.

**Table D - Comprehensive Review Stakeholder Workgroup**

<b>Member</b>	<b>Role</b>	<b>Agency</b>
Dr. Ann Bingham	Personnel Development, Nevada Institution of Higher Education (IHE) and ICC Member	University of Nevada, Reno, College of Education, Professor, Specialized Studies; Co Chair, Nevada Interagency Coordinating Council (ICC) Co-Chair
Candice McDaniel	Early Intervention Service (EIS) Provider, Regional Manager	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, Northwest, Carson City
Dawn Brooks	Early Intervention Service (EIS) Provider, Program Supervisor	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, South, Las Vegas
Dr. Debra Vigil	Institution of Higher Education (IHE) Associate Professor, Department of Speech Pathology and Audiology	Nevada Learn the Signs, Act Early (LEND) Project, University of Nevada – Reno (UNR)
Ella Philander	Early Intervention Service (EIS) Provider, Early Intervention Services Director	Easter Seals of Nevada, North Program, Reno
Janice Lee	State Coordinator, Nevada Technical Assistance Center on Social-Emotional Interventions (TACSEI)	University of Nevada, Reno, Nevada Center for Excellence in Disabilities (NCED)
Joyce Larsen	Clinical Program Manager I ICC Member	Early Childhood Mental Health Services, Northern Nevada Child and Adolescent Services, Nevada Division of Child and Family Services (DCFS)
Julie Ortiz	Early Intervention Service Provider (EIS) Manager	Advanced Pediatric Therapies (APT), Reno

Laurie Olson	Chief	Nevada Department of Health and Human Services (DHHS) - Director's Office, Office of Community Relationships and Grants
Lori Schoen	Early Intervention Service (EIS) Provider, Developmental Specialist	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, Northwest, Reno
Martha Schott-Bernius	Early Intervention Service (EIS) Provider, Regional Manager	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, Northeast, Elko
Marty Elquist	Director; ECAC Chairperson	The Children's Cabinet, Supporting Early Education & Development; Early Childhood Advisory Council (ECAC)
Megan Wickland	Clinical Program Planner, Community Partner Liaison; ICC Member - Agency Representative, ADSD	Aging and Disability Services Division (ADSD), Early Intervention Services (EIS)
Nicole Atwell	Early Intervention Service (EIS) Provider, Program Manager; ICC Member	Therapy Management Group, Las Vegas and Reno
Randi Humes	Early Intervention Service (EIS) Provider, Management Analyst	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, South, Las Vegas
Robin Kincaid	Educational Services Director, ICC Member- Advocacy Organization Representative	Nevada Parents Encouraging Parents (PEP)
Shannon Sprout	Chief, Clinical Policy Team; ICC Member	Nevada Division of Health Care Financing and Policy (DHCFP)

The workgroup was asked to provide feedback on whether the activities and steps across the different IPs reflect the needed changes to infrastructure to support EIS programs and providers in implementing EBP with integrity to address the social-emotional needs of infants and toddlers. They were also asked to review the activities across the IPs and indicate whether they felt they described how the plan would be implemented and whether the activities/steps across the IPs were feasible within existing resources. After compiling and reviewing the feedback, the most common responses relative to infrastructure components focused on the importance of the role of data and funding. The majority of participants agreed the activities across the plans provided a good description of how state and local programs will implement EBP to improve social-emotional outcomes. However, they felt additional funding at the local level would be necessary to ensure implementation.

The feedback from the workgroup was compiled and reviewed by the IDEA Part C Leadership team. Each of the four (4) IPs were updated, as appropriate, based on the comments. The IDEA Part C Office Leadership Team, with TA support, updated each component based on the compiled feedback. Evaluation questions, performance indicators and data sources/methods were developed to evaluate the implementation of IP activities.

A statewide informational review with Interagency Coordinating Council Members and other stakeholders was conducted by the IDEA Part C Office on March 16, 2016, to go over the SSIP framework including the Logic Models, Improvement Plans and the Evaluation Component (both implementation and outcomes evaluation) for each strand. A list of participants on this call is maintained by the IDEA Part C Office. Final versions of all documents were presented to DHHS and ADSD administration on March 25, 2016.

## State Systemic Plan (SSIP) Phase II Component 1: Infrastructure Development

### **1(a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve the SiMR for infants and toddlers with disabilities and their families.**

The analysis of Nevada's infrastructure to support improvement and build capacity included a Strengths, Weaknesses, Opportunities and Threat (SWOT) analysis. This is an analytical framework designed to help organizations identify their greatest challenges as well as most promising next steps. A SWOT analysis was completed for each U.S. Office of Special Education Programs (OSEP) recommended system component. These components included: Governance, Fiscal, Quality Standards, Professional Development, Data Systems, Technical Assistance and Accountability and Quality Improvement. Within those system components, each identified SWOT was labeled as possible leverages or hindrances to improvement in the focus area of social-emotional development. The information gathered from the infrastructure analysis was used to help identify root causes and subsequently select Nevada's broad improvement strategies. Nevada's improvement strategies are organized around four (4) strands (Evaluation and Assessment, Practitioner Knowledge and Skills, Collaboration and Data System and Accountability). Each of the improvement plans (see Attachment B) addresses areas in the State infrastructure system needing improvement to better support EIS provider programs to improve the SiMR for infants and toddlers with disabilities and their families.

#### **Areas of Improvement**

##### **Governance**

A high turnover of personnel at the local and administrative level and competition with other programs to hire qualified staff in some disciplines was identified as having an impact on improving social-emotional outcomes for infants and toddlers statewide. The high turnover of personnel at the administrative level results in inconsistent decisions, interpretation of requirements, and priorities. Inconsistency in interpretation of requirements at the state level impacts the ability of personnel at the local in their ability to evaluate and assess children's needs related to social-emotional development and in providing appropriate services to improve social-emotional outcomes. Another challenge is ensuring collaboration between the IDEA Part C Office under the Director's Office and the administration of the early intervention services (EIS) provider programs through the Aging and Disability Services Division (ADSD). This challenge has an impact on the development and provision of training for all EIS providers related to Part C requirements and use of evidence-based practices (EBP) in serving infants and toddlers with disabilities. As a result, the IDEA Part C Office, in conjunction with stakeholders, identified the following key activities to address these issues to better support EIS provider programs with the implementation and scaling up EBP to improve the SiMR.

- Identify specific areas for collaboration across state and federal programs at both the state and local level that are most relevant to linking families with appropriate resources related to addressing their child's social-emotional development.
- Align SSIP goals and activities with Nevada's Early Childhood Comprehensive System Strategic Plan relative to Professional Development, Social Emotional Health, Community Resources and Wrap-around Services to strengthen and maximize resources to support social-emotional outcomes for infants and toddlers and their families.

##### **Fiscal**

Financial support was identified as a critical factor to effectively carry out many of the activities that have been laid out in the State's improvement plan. Lack of additional resources could negatively impact the State's ability to make infrastructure improvements to support early intervention programs and providers in implementing

evidence-based practices that lead to positive social-emotional outcomes for infants and toddlers. As a result of the identified areas needing improvement, the following activities will be implemented to better support EIS provider programs with scaling up EBP to improve the SiMR.

- Compiling data to identify and address gaps in available resources to support the family in addressing the social-emotional needs of their child will guide strategic planning and collaborative efforts to address identified gaps, including fiscal support required for system's improvement.
- Enhancing the IDEA Part C Office Early Intervention (EI) data system to support additional analysis and reporting of child outcomes data at all levels and will support increased efficiency in maximizing fiscal resources across EIS programs.

### **Quality Standards**

A process for program specific quality standards has been developed through ADSD for EIS provider programs under their administration. However, further verification is needed to ensure the quality standards are evidence-based relative to social-emotional outcomes for infants and toddlers and there is a system in place to ensure fidelity in implementation. As a result of the identified areas needing improvement, the following activities will be implemented to better support EIS provider programs with implementing and scaling up EBP to improve the SiMR.

- Update IDEA Part C Office monitoring/accountability procedures to incorporate the data generated through the evaluation of fidelity measures in implementing social-emotional EBPs through cohorts established under the new Technical Assistance Center for Social Emotional Interventions – Early Intervention (TACSEI-EI) initiative.

### **Professional Development**

Areas identified as needing improvement included additional supports for personnel to participate in training opportunities (e.g., release time and additional funds for travel, materials, etc.). Topics indicated as needing additional training included understanding the importance of the child outcomes as a measure of the effectiveness of EIS, development of functional outcomes related to social-emotional development in assessing and interpreting the social-emotional needs of infants and toddlers. The lack of knowledge and skills in this area results in failure to appropriately identify social-emotional needs and, in turn, results in less effective intervention plans for services for the child and family. As a result, the IDEA Part C Office, in conjunction with stakeholders identified key activities to address following issues.

- Identify evidence-based tools and procedures to be utilized by EIS providers in conducting functional assessments of the social-emotional skills and needs of children ages birth to three (3) and the initial and ongoing assessment of the family's needs related to their ability to support their child's social-emotional development.
- Develop and implement statewide training and technical assistance for EIS providers in EBP for administering and interpreting assessment tools and procedures to identify the functional social-emotional needs of infants and toddlers and their families.
- Expand the State TACSEI-EI focus for early intervention home and community-based services, including mentors and coaches to ensure EIS providers are utilizing EBPs in addressing the social-emotional needs of infants and toddlers.
- Support providers in using data regarding families' confidence in their ability to support and enhance their children's social-emotional development from the IDEA Part C Office Annual Family Survey to guide meaningful conversations with the family.

### **Data Systems:**

A critical need for the data system is for the local EIS provider programs to be able to access their child outcome summary (COS) performance data, which they currently receive on an annual basis. This does not allow for ongoing program evaluation to determine if there are issues that need to be addressed in service delivery to improve outcomes for children and families. As a result of the identified areas needing improvement the following activities will be implemented to better support EIS provider programs with implementing and scaling up EBP to improve the SiMR.

- Enhance the IDEA Part C Office EI data system to support additional analysis and reporting of child outcomes data at all levels.
- Develop and implement ongoing processes for providing data system training for EIS providers in the analysis and use of child outcomes data reports.

### **Technical Assistance**

Nevada's Effective Practices Guidelines (EPG), now referred to as the IDEA Part C Office Evidence-Based Practice Guidelines (EBPG) for EIS provider programs need to be updated to reflect DEC's most recent EBP. The IDEA Part C Office provides a monthly TA call for all EIS provider programs to participate; however, there are inadequate IDEA Part C Office personnel to meet the needs of all TA requests for all programs. Not having current EBPG and sufficient staff to respond to TA requests can impact how programs and providers implement practices at the local level and can potentially impact the results for children and their families. As a result of the identified areas needing improvement the following activities will be implemented to better support EIS provider programs with implementing and scaling up EBP to improve the SiMR.

- Develop a proposal and strategic plans outlining necessary components for establishing Regional Training and Technical Assistance Centers to Support EIS/Early Childhood Programs in implementing EBP and improving social-emotional outcomes for infants and toddlers.
- Revise IDEA Part C Office EBPG to include a child outcomes module addressing the provision of EIS to support the social-emotional development of infants and toddlers consistent with the TACSEI Model.

### **Accountability and Quality Improvement**

A current weakness in the system is limited access to COS data analysis at the individual program level. This does not support ongoing evaluation to determine if practices are effective in improvement of outcomes and allowing for modifications to service delivery to address concerns. The accountability system is also heavily focused on compliance and needs to have an increased emphasis on results along with compliance. As a result of the identified areas needing improvement the following activities will be implemented to better support EIS provider programs implementing and scaling up EBP to improve the SiMR.

- Update IDEA Part C Office Accountability and Monitoring processes to include procedures for evaluating fidelity in implementation of EBP and improved social-emotional outcomes for infants and toddlers with disabilities.
- Provide/facilitate training on child outcome rating process to ensure inter-rater reliability across statewide systems.

*Note: Please refer to the improvement plans for a detailed description of the steps that will be carried out for implementation.*

**1(b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start, and others which impact infants and toddlers with disabilities and their families.**

During Phase I, State level initiatives, programs and services were identified that relate to social-emotional development in young children and could support Nevada’s SiMR. After extensive exploration of the current initiatives with a primary focus on improving social-emotional outcomes for infants and toddlers, the IDEA Part C Office, along with key stakeholders, identified ways to leverage opportunities to make improvements to the State infrastructure system. The core components of the current initiatives being incorporated into Nevada’s improvement plan are noted below.

- A system for on-going Professional Development;
- A plan to ensure sustainability; and
- An ongoing evaluation process to ensure fidelity in implementation of EBP and determining whether intended outcomes are being met.

The collaboration opportunities with the primary agencies that have been a part of the development of this plan and process are listed in the following table.

**Table 1.A. Agencies Collaborating for Infrastructure Development**

Agency	Role	Collaboration Opportunities
Nevada TACSEI Leadership Team	This team uses the Pyramid Model from the TA Center on social-emotional intervention to promote EBP that support positive social-emotional skills for young children.	The team will work collaboratively to build a comprehensive early childhood professional development system of training and technical assistance to ensure the EIS workforce is prepared to address and provide services to improve and enhance infants and toddlers social- emotional competence.
Nevada Early Childhood Advisory Council (ECAC)	The ECAC works to strengthen state-level coordination and collaboration among the various sectors and settings of early childhood programs.	This organization can provide resources to assist families in obtaining information and support from other early childhood programs within the state.
Nevada Division of Child and Family Services (DCFS), Early Childhood Mental Health Services	Nevada Division of Child and Family Services (DCFS), Early Childhood Mental Health Services provides outpatient services and works in partnership with families, communities and other agencies to provide support and services to assist children and families in reaching their full potential.	<ul style="list-style-type: none"> <li>• The State operated EIS program in the northern region (NEIS NW) has worked collaboratively with early childhood mental health providers to develop the Emotional Assessment and Strategies Team (EAST) Team. This team provides information and support for families with social-emotional concerns, review of assessment information related to social-emotional development and assists families in the development of functional outcomes to address social-</li> </ul>



		<p>emotional skills.</p> <ul style="list-style-type: none"> <li>• The State will explore expansion of local/internal social-emotional teams based on the EAST model statewide.</li> </ul>
Early Childhood System of Learning (ECSOL)	The ECSOL was established with targeted TA through the Early Childhood Personnel Center (ECPC). Representatives of this group consist of members from multiple early childhood initiatives (Part C, Part B, Nevada Department of Education (NDE), The Children’s Cabinet, Nevada Center for Excellence in Disabilities (NCED), UNR, UNLV, and Nevada TACSEI Leadership Team. The team works collaboratively to develop a comprehensive personnel development plan across agencies and disciplines to ensure highly qualified staff and to provide EBP for early childhood.	The ECSOL will participate in the development of competencies for EIS providers regarding assessment of the social-emotional skills of infants and toddlers ages birth to three (3) and their families. This will directly relate to the fidelity of services and skills to address social-emotional development of young children.
Nevada Partnership for Training	This organization provides a statewide training module related to basic neurodevelopment and the impact of trauma on childhood development and behavior. Training also includes a component to address the impact of trauma on the child/family relationship.	This training will directly increase early interventionists’ ability to communicate and relate to families in identifying and addressing social-emotional needs and skills of infants and toddlers with disabilities.

**1(c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.**

The IDEA Part C Office Leadership team is ultimately responsible for supporting the processes for changes to the infrastructure, identifying resources, tracking progress with outcomes, and ensuring timelines of the intended outcomes are met. However, there are a number of stakeholders currently involved with the implementation of activities as well as stakeholders that will be involved at various stages of implementation of activities within each of the four (4) strands. Timelines for different phases of implementation of activities have been identified. This will ensure a steady flow within the specified timelines. The work of the IDEA Part C Office will be strongly aligned with collaboration efforts with ASD to ensure practitioners are supported and implementation of EBPs for children and families will be sustained.

*Note: Please refer to the improvement plans for details relative to specific resources needed to initiate/implement activities, expected outcomes, and timelines for projected initiation and completion dates of the activities.*

**1(d) Specify how the State will involve multiple offices within the Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.**

The IDEA Part C Office has established several mechanisms to involve offices/agencies and stakeholders in State infrastructure improvements. The following chart describes the agencies that will be involved and providing support during the various stages of implementation of activities to improve the structure of Nevada’s early intervention system relative to addressing and improving infants and toddler’s social-emotional development.

**Table 1.B. Agency Roles in Infrastructure Improvement**

Agencies Involved	Critical Components for Infrastructure Improvement [See 1(a)]	How Agencies Will Be Involved to Support Improvements to Infrastructure
ADSD	<ul style="list-style-type: none"> <li>➤ Governance</li> <li>➤ Data Systems</li> <li>➤ Professional Development</li> <li>➤ Quality Standards</li> <li>➤ Finance</li> <li>➤ Accountability</li> </ul>	<ul style="list-style-type: none"> <li>• Collaborate in the development and maintenance of a statewide data system that provides access to timely, accurate and comprehensive data to monitor social-emotional outcomes for infants and toddlers participating in EIS.</li> <li>• Provide fiscal support for implementing the TACSEI-EI model of service delivery in early intervention programs including training EIS providers and implementing mentoring and coaching to ensure practices are implemented as intended.</li> <li>• Support EIS provider programs in utilizing child outcomes data to change practices and promote program improvement.</li> </ul>
ECSOL	<ul style="list-style-type: none"> <li>➤ Professional Development</li> <li>➤ Quality Standards</li> </ul>	<ul style="list-style-type: none"> <li>• Participate in the research and development of competencies for EIS providers regarding assessment of the social-emotional skills of infants and toddlers ages birth to three (3) and their families.</li> </ul>
SSIP/TACSEI State Implementation Team	<ul style="list-style-type: none"> <li>➤ Professional Development</li> <li>➤ Accountability</li> <li>➤ Technical Assistance</li> </ul>	<ul style="list-style-type: none"> <li>• Work collaboratively to build a comprehensive early childhood professional development system of training and technical assistance to ensure the EIS workforce is prepared to address and provide services to improve and enhance infants and toddlers social-emotional skills.</li> </ul>

<p>Nevada Interagency Coordinating Council (ICC); (ICC Subcommittees)</p>	<ul style="list-style-type: none"> <li>➤ Governance</li> <li>➤ Finance</li> <li>➤ Accountability</li> </ul>	<ul style="list-style-type: none"> <li>• Research certification options, content and competencies to increase the level of information on assessing social-emotional development in university Early Childhood Developmentally Delayed (ECDD) assessment classes.</li> <li>• Promote collaboration across State programs to assist in linking families and providers with appropriate resources related to addressing their child’s social-emotional skills.</li> </ul>
<p>ECAC; (ECAC Subcommittees)</p>	<ul style="list-style-type: none"> <li>➤ Governance</li> <li>➤ Finance</li> <li>➤ Accountability</li> </ul>	<ul style="list-style-type: none"> <li>• Research certification options, content and competencies to increase the level of information on assessing social-emotional development in university Early Childhood Developmentally Delayed (ECDD) assessment classes.</li> <li>• Include alignment of SSIP goals with Early Childhood System Strategic Plan (Silver State Strong Plan).</li> <li>• Align SSIP goals and activities with Nevada’s Early Childhood Comprehensive System Strategic Plan relative to Professional Development, Social Emotional Health, Community Resources and Wraparound Services to strengthen and maximize resources to support social-emotional outcomes for infants and toddlers and their families.</li> </ul>

## **State Systemic Plan (SSIP) Phase II Component 2: Support for Early Intervention Services (EIS) Program and Provider Implementation of Evidence-Based Practices (EBPs)**

**2(a) Specify how the State will support EIS programs and providers in implementing the EBPs that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.**

During Phase I, some of the issues identified as root causes for the State’s low performance in the area of improved social-emotional outcomes for infants and toddlers participating in early intervention services included the following.

- There is a lack of established processes and instruments for determining if more extensive assessment of social-emotional skills is needed at initial evaluation.
- There is a need for increased awareness of specific tools to assess the social-emotional development of infants and toddlers across providers.
- Not all EIS programs have on-site mentors to support service providers in identifying and addressing social-emotional development of infants and toddlers.
- There is a lack of consistent statewide training across disciplines on the use of evidence-based practices (EBP) that focus on the role and impact of social-emotional development on successful interventions and improved child outcomes.

Nevada will support EIS providers in implementing (EBP in two (2) critical areas identified during the development of Phase I of the SSIP and outlined in the Theory of Action (TOA). This includes: supporting EIS providers in implementing EBP in conducting functional assessments of the social-emotional development of infants and toddlers; the family’s strengths/needs to support their child’s social-emotional development; and implementing EBP in the provision of services to support the child’s social-emotional development. In Phase II of the SSIP, a Logic Model (LM) and Improvement Plan (IP) was developed for each strand to ensure EIS providers have the supports necessary to implement EBP with fidelity in both areas of service delivery.

### Evaluation and Assessment Strand

The TOA identified two (2) strategies for the Evaluation and Assessment Strand. These include the identification of evidence-based assessment instruments to support the service provider’s ability to identify social-emotional skills in infants and toddlers, enhancing professional development resources, and providing ongoing support to ensure evidence-based functional assessments are implemented with fidelity.

The SSIP Phase II Evaluation and Assessment IP identifies key activities and steps that will be taken to support EIS providers in implementing EBP to improve evaluation and assessment practices that will lead to better information about the child’s social-emotional development and the needs of the family in supporting the child’s social emotional development. The following table includes activities identified to ensure improvement in this area and examples of steps to support these activities (refer to IP for complete information).

**Table 2.A. Activities to Improve Social-Emotional Evaluation/Assessment Practices**

The IDEA Part C Office, in conjunction with stakeholders, will identify evidence-based tools and procedures to be utilized in conducting functional assessment of the social-emotional skills and needs of children ages birth to three (3) and the initial and ongoing assessment of families’ needs related to their ability to support their child’s social-emotional development.

Steps to implement this activity include:

- Develop a workgroup across disciplines to research evidence based assessment tools to appropriately assess a child's present level of development in social-emotional skills.
- Collaborate with stakeholders to research evidence based assessment tools to address family needs related to their child's social-emotional development.
- Identify tools and procedures for EBP in assessing the social-emotional development of the child.
- Generate a comprehensive list of appropriate instruments and tools specifically designed to assess the social-emotional skills of infants and toddlers.
- Identify tools and procedures for assessing the needs of the family as well as practices to improve conversations with families on how to better support their child's social-emotional development.
- Improve collaboration across state and federal programs to link families with appropriate resources to address their needs related to supporting their child's development identified through the assessment process (see Collaboration IP).

Improvement Activity:

Develop and implement statewide training and technical assistance (TA) for EIS providers in EBP for administering and interpreting assessment tools and procedures to identify the functional social-emotional needs of infants and toddlers and their families.

Steps to implement this activity include:

- Establish competencies in conducting initial and ongoing functional assessments of the child and family.
- Establish a system of training and technical assistance (TA) that includes coaching and mentoring to:
  - Support EIS providers in the administration and interpretation of assessment tools to assess the child's social-emotional development and family needs related to their child's social-emotional skills;
  - Facilitate the establishment of functional outcomes and strategies in the Individualized Family Service Plan (IFSP) related to supporting the child's social-emotional development; and
  - Support accuracy in Child Outcomes Summary (COS) ratings.
- Dissemination of information on appropriate tools for assessing social-emotional development and training materials.
- Develop proposal and strategic plan outlining necessary components for establishing Regional Training and Technical Assistance Centers to support EIS/Early Childhood Programs in implementing EBP in the assessment of young children and improving social-emotional outcomes for infants and toddlers.
- Develop and implement ongoing processes for providing training for EIS providers on the use of the statewide data system and in the analysis and use of COS data reports for program evaluation and improvement.
- Provide/facilitate training on the COS rating process to ensure inter-rater reliability across the statewide system.

*Note: Refer to the Evaluation and Assessment IP for this strand.*

### Practitioner Knowledge and Skills/Local Provider Support Strand

Nevada will support EIS programs and providers in implementing EBP through expansion of the State's Technical Assistance Center for Social Emotional Intervention (TACSEI). The expansion will focus on strengthening and scaling up the infant-toddler component to support all EIS providers. Start-up activities for this expansion will be funded through the IDEA Part C Office to support infrastructure development and will be sustained through supports for EIS programs.

#### **2(b) Identify steps and specific activities needed to implement the coherent improvement strategies including communication strategies; stakeholder involvement; how identified barriers will be addressed; who will implement activities and strategies; how the activities will be implemented with fidelity; the resources that will be used to implement them; and, timelines for completion.**

The IDEA Part C Office has multiple cross agency initiatives and workgroups currently collaborating to address a comprehensive system of personnel preparation and training. The primary initiative is to ensure staff is prepared to implement EBP to support the social-emotional development of infants and young children through the expansion of the TACSEI Pyramid Model into EIS. This expansion will be implemented through a contract process. Additional details and timelines regarding expansion of the TACSEI-Early Intervention (EI) model are included in the Practitioner Knowledge and Skills/Local Systems Support component of the SSIP IP.

The IDEA Part C Office, the current Statewide TACSEI Coordinator and the Nevada State TACSEI Leadership Team will work collaboratively to build a comprehensive early childhood professional development system of training and TA to ensure the EIS workforce is prepared to address and provide services to improve and enhance infants and young children's social-emotional competence. The current Nevada State TACSEI Leadership Team includes representatives across multiple agencies including the Nevada Department of Education (NDE); the IDEA Part C Office; Nevada Center for Excellence in Disabilities (NCED); Washoe, Elko and Clark County School Districts; Washoe Tribe Head Start; Early Childhood Mental Health; The Children's Cabinet; and Nevada Parents Encouraging Parents (PEP), the State Parent Training and Information Center.

Historically, the State's TACSEI Pyramid Model has primarily been implemented in preschool and child care settings and demonstration sites. TACSEI established a Master Cadre of trainers to support service providers in implementing the Pyramid Model in these settings. A comprehensive plan is being developed to expand this implementation of EBP into the natural environment of infants and toddlers and their families using routine based strategies. This initial plan, as well as progress reports, will be shared with stakeholders on a regular basis through meetings and email communications. The IDEA Part C Office and the Statewide TACSEI Coordinator will initiate the TACSEI-EI expansion by identifying members for the SSIP/TACSEI State Implementation Team which will include individuals from the current Master Cadre of TACSEI trainers. Initial steps to expand the TACSEI Pyramid Model include the following.

- Establish a cross agency state-level SSIP/TACSEI-EI State Implementation Team to guide the process of statewide scaling-up of the TACSEI-EI model; the team will meet on a monthly basis; monthly meeting of the SSIP/TACSEI-EI State Implementation Team will serve as a venue for open and transparent communication between providers, stakeholders and decision makers.
- Establish training plan for EIS master trainers, mentors and coaches to support EIS providers in implementing the model as intended.
- Finalize data collection tools and procedures (e.g. provider pre/post survey, fidelity checklist, etc.) including reliability measures and reporting processes to verify implementation of EBP as intended.
- Establish criteria for EIS cohorts and identify participating programs.

- Implement the model with one (1) TACSEI-EI cohort in each region of the State in year one (1) of Phase III of the SSIP; additional cohorts will be added at least annually to scale-up and maintain implementation of the model statewide.
- Identify the necessary components of the infrastructure to sustain the implementation of the Pyramid Model with fidelity, including the establishment of Regional EIS Training and TA Centers.

Through the use of family coaching, the Pyramid Model practice supports families' abilities to promote their children's social-emotional competence. Implementing the model in the natural environment of the family will increase the abilities of all early intervention professionals to partner with families and to conduct a thorough assessment of the needs of the family relative to supporting the child's social-emotional development. This support will increase the confidence and competence of both the service provider and the family in supporting the child's social-emotional development and result in improved outcomes for the child.

The IDEA Part C office, in conjunction with the SSIP/TACSEI-EI State Implementation Team will work together to establish a scale-up plan for local TACSEI-EI cohorts. The partners responsible for the development of the criteria will include the following.

- The IDEA Part C Office
- Statewide TACSEI Coordinator
- ADSD EIS Program administrators, Program Managers and Supervisors
- Early Childhood Mental Health/Child and Adolescent Mental Health Services

The monthly meetings of the SSIP/TACSEI-EI State Implementation Team will be the venue for open and transparent communication among providers, stakeholders and decision makers. ADSD holds monthly telephone conferences with State and community agencies and the IDEA Part C Office staff. There is also a monthly IDEA Part C Office TA call with all early intervention programs.

In Nevada, the lead agency for the statewide early intervention system is the IDEA Part C Office, which is housed within the Department of Health and Human Services (DHHS), Director's Office. The EIS provider programs, both State and community agencies, are administered through the ADSD. Because the implementation of the SSIP/TACSEI-EI initiative relies on collaboration between the IDEA Part C Office and ADSD, the IDEA Part C Office has been diligent in including ADSD administrators, managers, supervisors and direct service staff in all workgroups and stakeholder meetings regarding the SSIP.

#### Local Implementation

Local SSIP/TACSEI-EI Implementation Teams will be developed through the TACSEI-EI cohort. Each cohort will participate in training and receive support to provide EIS consistent with the TACSEI Pyramid Model. They will also collect required data to verify implementation of EBP as intended and report progress to the Local SSIP/TACSEI-EI Implementation Team. These teams will meet on a monthly basis to evaluate the cohort's progress and report that progress to the SSIP/TACSEI-EI State Implementation Team. The SSIP/TACSEI-EI State Implementation Team will utilize local input to make any needed adjustment to procedures, materials or supports.

Currently, the Master Cadre of TACSEI trainers for EIS providers in the southern region of the State includes only one (1) individual employed by the State-operated early intervention program. There are, however, personnel from both the State and community programs that have been trained in the Pyramid Model. This group may serve as a foundation for the TACSEI-EI expansion.

A collaborative team of EIS and early childhood mental health professionals formed the Emotional Assessment and Support Team (EAST) in the northern region of the State. In 2011, personnel from EIS, TACSEI and Early Childhood Mental Health worked collaboratively to support the development of social-emotional competence in infants, toddlers and their caregivers using Pyramid Model practices. This initial group of early intervention professionals led to the collaboration with Early Childhood Mental Health professionals to support children and families with intensive needs, especially for young children referred for services through the Child Abuse Prevention and Treatment Act (CAPTA). The collaboration led to informal professional development opportunities about screening and assessment tools for social-emotional competence, relationships and attachment, writing functional and measurable goals, case consultation, and compiling resources for information, services, and supports. The IDEA Part C Office, the EAST Team, ASD, Maternal and Child Health (MCH) and Child and Adolescent Mental Health will work collaboratively to promote the expansion of the use of local social-emotional teams based on the EAST model in other regions of the State.

#### Sustainability:

The IDEA Part C Office and the Statewide TACSEI Coordinator will work collaboratively with other partner agencies including the ASD EIS, and Child and Adolescent Mental Health to continue to support and expand the number of providers trained to implement EBP using the Pyramid Model strategies specifically designed to improve the social-emotional development of infants and young children. This will include a sustainable system of ongoing mentoring and coaching to ensure the model is implemented with fidelity. Fiscal support for sustaining the implementation of the TACSEI-EI model will be addressed through program budgeting processes.

Implementing, scaling-up and sustaining EBP in the provision of EIS will require the allocation, or reallocation, of funds to support the required changes in practice across the statewide system. Critical activities for sustaining and scaling up the use of EBP will require close collaboration and fiscal investment (including personnel time) across agencies to support EIS providers and ensure improved social-emotional outcomes for infants and toddlers receiving EIS include the following.

- Expansion of the TACSEI Pyramid Model
- Expansion of the EAST project
- Development/revision of surveys and other data collection processes
- Development of support materials
- Training and TA including mentoring and coaching for direct service providers
- Monitoring and general supervision, including evaluation of progress in implementing IPs

#### Training and Technical Support (TA) for Local Service Providers

Providing appropriate training and technical support to EIS providers will increase the number of professionals with expertise in supporting infants, toddlers and their families with social-emotional concerns. Implementing training in EBP through the TACSEI-EI project will also promote preventative practices by decreasing the need for more intensive services as well as developing appropriate functional outcomes for these children and their families.

Workgroups will be established to develop the Child Outcomes Module in the IDEA Part C Office Evidence-Based Practices Guidelines (EBPG) and revision of the IDEA Part C Office Annual Family Survey. These workgroups will require the participation of parents, the IDEA Part C Office, ASD, State and community EIS providers, and Nevada Interagency Coordinating Council (ICC) members. Access to the Child Outcomes Module will support families and EIS providers in understanding the importance of EBP in successfully addressing the social-emotional development of young children. Data from the IDEA Part C Office Annual Family Survey will further



inform providers about the families' confidence in their ability to support and enhance their children's social-emotional development and lead to more meaningful conversations with families. These activities are critical to measuring both provider and family confidence in supporting the social-emotional development of the child and for the dissemination of information regarding progress in attaining intended outcomes in this area.

The Child Outcomes Module in the EBP will address key components of the provision of EIS consistent with the TACSEI Pyramid Model and other EBP to support the social-emotional development of infants and toddlers. This resource will provide ongoing TA and support for service providers and families regarding key elements of supporting the social-emotional development infants and toddlers including the following.

- Procedures for conducting functional assessment of the social-emotional development of infants and toddlers
- Understanding typical social-emotional development
- Strategies for enhancing meaningful communication between families and providers
- Sharing of important information between provider and family regarding the child's social-emotional development
- Development of functional outcomes and strategies in the IFSP to support the child's social-emotional development
- Improve provider ability to identify children's social emotional needs and increase data quality in child outcomes ratings.

Evidence-based modules, training kits, and other tools, such as PowerPoint presentations and video clips available through other resources, will be utilized for statewide training and TA. Examples include the following.

- Center on the Social Emotional Foundations for Early Learning: Modules 1, 2, 3 & 4
- Center to Mobilize Early Childhood Knowledge: CONNECT Module on Communication for Collaboration
- Division of Early Childhood (DEC) Recommended Practices
- National Center for Systemic Improvement (NCSI) Social-Emotional Collaborative

Development and implementation of the comprehensive plan for ongoing training and TA for coaches, mentors and early intervention providers is critical to ensure the TACSEI-EI Pyramid Model is implemented consistently and with fidelity. This will require ongoing fiscal support for the following personnel and activities.

- TACSEI-EI cohort site personnel
- Additional TACSEI Master Cadres, trainer and coaches in early intervention
- SSIP/TACSEI Implementation Team
- System for data collection

**2(c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the State Education Agency (SEA)) to support EIS providers in scaling up and sustaining the implementation of EBPs once they have been implemented with fidelity.**

The IDEA Part C Office has collaborated with the following agencies and organizations during the development of Phase II of the SSIP: TACSEI Coordinator and personnel; ADSD Administration; Nevada Institutions of Higher Education (IHE) Programs Leadership; State Child Mental Health Agencies; EIS Program Management (State and Community Partner programs); EIS Providers; NDE, ICC; Nevada Early Childhood Advisory Council (ECAC); Nevada Early Childhood Systems of Learning (ECSOL); Stakeholder workgroups including ICC representation and

families of infants and toddlers. The IDEA Part C Office will continue to work with these and other key stakeholders within the Department of Health and Human Services (DHHS) and other programs and initiatives to scale up and sustain the provision of EBP to support the social-emotional development of infants and toddlers. A summary of how key agencies/programs will be involved in scaling-up and sustaining the implementation of EBP is included Table 2.B. below.

**Table 2.B. Areas for Agency Collaboration for SSIP Implementation**

State Agency/Initiative	Areas of Involvement Collaborating with the IDEA Part C Office to:
ADSD	<ul style="list-style-type: none"> <li>• Develop and maintain a statewide data system that provides access to timely, accurate and comprehensive data to monitor social-emotional outcomes for infants and toddlers participating in early intervention services.</li> <li>• Designate representative to participate on the SSIP/TACSEI State Implementation Team.</li> <li>• Provide fiscal support for implementing the TACSEI-EI model of service delivery in early intervention programs including training EIS providers and implementing mentoring and coaching to ensure practices are implemented as intended.</li> <li>• Support EIS providers in utilizing child outcomes data to change practices and promote program improvement.</li> <li>• Participate in the development and review of the Child Outcomes Module in the EBPG. Develop and implement ongoing process for providing data system training for EIS providers in the analysis and use of child outcomes data reports.</li> <li>• Participation of the EIS Programs (State and Community Partners) in review of processes; provide feedback; support program implementation of the updated IDEA Part C Office Accountability and Monitoring Processes.</li> <li>• Participate in collaborative planning to address identified gaps in resources.</li> <li>• Assist in the dissemination of information to stakeholders, families, service providers and the public to increase awareness of the State’s purpose in implementing the SSIP and the importance of the use of EBP in supporting the social-emotional development of infants and toddlers.</li> <li>• Participate in the SSIP evaluation process and in the dissemination of information regarding the State’s progress in implementing the SSIP.</li> </ul>
Division of Child and Family Services (DCFS) Infant Mental Health Services	<ul style="list-style-type: none"> <li>• Establish collaborative relationship with local EIS providers to support families and provide training for EIS personnel.</li> <li>• Designate representatives to participate on the SSIP/TACSEI State Implementation Team.</li> <li>• Assist in the dissemination of information to stakeholders, families, service providers and the public to increase awareness of the State’s purpose in implementing the SSIP and the importance of the use of EBP in supporting the social-emotional development of infants and toddlers.</li> </ul>

ICC ECAC	<ul style="list-style-type: none"> <li>• Assist in the dissemination of information to stakeholders, families, service providers and the public to increase awareness of the State’s purpose in implementing the SSIP and the importance of the use of EBP in supporting the social-emotional development of infants and toddlers.</li> <li>• Promote collaboration across State programs to assist in linking families and providers with appropriate resources related to addressing children’s social-emotional skills.</li> <li>• Include alignment of SSIP goals with Early Childhood System Strategic Plan (Silver State Strong Plan).</li> <li>• Align SSIP goals and activities with Nevada’s Early Childhood Comprehensive System Strategic Plan relative to Professional Development, Social Emotional Health, Community Resources and Wraparound Services to strengthen and maximize resources to support social-emotional outcomes for infants and toddlers and their families.</li> </ul>
Nevada Institutions of Higher Education (IHE)	<ul style="list-style-type: none"> <li>• Increase the emphasis on assessing and addressing the social-emotional development of infants and toddlers in university Early Childhood Developmentally Delayed (ECDD) coursework.</li> <li>• Participate in ECAC Strategic Planning Systems Subcommittee addressing areas consistent with SSIP goals.</li> </ul>
NDE Office of Early Learning and Development	<ul style="list-style-type: none"> <li>• Work Collaboratively with the Silver State Strong Plan.</li> <li>• Review/Share available data from current needs assessments.</li> <li>• Collaborate with the IDEA Part C Office on functional outcomes for transition planning.</li> <li>• Support process of updating the Early Childhood System Strategic Plan (Silver State Strong Plan) including the informational (petal) graphic reflecting key agencies/programs related to early childhood supports and services.</li> <li>• Promote parent and EIS provider participation on local councils, committees and consortiums related to resource development/expansion for supporting the social-emotional development of young children.</li> </ul>
ECSOL	<ul style="list-style-type: none"> <li>• Participate in the development of competencies for EIS providers regarding assessment of the social-emotional skills of infants and toddlers ages birth to three (3) and their families .</li> <li>• The IDEA Part C Office, ICC and ECAC Subcommittees will research certification options, content and competencies to increase the level of information on assessing social-emotional development in university Early Childhood Developmentally Delayed (ECDD) assessment classes. Note: this was formerly titled Early Childhood Special Education (ECSE).</li> </ul>

## State Systemic Plan (SSIP) Phase II 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(s) for infants and toddlers with disabilities and their families.**

Nevada’s Evaluation Plan is designed to measure both the implementation of the key activities outlined in the Improvement Plan (IP) and the status of achieving the intended outcomes. The evaluation plan includes measures relative to the four (4) strands identified in the Theory of Action (TOA).

Logic Models (LM) (see Attachment A) were established for each strand of the TOA to ensure the process of implementation of the SSIP activities have a logical flow, are clearly aligned to the desired outcomes and helped to identify any gaps in the overall flow from the actions needed to the desired outcomes. The LM reflects the specific goals and rationale for each strand included in the TOA and identifies inputs/resources to support implementation of the activities to achieve the outcomes in the TOA. The resources include those identified in Phase I of the SSIP as well as others identified during the process of developing Phase II. The LM also reflects the broad improvement strategies identified in Phase I associated with each strand and identifies projected outputs resulting from the implementation of activities needed to implement the broad improvement strategies as well as the intended outcomes. The LM was used to support the development of evaluation questions relative to whether the outcomes have been met, the specific evidence (e.g., performance indicator) needed to positively respond to the question(s) for each outcome and the data required to verify that each outcome has been met. The evaluation plan addresses all outcomes – short-term, intermediate and long-term.

Evaluation Stakeholder Workgroup:

The IDEA Part C Office convened a stakeholder workgroup to address the evaluation component of the SSIP on February 9, 2016. The workgroup was structured to include family representatives, managers from early intervention service (EIS) providers as well as individuals who had experience and expertise in systems evaluation. Members were also selected to include individuals from other agencies or community organizations that play a key role in the overall system of services for young children. Stakeholder participants in this group are listed in the table below.

**Table 3.A. SSIP Evaluation Plan Stakeholder Workgroup**

Participant	Role	Agency/Organization
Aimee Hadleigh	Parent	Nevada Interagency Coordinating Council (ICC) Member
Ingrid Mburia	Health Program Specialist	Division of Public and Behavioral Health, Maternal and Child Health
Janelle Mulvenon	Early Intervention Service (EIS) Provider, Regional Manager	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, Northwest, Reno
Julie Ortiz	Early Intervention Service Provider, Manager	Advanced Pediatric Therapies (APT) - Reno
Kyra Morgan	Biostatistician	Nevada Office of Public Health Informatics and Epidemiology (OPHIE)
Luana Ritch	Quality Assurance	Nevada Division of Public and Behavioral Health, Quality Assurance/Program Improvement
Randi Humes	Management Analyst	Aging and Disability Services Division (ADSD), Nevada Early Intervention Services, South, Las Vegas
Wei Yang	Director	Center for Health Statistics and Surveys, University of Nevada – Reno (UNR)

The workgroup was asked to review the LMs developed for each of the four (4) strands of the TOA. The workgroup was also asked to determine whether there was a logical connection between the activities and outcomes and identify any gaps between the two areas. The workgroup was then asked to recommend steps needed to implement each strategy/activity and determine whether any of the root causes identified in Phase I had not been addressed. The workgroup drafted evaluation questions, performance indicators and data sources/methods for each evaluation question and measures key to evaluating SSIP outcomes.

Input from the workgroup was compiled and reviewed by the IDEA Part C Leadership team. Each of the four (4) LM outcomes and IP components were updated based on the compiled feedback. Sections of the SSIP evaluation plan relative to intended outcomes (see the Introduction section of this document for a complete list of intended outcomes) were developed based on the work of this stakeholder workgroup. Table 3.B. below provides an example of the section of the evaluation plan for outcomes associated with the evaluation and assessment strand that demonstrates the alignment of the SSIP evaluation plan to the TOA and other components of the SSIP including measures for short, intermediate and long-term outcomes. Attachment C includes the compiled evaluation plan for all outcomes and IPs.

**Table 3.B. Example of Evaluation and Assessment Strand Outcomes Evaluation**

TOA Strategies	Broad Improvement Strategy/Activity	Intended Outcomes		How will we know	Measurement/ Data Collection Method	Projected Initiation	Projected Completion
identifies evidence-based assessment instruments  ...enhances professional development resources and provides ongoing support to ensure evidence-based functional assessments are implemented with fidelity	Activity 2. Develop and Implement Statewide Training and Technical Assistance for EIS Providers in Evidence-Based Practices (EBP) for Administering and Interpreting Assessment Tools and Procedures to Identify the Functional Social-Emotional Needs of Infants and Toddlers and Their Families	Short Term Outcome	Service providers will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers	The number of providers with knowledge and skills to accurately determine child will increase	Child Outcome Summary (COS) Competency Checklist	1/1/2017	Ongoing
		Intermediate Outcome	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child	After providers receive training, IFSP outcomes addressing children's social-emotional needs increase	Program Monitoring/Sample IFSPs of Children with Social-Emotional Concerns	7/1/2016	Ongoing
		Long-Term Outcome (SIMR)	Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships)	The percent of infants and toddlers with IFSPs exiting early intervention having received at least 6 months of services demonstrating improved positive social-emotional skills (including social relationships) will increase.	Child Outcomes Data	7/1/2016	7/1/2020

The LM and the outcomes section of the evaluation plan developed with the evaluation stakeholder workgroup was used to support the ongoing development of an IP for each strand of the TOA. Each IP aligns the strategies/activities identified for each strand and steps to implement the activities. It also reflects specific alignment of resources to activities, entities responsible, timelines and involvement of other agency programs and initiatives in implementing the activities. The template utilized in developing the outcomes section of the evaluation plan was used to develop the plan for evaluating the implementation of SSIP activities.

Questions were developed to evaluate whether the identified activities within each of the four (4) IPs are implemented as expected and within specified timelines, the evidence needed to positively respond to the question(s) for each activity (e.g., performance indicator) and the data required to verify each outcome has been met. The IDEA Part C Office Leadership team conducted a feasibility study of all proposed activities across the four (4) strands to determine which activities would have the highest impact on achieving the SiMR. Activities were considered based on high feasibility/high impact; low feasibility/high impact; high feasibility/low impact; low feasibility/low impact. Activities indicated as having a high feasibility/high impact were established as the priority activities in the IPs and were the activities included in the implementation evaluation plans.

Table 3.C. below provides an example of the section of the evaluation plan measuring the implementation of improvement activities associated with the evaluation and assessment strand. This example demonstrates the alignment of the SSIP evaluation plan to the TOA, broad improvement strategies identified in Phase I and other components of the SSIP to the IP activities and steps to implement those strategies. Again, Attachment C includes the compiled evaluation plan for all outcomes and implementation plans.

**Table 3.C. Example of Evaluation of Implementation of SSIP Activities**

TOA Strategies	Broad Improvement Strategy/ Activity	Steps to Implement Activities	Intended Outcomes		How will we know	Measurement/ Data Collection Method	Projected Initiation	Projected Completion
identifies evidence-based assessment instruments  ...enhances professional development resources and provides ongoing support to ensure evidence-based functional assessments are implemented with fidelity	Activity 2. Develop and Implement Statewide Training and Technical Assistance for EIS Providers in Evidence-Based Practices for Administering and Interpreting Assessment Tools and Procedures to Identify the Functional Social-Emotional Needs of Infants and Toddlers and Their Families	Competencies for EIS providers for assessment of the social-emotional skills of infants and toddlers ages birth-to-three and their families are approved by the IDEA Part C Office, rolled-out to all EIS providers and published on the IDEA Part C Office website.	Short Term	Service providers will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers	Competencies are approved and published on IDEA Part C Office Website as planned	Documentation of Distribution/ IDEA Part C Office Website.	6/1/2016	12/31/2016
			Inter-mediate	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child			7/1/2016	Ongoing
			Long-Term (SIMR)	Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships)			7/1/2016	7/1/2020

The IDEA Part C Office will contract with an external entity to implement the SSIP evaluation plan. The evaluation plan reflected in this section will establish the scope of work for the contractor. All data collection and reporting will be conducted through the contract process, and timelines for reports will be as indicated in the SSIP.

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

Information related to the process and results of implementing the improvement plan will be provided to the IDEA Part C Office by the contractor. The contractor will be required to meet with the IDEA Part C Office on at least a quarterly basis. Reports provided by the contractor will be distributed to all EIS programs by the IDEA Part C Office within two (2) weeks from the date the report is received. Reports will be reviewed with the ICC and the Early Childhood Advisory Council (ECAC) at their next scheduled quarterly meeting and will be made available on the IDEA Part C Office website. The IDEA Part C Office will solicit and compile feedback from stakeholders regarding the results of both the implementation evaluation and outcomes evaluation to make mid-course adjustments to the implementation plans and the evaluation plans. Evaluation results and data will be shared with the ICC as the information becomes available.

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

The full evaluation plan, including evaluation of both implementation of the improvement plans for each of the four (4) strands in the TOA and the intended outcomes based on the implementation of the plan is included in Attachment C. The evaluation plan includes evaluation questions, performance indicators and data/methods for each activity and outcome that are being evaluated. Data to support the evaluation process will be gathered from data system reports, data collected through implementation of the TACSEI-EI expansion, program monitoring, and family and provider surveys. The evaluation plan also establishes measurement intervals for each evaluation component. Data will be gathered and analyzed by the contractor for all providers participating in a cohort (at the cohort and EIS provider level) and on a statewide basis and reported to the IDEA Part C Office. The IDEA Part C Office will also work with the contractor to develop a detailed analysis plan.

In addition to the global evaluation plan for the SSIP, the contract for expansion of the TACSEI project will include working with the SSIP/TACSEI EIS Implementation Team, including IDEA Part C Office representation, to complete the following activities.

- Finalize tools and processes for data collection to be utilized by all cohort participants to verify EBP are being implemented as intended;
- Establish schedules and formats for compiling the data and reporting at the cohort level and to the SSIP/TACSEI EIS State Implementation Team to support decision making (e.g. targeting professional-development needs or identifying providers who are proficient and may serve as mentors or coaches to their peers, etc.); and
- Identify specific data needed to address the SSIP evaluation and the schedule for providing data to the SSIP evaluation contractor.

**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.**

Implementation of the SSIP evaluation plan will be a collaborative effort and will be consistent across all cohorts. Evaluation activities will be implemented at all levels and will occur based on the measurement intervals established in the evaluation plan.

Each cohort local implementation team will review their data to determine whether there is need to make adjustments in implementing practices. Cohort data reports will be submitted to, and reviewed by, the SSIP/TACSEI-EI State Implementation Team at least quarterly, or more frequently if needed, depending on the activity, to determine whether changes are needed prior to expanding to other cohorts.

The IDEA Part C Office Leadership team will also review the data reports to evaluate the effectiveness of implementation of EBP at the cohort and systems level and the progress toward achieving the short, intermediate and long-term outcomes. Evaluation results data (both the effectiveness of implementation and the impact of implementation) will be used to make necessary mid-course adjustments to the improvement plan activities at the state and cohort level, as well as to the evaluation plan as appropriate.

If anticipated progress is not being made, the IDEA Part C Office will conduct further inquiry to identify the underlying causes of, or barriers to, progress. The results of all inquiry and analysis will be documented and shared with key stakeholders through teleconferences and ICC meetings. Strategies will be developed and implemented to address the issues identified. If appropriate, the improvement and evaluation plans will be revised to reflect any required changes.



## Phase II Technical Assistance and Support

Nevada has received extensive support from technical assistance (TA) providers throughout the development process of Phase II of the SSIP. Support was provided through on-site facilitation of stakeholder workgroups, numerous telephone conferences, supporting the IDEA Part C Office team in developing the Logic Models and Improvement Plans, reviewing documents and providing resources and examples to support the development process. The TA center consultants have been an invaluable resource to the State. Nevada's assigned contact with the U.S. Office of Special Education Programs (OSEP) has also been available and provided support through monthly conference calls. The IDEA Part C Office Leadership Team has also participated in OSEP's monthly TA calls.

Key areas where it is anticipated Nevada will need technical support to successfully implement the SSIP going forward include the following.

- Developing the statewide data system to ensure efficiency in obtaining data reports to support SSIP implementation, evaluation, program monitoring, and accountability;
- Building Nevada's professional development infrastructure;
- Working with the evaluation contractor to develop a detailed analysis plan;
- Supporting early intervention service (EIS) programs in implementing evidenced-based practices (EBP) and development of effective processes for verifying EBP are implemented as intended; and
- Facilitating ongoing stakeholder involvement in the implementation of the SSIP.

# Evaluation and Assessment Logic Model

April 1, 2016

Nevada SSIP, Phase II  
Attachment A

**Overarching Goal:** Support the implementation of evidence-based assessment instruments to support the service provider's ability to identify social-emotional skills in infants and toddlers.

PRIORITIES (rationale)	INPUTS (resources)	ACTIVITIES	OUTPUTS	OUTCOMES		IMPACT
				Short Term	Intermediate Term	Long Term
<p>Identify evidence-based assessment instruments to support the service provider's ability to identify social-emotional skills in infants and toddlers.</p> <p>Enhance professional development resources and provide ongoing support to ensure evidence-based functional assessments are</p>	<ul style="list-style-type: none"> <li>• IDEA Part C Office Team</li> <li>• Early Intervention Service (EIS) Provider Agencies</li> <li>• Parents of Children with Disabilities</li> <li>• Assessment Leadership Team</li> <li>• Nevada Interagency Coordinating Council (ICC) and Early Childhood Advisory Council (ECAC)</li> <li>• Early Childhood Systems of Learning (ECSOL) Leadership Team</li> <li>• Institutes of Higher Education</li> <li>• Aging and Disability Services Division</li> </ul>	<p>The IDEA Part C Office, in conjunction with stakeholders, will identify evidence-based tools and procedures to be utilized in conducting functional assessment of the social-emotional skills and needs of children ages birth to 3 and the initial and ongoing assessment of families' needs related to their ability to support their child's social-emotional development.</p> <p>Develop and implement statewide training and technical assistance for EIS providers in evidence-based practices for administering and interpreting assessment tools and procedures to identify the functional social-</p>	<p>A list of approved evidence-based tools and procedures for assessing the social-emotional skills of infant and toddlers is available to all EIS service providers.</p> <p>A list of tools and procedures that support the assessment of family's needs related to their ability to support their child's social-emotional development will be available to EIS providers and families.</p> <p>Multiple resources to support the effective implementation of evidence-based processes and tools are available to EIS providers and families</p>	<p>Service provider's confidence and competence level will improve when identifying the social emotional needs for infants and toddlers.</p> <p>Service providers will have an increase in their knowledge and skills to consistently and accurately determine child outcome measurement ratings for infants and toddlers.</p> <p>Sensitive, supportive relationship-based conversations with families will occur and will provide</p>	<p>Service providers' use of evidence-based practices in assessing the social-emotional skills and needs of infants and toddlers will improve, be sustainable and implemented with fidelity.</p> <p>IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.</p> <p>Families will be better able to support and enhance their</p>	<p><b>SiMR:</b> Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships).</p>

implemented with fidelity.

- (ADSD) - Administration and Regional Managers
- Nevada Department of Education (NDE)
  - Nevada Registry
  - Stakeholders

emotional needs of infants and toddlers and their families.

relative to assessing the functional social-emotional development of young children.

Team(s) of individuals with expertise in the functional assessment of the social-emotional development of infants and toddlers will be available to EIS providers and families of infants and toddlers.

meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.

child's social-emotional skills and overall development/

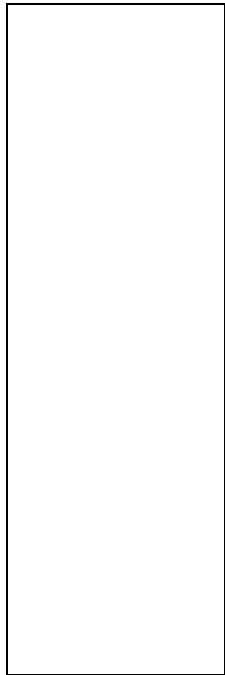
# Practitioner Knowledge and Skills/Local System Support Logic Model

April 1, 2016

**Overarching Goal:** Develop a statewide system that supports the comprehensive and sustainable professional development system for evidenced-based practices that will be implemented with fidelity.

PRIORITIES (rationale)	INPUTS (resources)	ACTIVITIES	Outputs	OUTCOMES		IMPACT
				Short Term	Intermediate Term	
<p>To enhance providers' knowledge and skills to effectively determine and identify social-emotional needs of infants and toddlers and implement Evidence-Based Practices (EBPs) with fidelity.</p>	<p>IDEA Part C Office</p> <p>Nevada Technical Assistance Center for Social-Emotional Intervention (TACSEI)</p> <p>SSIP/TACSEI EIS Implementation Team</p> <p>Parents of Children with Disabilities</p> <p>Aging and Disability Services Division (ADSD) EIS Administration</p>	<p>Expand State TACSEI focus for early intervention home and community-based services, including mentors and coaches to ensure EIS providers are utilizing evidence-based practices in addressing the social-emotional needs of infants and toddlers.</p> <p>Develop proposal and strategic plan outlining necessary components for establishing Regional Training and Technical Assistance Centers as part of the expansion of current TACSEI Project.</p> <p>Revise IDEA Part C Office Evidence-Based Practices Guidelines to include a Child Outcomes Module addressing the</p>	<p>EI programs will identify Master Trainers to scale-up and sustain ongoing training, coaching and mentoring to ensure EBP are being implemented with fidelity.</p> <p>Regional Multidisciplinary (MD) cross-agency teams are available to all EIS providers and provide training and TA for implementing EBP to address the social-emotional needs of infants and toddlers.</p>	<p>Service providers' working knowledge and understanding of the use of EBP to support the social-emotional development of infants and toddlers will increase.</p> <p>There will be an increase in service providers' knowledge and ability to communicate with families about the role and impact of social-emotional development on successful interventions.</p>	<p>Service providers' use of evidence-based practices to support the social-emotional development of infants and toddlers will improve, be sustainable and implemented with fidelity.</p> <p>IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.</p> <p>Families will be better able to</p>	<p><b>SiMR:</b> Infants and toddlers exiting EI services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships).</p>

	<p>EIS Providers – State and Community Partners</p> <p>Early Childhood Personnel Center (ECPC)</p> <p>Nevada Early Childhood System of Learning (ECSol) Leadership Team</p> <p>Early Childhood Advisory Council (ECAC) and Subcommittees</p> <p>SSIP Stakeholder Workgroups</p> <p>Early Head Start Collaboration Office</p> <p>DEC Recommended Practices</p> <p>National Technical</p>	<p>provision of early intervention services to support the social-emotional development of infants and toddlers consistent with the TACSEI Model.</p>	<p>IDEA Part C Office Evidence-Based Practices Guidelines are developed and disseminated to EIS Providers.</p>		<p>support and enhance their child’s social-emotional skills and overall development.</p>	
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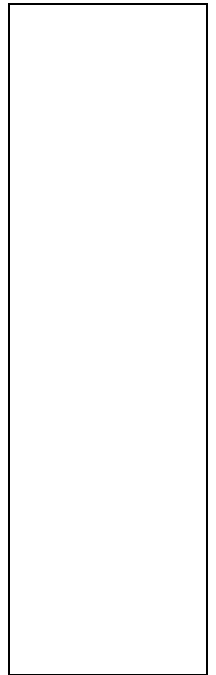
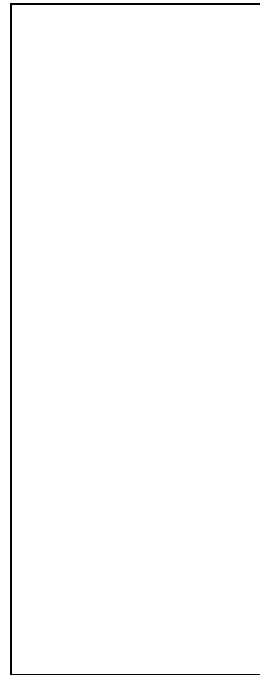
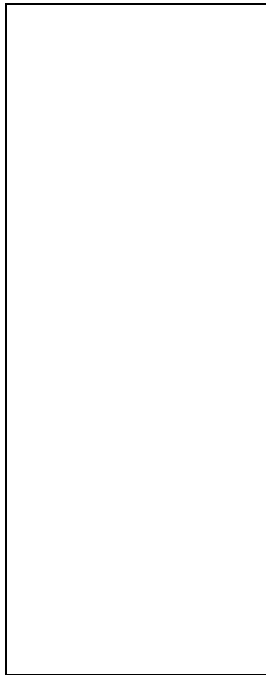
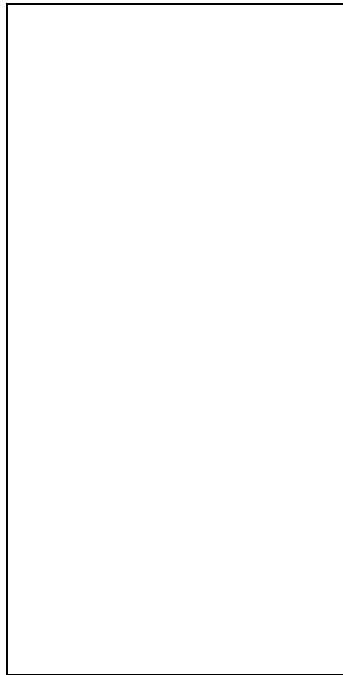
Assistance (TA)  
Support

Child and  
Adolescent  
Mental Health

Institutions of  
Higher  
Education (IHE)

Nevada  
Department of  
Education  
(NDE)

State Evidence-  
Based Practices  
Guidelines



# State and Local Provider Collaboration Logic Model

April 1, 2016

**Overarching Goal:** Increase statewide collaborations across early childhood initiatives to ensure all service providers have knowledge of how to access resources in the area of promoting, supporting and improving social-emotional skills for children and families.

PRIORITIES (rationale)	INPUTS (resources)	ACTIVITIES	OUTPUTS	OUTCOMES		IMPACT
				Short Term	Intermediate Term	
<p>Establish strong collaborative relationships across Early Childhood Initiatives within the State to support Early Intervention Services (EIS)/ Early Childhood Providers in implementing and scaling up evidenced-based practices (EBP) and identifying resources to support families in supporting their child's social-</p>	<ul style="list-style-type: none"> <li>• National Technical Assistance (TA) Centers</li> <li>• Nevada Interagency Coordinating Council (ICC)</li> <li>• Nevada Early Childhood Advisory Council (ECAC) and Subcommittee</li> <li>• Parents of Infants and Toddlers with Disabilities</li> <li>• Nevada Parents Encouraging Parents (PEP)</li> <li>• Nevada Governor's Council on Developmental Disabilities (DD</li> </ul>	<p>Identify specific areas for collaboration across state and federal programs at both the state and local level that are most relevant to linking families with appropriate resources related to addressing their child's social-emotional development.</p> <p>Align SSIP goals and activities with Nevada's Early Childhood Comprehensive System Strategic Plan relative to Professional Development, Social Emotional Health, Community Resources and Wraparound Services to strengthen and maximize resources to support social emotional outcomes for infants and toddlers and their families.</p>	<p>The most critical areas of need relative to supports and services for families and service providers to address children's social-emotional health and development will be identified, documented and communicated to state and local stakeholders.</p> <p>Plans (formal and/or informal) are developed to address areas of need at the service provider level through interagency leadership teams.</p> <p>The ECAC members and subcommittees will finalize and distribute the informational graphic (Petal Graphic)</p>	<p>Local communities and service providers have knowledge of the system's resources for supporting the social-emotional needs of children and families and will engage in strategic planning to address areas of need.</p> <p>Service providers have knowledge how to access resources relative to the use of EBP and wrap-around supports to address the</p>	<p>The use of evidence-based practices will improve and be implemented with fidelity to reach IFSP goals, strategies and outcomes to meet the social-emotional needs of the child and family.</p> <p>Families will be better able to support and enhance their child's social-emotional skills and overall development.</p>	<p><b>SiMR:</b> Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships)</p>

emotional development.

- Council)
  - Nevada Division of Child and Family Services - Child and Adolescent Mental Health Services
  - Silver State Strong Strategic Plan Subcommittees
  - Nevada Office of Early Care and Education; Child Care Development Plan
  - Head Start Collaboration Office
  - DHHS, IDEA Part C Office/Project Assist
  - DHHS, Aging and Disability Services Division (ADSD) Programs; Nevada Early Intervention Services (NEIS)

reflecting early childhood resources across agencies and programs.

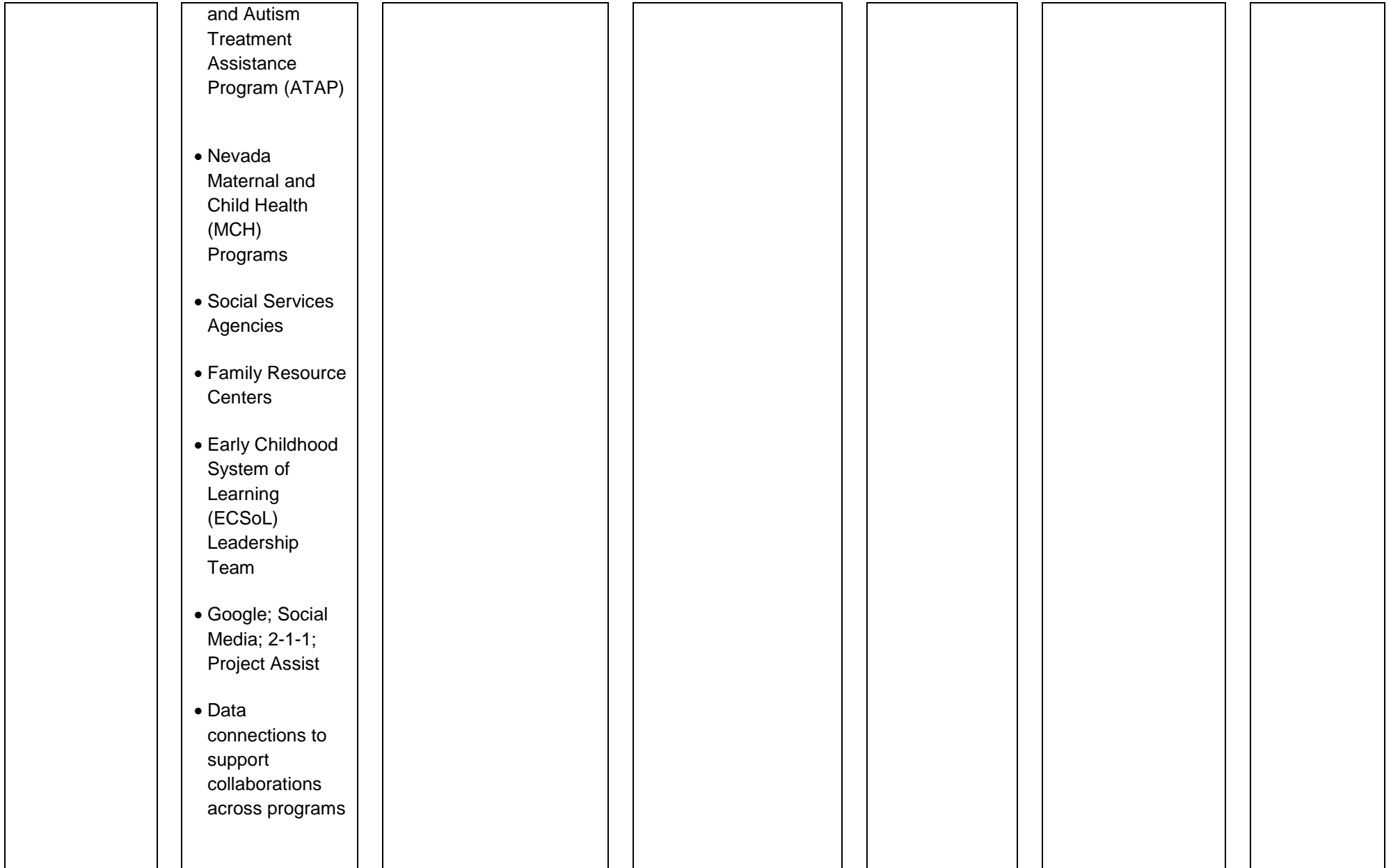
Models of collaboration shown to be effective in building strong networks that address the social-emotional needs of infants and toddlers with disabilities and their families in other states/locations are identified and evaluated to determine whether they can be adapted to support the identification or expansion resources for specific areas of the state.

Regional teams will provide training and technical assistance to support providers and families in developing intervention strategies and accessing local resources to address the social-emotional needs of the child.

social emotional needs of children and families.

Sensitive, supportive, relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.





## Data System and Accountability Logic Model

April 1, 2016

**Overarching Goal:** Improve the capacity of the statewide Early Intervention Data System to provide qualitative and quantitative reports to support the evaluation of program performance and identify areas for targeted training and technical assistance for improvement planning at the state and local levels.

PRIORITIES (rationale)	INPUTS (resources)	ACTIVITIES	Outputs	OUTCOMES		IMPACT  Long Term
				Short Term	Intermediate Term	
<p>Development of a Comprehensive Data Gathering and Reporting System With the Capacity to Support Effective Program Planning, Monitoring and Overall Systems Improvement</p>	<ul style="list-style-type: none"> <li>• Nevada Department of Health and Human Services (DHHS), Director's Office, IDEA Part C Office</li> <li>• Parents of Infants and Toddlers with Disabilities</li> <li>• DHHS Office of Public Health Information and Epidemiology</li> <li>• Nevada DHHS Aging and Disability Services</li> </ul>	<p>Enhance the IDEA Part C Office Early Intervention Data System to support additional analysis and reporting of child outcomes data at all levels.</p> <p>Provide/facilitate training on child outcome ratings process to ensure inter-rater reliability across statewide system.</p> <p>Develop and implement on-going process for providing data system training for EI providers in the analysis and use of child outcomes data reports,</p>	<p>Data and reports are available from the early intervention data system at the state and program level for analysis and evaluation of program performance and impact of EI services.</p> <p>Comprehensive Training and TA is provided to support EIS providers in entering child outcomes data and generating and utilizing reports for program improvement.</p> <p>Information is available to</p>	<p>Local providers will have a better understanding of how to complete child outcomes ratings and how to use child outcomes data for program improvement</p> <p>Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development.</p> <p>The IDEA Part C Office will have access to systems data and be better able to monitor and support the full implementation of evidence-based practices.</p>	<p>Local providers will use high quality data to improve program performance and identify areas for coaching and TA to change practice.</p> <p>IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.</p> <p>Families will be better able to support and enhance their child's social-emotional skills and overall development.</p>	<p><b>SiMR:</b> Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships).</p>

	<p>Division (ADSD)</p> <ul style="list-style-type: none"> <li>• Nevada Department of Education (NDE), Office of Early Learning and Development</li> <li>• The Center for IDEA Early Childhood Data Systems (DaSy) and IDEA Data Center (IDC) Technical Assistance (TA) Providers</li> </ul>	<p>Update IDEA Part C Office accountability and monitoring processes to include procedures for evaluating fidelity in implementation of EBP and improved social-emotional outcomes for infants and toddlers with disabilities.</p>	<p>develop strategic plan to address resource and budgetary needs for linking early childhood data in order to verify improved child outcomes over time.</p>			
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**Nevada State Systemic Improvement Plan (SSIP) Phase II: Improvement Plan**  
**Theory of Action Strand: Evaluation and Assessment**

**A. Improvement Strategy**

1. State identifies evidence-based assessment instruments to support the service provider’s ability to identify social-emotional skills in infants and toddlers.
2. State enhances professional development resources and provides ongoing support to ensure evidence-based functional assessments are implemented with fidelity.

**B. Key State Improvement Plans or Initiatives That Align With This Improvement Strategy**

- Nevada Technical Assistance Center for Social-emotional Interventions (TACSEI) Project
- Nevada Autism Assistance Program (ATAP) Program
- Nevada Leadership Education in Neurodevelopmental and Related Disabilities (LEND) Grant (Pilot ASQ-SE Screenings in child care programs)
- Nevada Department of Education; Early Childhood State Assessment – P-3
- Northern Nevada Child and Adolescent Services

**C. Improving Infrastructure and/or Practice**

1. Is this improvement strategy intended to improve one or more infrastructure components? If so, check all that apply.

Governance <input type="checkbox"/>	Accountability <input checked="" type="checkbox"/>	Professional development <input checked="" type="checkbox"/>
Data <input checked="" type="checkbox"/>	Quality Standards <input checked="" type="checkbox"/>	Technical assistance <input checked="" type="checkbox"/>
Finance <input checked="" type="checkbox"/>		

2. Is this strategy intended to directly improve practices?    Yes     No

## D. Intended Outcomes

Type of Outcome	Outcome Description
<b>Short term</b>	Service provider's confidence and competence level will improve when identifying social-emotional needs for infants and toddlers.
<b>Short term</b>	Service providers will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers.
<b>Short term</b>	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.
<b>Intermediate</b>	Service providers' use of evidence-based practices in assessing the social-emotional skills and needs of infants and toddlers will improve, be sustainable and implemented with fidelity.
<b>Intermediate</b>	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.
<b>Intermediate</b>	Families will be better able to support and enhance their child's social-emotional skills and overall development.
<b>Long term</b>	Infants and toddlers exiting early intervention services will demonstrate a significant increased rate of growth in positive social-emotional skills (including social relationships).

Nevada's SSIP Evaluation/Assessment Improvement Plan

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
1. The IDEA Part C Office, in conjunction with Stakeholders, will identify evidence-based tools and procedures to be utilized in conducting functional assessment of the social-emotional skills and needs of children, ages birth to 3, and the initial and ongoing assessment of the family's needs related to their ability to support their child's social-emotional development.	X	X		1.a. In conjunction with Stakeholders, generate a comprehensive list of appropriate instruments/tools specifically designed to assess the social-emotional skills of infants and toddlers; outline related costs for each instrument/tool.	IDEA Part C Office Lead; Assessment Leadership Team, including families; Technical Assistance (TA) Center Resources; Early Intervention Service Provider Agency Funding	IDEA Part C Office Team Lead; EIS Program Management; Assessment Leadership Team; IDEA Part C Office Information and Referral Specialist	June 2015 – September 2016	EIS provider management (State and community partners) provide input related to any instruments already being used by program; Infant Mental Health Agency and Division of Public and Behavioral Health Programs serve as members of Assessment Leadership Team and support resource development; Institutions of Higher Education (IHE) Programs provide input.
	X	X		1.b. In conjunction with Stakeholders, including family representatives, identify resources, tools and procedures for conducting functional family assessment to identify their initial and ongoing needs related to supporting their child's social-emotional development; outline potential related costs for each instrument/tool.				
	X	X	X	1.c. Distribute list of approved tools to all early intervention service (EIS) providers and post on IDEA Part C Office website.				
	X	X		1.d. Maintain copies of assessment instruments in the IDEA Part C Office Resource Library to be checked out by providers (as needed) and university programs/students to support ongoing preservice and in-service training.				
	X	X		1.e. Include tools and resource list in the Evaluation/Assessment Section of the Child Outcomes Module in the IDEA Part C Evidence-Based Practice Guidelines; publish on IDEA Part C Office website.				

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
2. Develop and implement statewide training and technical assistance for EIS providers in evidence-based practices for administering and interpreting assessment tools procedures to identify the functional social-emotional needs of infants and toddlers and their families.	X	X	X	2.a. Establish competencies for EIS providers regarding assessment of the social-emotional skills of infants and toddlers ages birth to three and their families through stakeholder process; align with DEC recommended practices for evaluation/assessment.	Early Childhood System of Learning (ECSoL) Leadership Team; IDEA Part C Office; TACSEI Project personnel; Parents; EIS Program Management (State and Community Partner programs), Nevada NDE; Institutions of Higher Education (IHE) Programs (UNR/UNLV); ICC; ECAC; National TA Resource; funding	IDEA Part C Office Team; Assessment Leadership Team; ADSD Administration; IHE Programs Leadership; Mental Health; EIS program management	June 2016 – December 2016	Designate personnel to participate as members of Assessment Leadership Team; review and comment on draft competencies documents.  Align with NDE Early Learning Guidelines.
	X	X	X	2.b. Establish tools and procedures for data collection and evaluation of EIS provider's assessment practices to verify fidelity relative to the social-emotional development of infants and toddlers; distribute to providers.				
	X	X	X	2.c. EIS providers are trained on child outcome ratings process utilizing training resources developed by the Early Childhood Outcomes Center; content addresses: <ul style="list-style-type: none"> <li>• typical child development</li> <li>• Child Outcome Ratings Scale.</li> </ul>			April 2016 – July 2017	EIS Programs (State and Community Partners) will participate in training and follow-up; Coordinate trainings with other early childhood initiatives, as appropriate.
	X	X	X	2.d. Develop procedures and modules for a "train-the-trainer" system of training for mentors and coaches within and across EIS programs. Support service providers in the implementation of evidence-based practices in assessing the social-emotional development of infants and toddlers and their families by including: <ul style="list-style-type: none"> <li>• practice profiles that demonstrate what the practice looks or doesn't look like to support fidelity of implementation; and</li> <li>• content on inter-rater reliability in determining child outcome ratings.</li> </ul> <p>Tools and resources are disseminated across programs.</p>			June 2016 – December 2017	Identify internal resources to implement mentoring and coaching training procedures; disseminate tools and resources

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
	X	X		2.e. Implement training for mentors and coaches to ensure supports for EIS providers in implementing EBP in assessing the social-emotional development of infants and toddlers.	IDEA Part C Office Team; TACSEI Personnel; EIS Providers; Funding; Data Collection/ Analysis	TACSEI Personnel; EIS program management	September 2016 - ongoing	Identify providers to participate in TACSEI EI Cohort; participate in training; identify internal providers/teams to implement coaching and mentoring procedures; data collection and reporting; provide fiscal support for internal implementation
	X	X	X	2.f. Implement evaluation and data collection procedures to determine EIS provider effectiveness in implementing EBP in TACSEI EI Cohort.			December 2016 - Ongoing	
	X	X		2.g. Develop Child Outcomes Module in the Part C Evidence-Based Practice Guidelines that addresses procedures for conducting ongoing functional assessment of the child’s social-emotional development and the family’s needs related to their abilities to support the social-emotional development of their child.	IDEA Part C Office Personnel; Stakeholders; Including Parents; National TA Support	IDEA Part C Office Team; Stakeholders	May 2016 – May 2017	Participate in the development and review of the Child Outcomes Module in the IDEA Part C Evidence-Based Practice Guidelines  Support training and distribution of information regarding guidelines
	X	X	X	2.h. Collaborate with other early childhood initiatives to maximize resources and avoid duplication in supporting the social-emotional development of infants and toddlers.	IDEA Part C Office Team; TACSEI EI Personnel; EIS/ Early Childhood Providers	IDEA Part C Office Team; EIS program management; TACSEI EI Personnel	July 2016 - ongoing	Identifying local community organization; ECSoL Research National, State and Local Resources; ECAC strategic plan
	X	X		2.i. Work with higher education programs in Nevada to increase the level of information on assessing social-emotional development in university Early Childhood Developmentally Delayed (ECDD) assessment classes	Nevada NDE licensure support, IHE Programs (UNR/UNLV); ICC, ECAC, and ECSoL Leadership Team	IDEA Part C Office; Nevada NDE; ICC; ECAC; ECSoL	July 2016 - ongoing	ICC and ECAC Subcommittees researching certification options, content and competencies



**Nevada State Systemic Improvement Plan (SSIP) Phase II: Improvement Plan**  
**Theory of Action Strand: Practitioner Knowledge and Skills**

**A. Improvement Strategy**

1. State further develops and provides ongoing training and resources to support the utilization of evidence-based practices for social-emotional development.

**B. Key State Improvement Plans or Initiatives That Align With This Improvement Strategy**

- ASD Program Certification and Program Development Team
- TACSEI

**C. Improving Infrastructure and/or Practice**

2. Is this improvement strategy intended to improve one or more infrastructure components? If so, check all that apply.

Governance	<input checked="" type="checkbox"/>	Accountability	<input checked="" type="checkbox"/>	Professional development	<input checked="" type="checkbox"/>
Data	<input checked="" type="checkbox"/>	Quality standards	<input checked="" type="checkbox"/>	Technical assistance	<input checked="" type="checkbox"/>
Finance	<input checked="" type="checkbox"/>				

3. Is this strategy intended to directly improve practices? Yes  No

D. Intended Outcomes

Type of Outcome	Outcome Description
<b>Short term</b>	Service providers' working knowledge and understanding of the use of evidenced-based practices (EBP) to support the social-emotional development of infants and toddlers will increase.
<b>Short term</b>	There will be an increase in service providers' knowledge and ability to communicate with families about the role and impact of social-emotional development on successful interventions.
<b>Short term</b>	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.
<b>Intermediate</b>	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.
<b>Intermediate</b>	Service providers' use of EBP to support the social-emotional development of infants and toddlers will improve, be sustainable and implemented with fidelity.
<b>Intermediate</b>	Families will be better able to support and enhance their child's social-emotional skills and overall development.
<b>Long term</b>	Infants and toddlers exiting early intervention services will demonstrate a significant increased rate of growth in positive social-emotional skills (including social relationships).

Practitioner Knowledge and Skills/Local System Support Improvement Plan

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
1. Expand State TACSEI focus for early intervention home and community-based services, including mentors and coaches to ensure EIS providers are utilizing evidence-based practices in addressing the social-emotional needs of infants and toddlers.	X	X		1.a. Identify members of SSIP/TACSEI-EI State Implementation Team.	IDEA Part C Office team, TACSI Project Representation; ADSD EIS Program Representatives (State and Community Partners); Parents, Child and Adolescent Mental Health; Institutions of Higher Education; Funding Plan	IDEA Part C Office; State TACSEI Coordinator; ADSD EIS Administration and Program Managers	April 2016 – June 2016	Fiscal support
	X	X		1.b. Identify EIS Providers that have training and experience using the Pyramid Model in early intervention services (0-3) through TACSEI.				Participate on Stakeholder Review/Advisory Group(s) including parents; support for local program participation; dissemination of information about SSIP implementation
	X	X	X	1.c. Establish criteria for TACSEI-EI Cohorts and identify participating programs.				
	X	X		1.d. Develop written plan and contract for expanding Nevada's TACSEI for infant/toddler population and for statewide implementation.	Funding; IDEA Part C Office/TACSEI Collaboration; Parents ADSD Administration; TACSEI-EI Cohort Site Personnel	IDEA Part C Office; State TACSEI EI Coordinator; EIS Program Representatives (State and Community Partners)	May 2016 – June 2016	Participate on Stakeholder Review/Advisory Group(s); Support implementation requirements
	X	X	X	1.e. Develop data collection requirements, including reliability measures, and reporting procedures for all cohort participants.	Funding; TACSEI-EI Leadership; Cohort Site Personnel; Additional TACSEI EI Master Trainers for Coaching and Mentor Training for EIS Providers; System for Data Collection; TA Support Resources	TACSEI EI Coordinator; ADSD EIS Program Management (State and Community Partner Programs); State EIS Master Trainers	July 2016 – June 2017	Participate on Stakeholder Review/Advisory Group(s) including parents; fiscal/personnel support for implementation
	X	X	X	1.f. Develop and implement a comprehensive plan for providing ongoing training for coaches, mentors and EIS providers to ensure the TACSEI-EI model is implemented with fidelity specific to improving social-emotional outcomes for infants and toddlers including data collection for evaluation.				

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
	X	X	X	1.g. Explore expansion of the utilization of local/internal social-emotional Teams based on Emotional Assessment Strategies Team (EAST) model, as appropriate or feasible.	IDEA Part C Office; Funding; Child and Adolescent Mental Health; EIS Program Personnel Support	IDEA Part C Office; EIS Program Managers	July 2016 – June 2017	Fiscal and personnel support for implementation; Participate on Stakeholder Review/Advisory Group(s) including Parents
	X	X	X	1.h. Develop budget and timeline projections for ramping up (adding additional cohorts) until model is fully implemented statewide for all EIS provider programs.	Gant Chart for Ramping-up; funding; ADSD Administration; TA Support	IDEA Part C Office Team; ADSD Administration and EIS Program Management	April 2016 – January 2017	Participate on Stakeholder Review/Advisory Group(s); Include program implementation in budget process
2. Develop proposal and strategic plan outlining necessary components for establishing Regional Training and Technical Assistance Centers to support EIS/Early Childhood programs in implementing evidence-based practices and improving social-emotional outcomes for infants and toddlers.	X	X		2.a. Identify specific components, critical resources needed, including budget requirements to establish and implement regional training and technical assistance units.	Funding; IDEA Part C Office; TACSEI EI Expansion Workgroup; ICC; TA Support	IDEA Part C Office; TACSEI EI State Coordinator; ADSD Administration	May 2016 – December 2017	Participate in expansion planning workgroup
3. Revise IDEA Part C Office Evidence-Based Practice Guidelines to include a Child Outcomes	X	X	X	3.a. Establish workgroup to develop Child Outcomes Module in the IDEA Part C Office Evidence-Based Practices Guidelines	Funding; IDEA Part C Office Team; Workgroup members; ICC; TA Support	IDEA Part C Office	May 2016 – September 2016	ICC review and input; Other agencies participate on workgroup

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
Module addressing the provision of early intervention services to support the social-emotional development of infants and toddlers consistent with the TACSEI Model.								
	X	X	X	3.b. Review existing resources to support module content.	IDEA Part C Office; Workgroup; ICC; TA Support	IDEA Part C Office; Work group	May 2016 – September 2016	Other appropriate agencies participate on workgroup
	X	X	X	3.c. Develop and disseminate module to EIS providers and maintain on IDEA Part C Office website.	Funding; IDEA Part C Office; Workgroup; ICC; TA Support		May 2016 – May 2017	ADSD support dissemination and implementation of module
	X	X	X	3.d. Utilize module to provide training to EIS Providers specific to improving understanding of children's social-emotional development.	Funding; IDEA Part C Office; Workgroup; ICC; TA Support	IDEA Part C Office; EIS Provider Programs	May 2017- Ongoing	Early Childhood initiatives utilize for staff training; ADSD support dissemination and implementation of modules
4. Support providers in using data from the IDEA Part C Office Annual Family Survey regarding families' confidence in their ability to support and enhance their child's social-emotional to guide meaningful conversations with the family.	X	X	X	4.a. Establish contract for implementing the Annual Family Survey process.	Funding; IDEA Part C Office/TACSEI Collaboration; Contractor for Evaluation	IDEA Part C Office; State TACSEI Coordinator	April 2016 – August 2016	Support for local program participation; Dissemination of Information
	X	X	X	4.b. Work with stakeholder group and contractor to review and revise the family survey instrument, process and reporting to measure the family's confidence in supporting the social-emotional development of their child.	Funding; Stakeholder work group including families of infants and toddlers; ICC	IDEA Part C Office; Contractor for Evaluation; Stakeholder work group including ICC representation and families of infants and toddlers	July 2016 – August 2016	Participate on workgroup; dissemination of information regarding purpose of survey
	X	X	X	4.c. Establish baseline of early intervention service providers skill and confidence level in	Funding; IDEA Part C Office/TACSEI Collaboration	IDEA Part C Office; State TACSEI EI	April 2016 – August 2016	Support for local program participation; Dissemination of Information

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
				discussing the child's social-emotional development with the family.		Coordinator		
	X	X	X	4.d. Generate child outcomes data reports and train providers in using the reports to change practices and improve conversations with families around how they can support their child's social-emotional development.	Data system report updates; Data Managers; Funding for training, coaching, mentoring and follow-up; personnel	IDEA Part C Office; ADSD Personnel; State TACSEI Coordinator	July 2016 - ongoing	Training on functional outcomes based on program report from the family survey; training for personnel
	X	X		4.e. Use family survey results to evaluate systems progress in addressing the social-emotional outcomes of infants and toddlers.	Contractor; TA Supports; Funding; Local EI Program Managers	IDEA Part C Office; ADSD Administration	July 2016 – June 2017	Training on functional outcomes based on program report from the family survey

**Nevada State Systemic Improvement Plan (SSIP) Phase II: Improvement Plan**  
**Theory of Action Strand: State and Local Provider Collaboration**

**A. Improvement Strategy - Collaboration**

**State establishes and facilitates strong collaborations with early childhood partner agencies to help link families with appropriate resources related to addressing their child’s social-emotional skills.**

**B. Key State Improvement Plans or Initiatives That Align With This Improvement Strategy**

- Nevada Department of Education (NDE) Silver State Strong – Nevada’s Early Childhood Comprehensive System Strategic Plan
- Title V Maternal and Child Health (MCH) Goals 2016 – 2020
- Nevada Governor’s Council on Developmental Disabilities (DD Council) 5 Year Plan 2016 – 2021

**C. Improving Infrastructure and/or Practice**

**3. Is this improvement strategy intended to improve one or more infrastructure components? If so, check all that apply.**

Governance	<input checked="" type="checkbox"/>	Accountability	<input checked="" type="checkbox"/>	Governance	<input checked="" type="checkbox"/>
Data	<input checked="" type="checkbox"/>	Quality standards	<input type="checkbox"/>	Technical assistance	<input checked="" type="checkbox"/>
Finance	<input checked="" type="checkbox"/>				

**4. Is this strategy intended to directly improve practices? Yes  No**

## D. Intended Outcomes

Type of Outcome	Outcome Description
<b>Short term</b>	Local communities and service providers have knowledge of the system's resources for supporting the social-emotional needs of children and families and will engage in strategic planning to address areas of need.
<b>Short term</b>	Service providers have knowledge how to access resources relative to the use of evidence-based practices and wrap-around supports to address the social-emotional needs of children and families.
<b>Short term</b>	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.
<b>Intermediate</b>	The use of evidence-based practices will improve and be implemented with fidelity to reach IFSP goals, strategies and outcomes to meet the social-emotional needs of the child and family.
<b>Intermediate</b>	Families will be better able to support and enhance their child's social-emotional skills and overall development.
<b>Long term</b>	Infants and toddlers exiting early intervention services will demonstrate a significant increased rate of growth in positive social-emotional skills (including social relationships).



State and Local Provider Collaboration Improvement Plan

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
1. Identify specific areas for collaboration across state and federal programs at both the state and local level that are most relevant to linking families with appropriate resources related to addressing their child's social-emotional development.	X	X	X	1.a. Identify and document active networks already in existence in each region of the state that support the expansion of resources.	Fiscal Support; IDEA Part C Office Team; ASD/EIS Management; Social Media; 2-1-1; Project Assist Website and Family Newsletter; Parents Encouraging Parents (PEP) ICC; ECAC; Family Resource Centers	IDEA Part C Office; ECAC partners; Nevada ICC	Initiate April 2016 – September 2017	Sharing existing needs assessment data reports  Support process of conducting further needs assessment to address any gaps in data  Participate in collaborative planning to address identified gaps in resources
	X	X	X	1.b. Review available data from current needs assessments conducted by other agencies and programs (ex. MCH, Head Start, etc.) relative to availability of local resources to assist families in addressing their child's social-emotional development.				
	X		X	1.c. Conduct needs assessment with EI providers, families and local networks to identify specific gaps in resources within local communities relative to addressing the social-emotional health and outcomes for children and families.				
	X	X	X	1.d. Compile data to guide strategic planning for collaborative efforts to address gaps in resources to support families in addressing the social-emotional needs of their child.	Leadership of State and Local Programs; Parents; Nevada PEP; Funding	Administration of specific programs; IDEA Part C Office;	July 1, 2016 - ongoing	Collaborate to implement activities to achieve common goals related to improving social-emotional outcomes for infants and toddlers
	X	X	X	1.e. Develop plan for disseminating information to Stakeholders, families, service providers and the public regarding resource availability and gaps.				
	X		X	1.f. Expand parent and early intervention service provider participation on local councils, committees and consortiums related to resource				

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
				development/expansion for supporting the social-emotional development of young children.				
	X	X	X	1.g. Include information on resources identified to support families in promoting their child's social-emotional development in Central Directory/Project Assist website.				
2. Align SSIP goals and activities with Nevada's Early Childhood Comprehensive System Strategic Plan relative to Professional Development, Social-emotional Health, Community Resources and Wrap-around Services to strengthen and maximize resources to support social-emotional outcomes for infants and toddlers and their families.	X	X	X	2.a. Support process of updating the Early Childhood System Strategic Plan (Silver State Strong Plan) including the informational (petal) graphic reflecting key agencies/programs related to early childhood supports and services.	Personnel; Funding; Support for data collection and analysis	ECAC and Nevada ICC Members; IDEA Part C Office Team; ASD Administration and EIS Providers	April 2016 – March 2017	Agency representatives participation on ECAC and ECAC subcommittees; support distribution of information to all programs and to the public
				2. b. Participate in ECAC Strategic Planning Systems Subcommittee addressing areas consistent with SSIP goals.				
	X	X	X	2.c. Communicate SSIP and plan goals to Stakeholders and the general public.				

**Nevada State Systemic Improvement Plan (SSIP) Phase II: Improvement Plan**  
**Theory of Action Strand: Data System and Accountability**

**A. Improvement Strategy**

1. State enhances and implements a data reporting system that has the ability and capacity to allow for effective program planning, monitoring and overall improvement

**B. Key State Improvement Plans or Initiatives That Align With This Improvement Strategy**

- Development and implementation of SLDS – State Longitudinal Data System

**C. Improving Infrastructure and/or Practice**

4. Is this improvement strategy intended to improve one or more infrastructure components? If so, check all that apply.

Governance	<input checked="" type="checkbox"/>	Accountability	<input checked="" type="checkbox"/>	Professional development	<input checked="" type="checkbox"/>
Data	<input checked="" type="checkbox"/>	Quality standards	<input checked="" type="checkbox"/>	Technical assistance	<input checked="" type="checkbox"/>
Finance	<input checked="" type="checkbox"/>				

5. Is this strategy intended to directly improve practices? Yes  No

D. **Intended Outcomes**

Type of Outcome	Outcome Description
<b>Short term</b>	Local providers will have a better understanding of how to complete child outcomes ratings and how to use child outcomes data for program improvement.
<b>Short term</b>	The IDEA Part C Office will have access to system data and be better able to monitor and support the full implementation of evidence-based practices.
<b>Short term</b>	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.
<b>Intermediate</b>	Local providers will be able to produce ongoing qualitative and quantitative reports to improve program performance and identify areas for targeted coaching and TA.
<b>Intermediate</b>	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.
<b>Intermediate</b>	Families will be better able to support and enhance their child's social-emotional skills and overall development.
<b>Long term</b>	Infants and toddlers exiting early intervention services will demonstrate a significant increased rate of growth in positive social-emotional skills (including social relationships).

**Data System and Accountability Improvement Plan**

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
1. Enhance the IDEA Part C Office Early Intervention (EI) Data System to support additional analysis and reporting of child outcomes data at all levels.	X	X		1.a. Organize a data systems development panel to review data requirements, system specifications and develop data improvement plan.	Technical Assistance (TA) Support; Data System Experts	IDEA Part C Office; Contractor and Part C Data Manager	April 2016 – July 2017	Collaboration with ADSD and other Department of Health and Human Services (DHHS) Director's Office Programs on system development and implementation
	X	X		1.b. Continue business analysis of current data system needs and fiscal requirements to address needs.	Funding; Technical Support	IDEA Part C Office; ADSD Administration	April 2016 – July 2017	Collaboration with ADSD and other DHHS Director's Office Programs on System Development and Implementation
	X	X	X	1.c. Implement required changes to ensure the statewide data system provides timely and accurate data for ongoing assessment of EIS provider's performance in improving social-emotional outcomes for infants and toddlers.	Funding; Collaboration with Aging and Disability Services Division (ADSD)	IDEA Part C Office; ADSD Administration	April 2016 – June 2017	Collaboration with ADSD and other DHHS Director's Office Programs on System Development and Implementation
	X	X		1.d. Create Child Outcomes Module in the IDEA Part C Office Evidence-Based Practice Guidelines on Use of Child Outcomes Data for program planning and improvement.	Funding; Personnel	IDEA Part C Office; Part C Data Manager	May 2016 – May 2017	Collaboration with ADSD Data Managers

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
2. Provide/facilitate training on Child Outcome (CO) Rating Process to ensure inter-rater reliability across the statewide system.	X	X	X	2.a. Utilize training resources developed by the Early Childhood Outcomes Center to establish ongoing training for EI providers on child outcome ratings.	IDEA Part C Office CSPD Coordinator;	IDEA Part C Office; ADSD Administration	April 2016 – July 2017	EIS Programs (State and Community Partners) will participate in training and follow-up; Coordinate trainings with other early childhood initiatives, as appropriate.
	X	X	X	2.b. Design a process for ongoing mentoring and coaching EI providers to ensure ratings are consistent across programs.	Personnel Resources to Mentor and Coach Service Providers	IDEA Part C Office; ADSD Administration	April 2016 – July 2017	EIS Programs (State and Community Partners) will implement training modules by all program personnel on an ongoing basis.
3. Develop and implement ongoing process for providing Data System training for EI providers in the analysis and use of child outcomes data reports	X	X	X	3.a. Provide training for EI providers on correct procedures for data entry and generation and use of reports.	TA Support;  Funding;  Personnel	Part C Coordinator; Part C Data Manager;	April 2016 – July 2017	EIS Programs (State and Community Partners) will implement training for all program personnel on an ongoing basis.
	X	X		3.b. Provide more frequent CO data reports to EIS providers from the current data system and spreadsheet for program improvement until data system improvements are completed.	Personnel Time	IDEA Part C Office	April 2016 - Ongoing	Report development panel to include local data managers from ADSD.
4. Update IDEA Part C Office Accountability and Monitoring processes to included procedures for evaluating fidelity in implementation of	X	X	X	4.a. Update IDEA Part C Office monitoring/ accountability procedures to incorporate the data generated through the evaluation of fidelity	IDEA Part C Office; Stakeholders including parents	IDEA Part C Office; ADSD Administration	July 2016 – June 2017	EIS Programs (State and Community Partners) participate in review of processes; provide feedback; support program implementation.

Activities to Meet Outcomes	High Priority	System Level		Steps to Implement Activities	Resources Needed	Who Is Responsible	Timeline (projected initiation & completion dates)	How Other LA/SEA Offices and Other Agencies Will Be Involved
		State	Local					
EBP and improved social-emotional outcomes for infants and toddlers with disabilities.				measures in implementing social-emotional EBPs through cohorts established under the new Technical Assistance Center for Social-emotional Interventions – Early Intervention (TACSEI-EI) initiative.				
	X	X	X	4.b. Cross-walk IDEA Part C Office Monitoring procedures and fidelity measures with EBP in improving social-emotional outcomes.	IDEA Part C Office; Stakeholders, including Parents	IDEA Part C Office	July 2016 – June 2017	EIS Programs (State and Community Partners) participate in review of processes; provide feedback; support program implementation.
	X	X		4. c. Cross-walk monitoring with ADSD in Program Certification Process to avoid duplication.	IDEA Part C Office; ADSD Administration	IDEA Part C Office; ADSD Administration	July 2016 – June 2017	ADSD Program Certification Team and EIS Program (State and Community Partners) representatives participate in cross-walk processes.

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<b>Theory of Action Strand: Evaluation and Assessment</b>							
<b>Evaluation of Intended Outcomes</b>							
<b>If the State identifies evidence-based assessments, then ....</b>		<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
Short-Term Outcome	Service provider's confidence and competence level will improve when identifying social-emotional (S-E) needs for infants and toddlers.	After receiving training, do providers feel more confident in identifying S-E needs of children using assessment tools?	With the use of more assessment tools, providers feel more confident identifying S-E needs.	Pre/Post Survey	5/1/2016	Ongoing	January, 2017; Annually
Short-Term Outcome	Service providers will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers.	What is the percent of providers that pass the COS competency check?	The number of providers with knowledge and skills to accurately determine child will increase	Child Outcome Summary (COS) Competency Checklist	1/1/2017	Ongoing	Annually
<b>If the State enhances professional development resources and provides ongoing support to ensure evidence-based functional assessments are implemented with fidelity, then ....</b>		<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/ Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
Short-Term Outcome	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's S-E development and their needs relative to their ability to effectively support their child's S-E development.	What percent of families report having meaningful conversations about their child's SE needs? What % of providers report having meaningful conversations with families about their child's SE needs?	An increase in the number of providers and families reporting they have meaningful conversations regarding their child's S-E development.	Survey Families and Providers; Family Survey/Focus Groups and/or Interviews with Families	8/1/2016	Ongoing	Baseline - August 2016; Annually
Intermediate Outcome	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.	Does the number of S-E IFSP outcomes increase after providers have received training on identifying and addressing S-E needs of children?	After providers receive training, IFSP outcomes addressing children's S-E needs increase.	Program Monitoring/Sample IFSPs of Children with S-E Concerns	7/1/2016	Ongoing	Baseline - July 2016; 6 Months
Intermediate Outcome	Service providers' use of evidence-based practices will improve, be sustainable and implemented with fidelity.	What percent of providers are using EBP with fidelity or as intended? Are processes in place to support EBP?	An increase in the number of providers to use EBP with fidelity.	Cohort Data Collection	12/1/2016	Ongoing	Baseline December 2016; 6 Months



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		Evaluation Questions	How will we know	Measurement/ Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals
Intermediate Outcome	Families will be better able to support and enhance their child's S-E skills and overall development.	What is the percent of families reporting being able to better support their child's S-E development?	An increase in the number of families better able to support their child's S-E development.	Family Survey/Focus Groups/Interviews with Families	12/1/2016	Ongoing	Baseline December 2016; 6 Months
Long-Term Outcome (SIMR)	Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships).	What percent of infants and toddlers with IFSPs exiting EI having received at least six months of services demonstrate improved positive S-E skills (including social relationships)?	The percent of infants and toddlers with IFSPs exiting EI having received at least six months of services demonstrating improved positive S-E skills (including social relationships) will increase?	Child Outcomes Data	7/1/2016	7/1/2020	Annually

**Evaluation of Implementation of Improvement Strategies – Evaluation and Assessment**

**Activity 1: The IDEA Part C Office, in conjunction with Stakeholders, will identify evidence-based tools and procedures to be utilized in conducting functional assessment of the social-emotional skills and needs of children, ages birth to 3, and the initial and ongoing assessment of the family's needs related to their ability to support their child's social-emotional development.**

**Activity 2: Develop and implement statewide training and technical assistance for EIS providers in evidence-based practices for administering and interpreting assessment tools procedures to identify the functional social- emotional needs of infants and toddlers and their families.**

Strategy	Evaluation Questions	How will we know	Measurement/Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals
1 A list of approved instruments/tools and procedures is distributed to EIS/EC Providers and families for: <ul style="list-style-type: none"> <li>assessing the S-E skills of children birth-to-three, and</li> <li>Conducting the initial and ongoing functional family assessment to identify their needs related to supporting their child's S-E development.</li> </ul>	Has the list of approved instruments and procedures for assessing the S-E skills of children ages birth-to-three and for conducting initial and ongoing functional family assessment to identify their needs related to supporting their child's S-E development been distributed as planned?	The list of approved instruments and procedures for assessing the S-E skills of children ages birth-to-three and for conducting initial and ongoing functional family assessment to identify their needs related to supporting their child's S-E development been distributed as planned?	Documentation of Distribution/IDEA Part C Office Website.	6/1/2016	9/30/2016	One-time
2 Competencies for EIS providers for assessment of the S-E skills of infants and toddlers ages birth-to-three and their families are approved by the IDEA Part C Office, rolled-out to all EIS providers and published on the IDEA Part C Office website.	Are the State approved EIS provider competencies relative to evidence-based practices (EBP) in the assessment of S-E skills of infants and toddlers distributed to EIS providers as planned?	Competencies are approved and published on IDEA Part C Office Website as planned.	Documentation of Distribution/IDEA Part C Office Website.	6/1/2016	12/31/2016	One-time

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Strategy	Evaluation Questions	How will we know	Measurement/Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals	
3	Tools and procedures for evaluating EIS provider's implementation of EBP for assessing S-E development of infants and toddlers are completed, approved and distributed to providers.	Are tools and processes available to support the evaluation of EBP in functional assessment of S-E skills of infants and toddlers?	Tools and procedures for evaluating provider's use of EBP in the functional assessment of S-E skills of infants and toddlers distributed to providers as planned.	IDEA Part C Office documentation	6/1/2015	12/30/2016	One-time
4	Train-the-trainer modules are developed for mentors and coaches for the TACSEI/EIS Cohorts and approved; All mentors and coaches for TACSEI/EIS Cohorts complete training process.	How many mentors and coaches are trained in supporting and evaluating EIS Providers relative to EBP in the assessment of S-E skills of infants and toddlers?	The number of mentors and coaches supporting EIS providers in implementing EBP in functional assessment of infants and toddlers will increase.	Training and Follow-up Roster	9/30/2016	Ongoing	Annually
5	Training is provided to EIS providers on child outcome rating process to ensure inter-rater reliability across statewide system.	How many EIS providers participated in training and follow-up evaluation for completing the ECO rating process?	At least 85% of EIS providers participate in COS ratings training and follow-up.	Training and Follow-up Roster	7/1/2016	Ongoing	Annually
6	The Child Outcomes Module in the revised IDEA Part C Office Evidence-Based Practice Guidelines (EBPG) includes the approved list tools for the assessment of S-E skills of children birth-to-three; module is distributed to all EIS providers and posted on IDEA Part C Office website.	Is the EBPG Guidelines Child Outcomes Module distributed to providers as planned?	EBPG Child Outcomes Module is distributed to all EIS providers as planned.	Documentation of Distribution/IDEA Part C Office Website.	5/1/2016	5/1/2017	One-time
7	Key concepts are identified to be embedded in university Early Childhood Developmentally Delayed (ECDD) assessment classes to increase the level of information related to EBP in assessing S-E development to support sustainability of EBP in the early intervention/early childhood workforce.	What are the critical concepts specific to EBP in assessing the S-E needs of infants and toddlers and the needs of the family in supporting their child's development to be addressed in ECDD coursework?	University coursework includes concepts for implementing EBP in assessing the S-E needs of infants and toddlers and the needs of the family in supporting their child's development to be addressed in ECDD coursework.	University Class Descriptions	7/1/2016	7/1/18	Annually

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<b>Theory of Action Strand: Practitioner Knowledge and Skills/Local System Support</b>							
<b>Evaluation of Intended Outcomes</b>							
<b>If the State further develops and provides ongoing training and resources to support the utilization of evidence-based practices for social-emotional development, then ....</b>		<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
Short-Term Outcome	Service providers' working knowledge and understanding of the use of EBP to support the social-emotional development of infants and toddlers will increase.	What percent of providers report having a better understanding of using EBP?	An increase in the number of providers having a better understanding of using EBP	Pre/Post Test	7/1/2016	Ongoing	Baseline December 2016; 6 Months
Short-Term Outcome	There will be an increase in service providers' knowledge and ability to communicate with families about the role and impact of social-emotional development on successful interventions.	What percent of providers report feeling more comfortable communicating with families about their child's S-E needs?	An increase in the number of providers are more comfortable communicating children's S-E needs with families	Post Survey of providers	7/1/2016	Ongoing	Baseline December 2016; 6 Months
Short Term Outcome	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.	What percent of families report having meaningful conversations about their child's S-E needs? What percent of providers report having meaningful conversations with families about their child's S-E needs?	An increase in the number of providers and families reporting they have meaningful conversations regarding their child's S-E development	Survey Families and Providers; Family Survey/ Focus Groups and/or Interviews with Families	8/1/2016	Ongoing	Baseline - August 2016; Annually
Intermediate Outcome	Service providers' use of evidence-based practices to support the social-emotional development of infants and toddlers will improve, be sustainable and implemented with fidelity.	What percent of providers are using EBP with fidelity or as intended? Are processes in place to support EBP?	An increase in the number of providers use EBP with fidelity	Fidelity Checklists	12/1/2016	Ongoing	Baseline December 2016; 6 Months
Intermediate Outcome	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.	Does the number of SE IFSP outcomes increase after providers have received training on identifying and addressing SE needs of children?	After providers receive training, IFSP outcomes addressing children's S-E needs increase	Program Monitoring, Sample IFSPs of Children with SE Concerns	7/1/2016	Ongoing	Baseline - July 2016; 6 months

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Intermediate Outcome	Families will be better able to support and enhance their child's social-emotional skills and overall development.	What is the percent of families reporting being able to better support their child's SE development?	An increase in the number of families better able to support their child's S-E development	Family Survey/ Focus Group/ Interviews with Families	12/1/2016	Ongoing	Baseline December 2016; 6 Months
Long-Term Outcome (SIMR)	Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships).	What percent of infants and toddlers with IFSPs exiting EI having received at least six months of services demonstrate improved positive social-emotional skills (including social relationships)?	The percent of infants and toddlers with IFSPs exiting EI having received at least six months of services demonstrating improved positive social-emotional skills (including social relationships) will increase?	Child Outcomes Data	7/1/2016	7/1/2020	Annually

<b>Evaluation of Implementation of Improvement Strategies - Practitioner Knowledge and Skills/Local System Support</b>							
<b>Activity 1: Expand State TACSEI focus for early intervention home and community-based services, including mentors and coaches to ensure EIS providers are utilizing evidence-based practices in addressing the social-emotional needs of infants and toddlers.</b>							
	<b>Strategy</b>	<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
1	SSIP/TACSEI EIS Implementation Team is established to support implementation of the EIS expansion plan.	Is the stakeholder leadership team in place to support implementation of the plan?	Implementation team membership identified and published.	Implementation team roster	4/1/2016	6/30/2016	One-time
2	Data collection and reporting requirements are established for EIS Cohort participants.	Are data collection and reporting and procedures for TACSEI/EI established?	Data requirements and procedures for collecting and reporting are available.	Data procedures manual.	5/1/2016	8/1/2016	One-time
3	Criteria for EIS Cohorts are established and participants for Cohort I are established.	What are the criteria for participation in TACSEI/EI Cohorts?	Criteria for Cohort is established; Participants are identified for Cohort 1.	IDEA Part C Office Documentation	5/1/2016	6/30/2016	One-time
4	Contract to support expansion of the State TACSEI Project EIS component is finalized.	Is there a contract in place that supports the expansion of TACSEI EI component?	Contract is established with scope of work to support Phase I expansion.	IDEA Part C Office Documentation	7/1/2016	6/30/2019	Annually
5	Train-the-trainer modules are developed and approved for mentors/coaches for the TACSEI/EIS; All mentors/coaches for TACSEI/EIS Cohorts complete training process.	Are training modules developed and approved? Have cohort mentors/coaches completed training process?	Training modules are approved and all cohort mentors/coaches have completed the training process.	Training and Follow-up Roster	9/30/2016	Ongoing	Annually

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6	Implement TACSEI/Infant-Toddler model with Cohort participants including training and follow-up for service providers and data collection to verify EBP are implemented with fidelity.	Has the TACSEI/EI expansion been implemented as planned?	TACSEI/EIS Cohorts are operating in accordance with plan.	Implementation Progress Reports	10/1/2016	Ongoing	6 Months
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**Activity 2: Develop proposal and strategic plan outlining necessary components for establishing Regional Training and Technical Assistance Centers to support EIS/Early Childhood programs in implementing evidence-based practices and improving social-emotional outcomes for infants and toddlers.**

	Strategy	Evaluation Questions	How will we know	Measurement/Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals
7	Written proposal for establishing regional/local training and Technical Assistance (TA) Centers to support all EIS providers in sustaining evidence-based practices in assessing and supporting improvement of the social-emotional development of infants and toddlers are completed and presented to the Department of Health and Human Services (DHHS) administration.	Has proposal for establishing EIS Regional Training and TA Centers been completed and presented to the DHHS administration?	Written proposal for regional/local training and Technical Assistance (TA) Centers are completed and presented to DHHS.	IDEA Part C Office Documentation	6/1/2016	7/1/2017	One-time

**Activity 3: Revise IDEA Part C Office Evidence-Based Practice Guidelines to include a Child Outcomes Module addressing the provision of early intervention services to support the social-emotional development of infants and toddlers consistent with the TACSEI Model.**

	Strategy	Evaluation Questions	How will we know	Measurement/Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals
8	The Child Outcomes Module in the revised IDEA Part C Office Evidence-Based Practice Guidelines include strategies, procedures and resources to support the social emotional skills of children birth-to-three; module is distributed to all EIS providers and posted on IDEA Part C Office website for access by families and the public.	Is the EBPG Guidelines Child Outcomes Module distributed to providers as planned?	EBPG Child Outcomes Module is distributed to all EIS providers as planned.	Documentation of Distribution/IDEA Part C Office Website.	5/1/2016	5/1/2017	One-time

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Activity 4: Support providers in using data from the IDEA Part C Office Annual Family Survey regarding families' confidence in their ability to support and enhance their child's social-emotional to guide meaningful conversations with the family.							
	Strategy	Evaluation Questions	How will we know	Measurement/Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals
9	The IDEA Part C Office Annual Family Survey instrument and process is updated and includes items to measure the family's perspective regarding meaningfulness of conversations with EIS providers and confidence that participating in EIS has helped them be more confident in supporting and enhancing their child's development.	Has the family survey instrument and process been updated to reflect the parents perspective regarding meaningfulness of conversations with EIS providers and confidence that participating in EIS has helped them be more confident in supporting and enhancing their child's development?	Revised survey instrument/process description is available.	Annual Family Survey Report	6/1/2016	10/1/2016	Annually
10	EIS programs have support in using SSIP/TACSEI EIS data reports and Family Survey reports for program improvement.	Do EIS providers have support to analyze data across reports to support program planning?	Programs analyze data and apply to program improvement plans.	TA Provision Logs; Program Improvement Plans	6/1/2017	Ongoing	Annually

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<b>Theory of Action Strand: State and Local Provider Collaboration</b>							
<b>Evaluation of Intended Outcomes</b>							
<b>If the State establishes and facilitates strong collaborations with early childhood partner agencies to help link families with appropriate resources related to addressing their child's social-emotional skills, then ....</b>		<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
Short -Term Outcome	Local communities and service providers have knowledge of the system's resources for supporting the social-emotional needs of children and families and will engage in strategic planning to address areas of need.	Are you meeting as a community and sharing information?	There is an increased number of EIS programs who participate in a local Leadership Team in their community.	Service Provider Survey	9/1/2016	Ongoing	Baseline September 2016; Annually
Short Term Outcome	Service providers have knowledge how to access resources relative to the use of evidence-based practices (EBP) and wrap-around supports to address the social-emotional needs of children and families.	How many EIS providers report they have access to EBP issued by the Leadership team?	An increased % of providers are implementing EBP.	Service Provider Survey	9/1/2016	Ongoing	Baseline September 2016; Annually
Short Term Outcome	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.	What % of families are reporting meaningful conversations regarding SE concerns?	An increased percentage of families report meaningful conversations.	Family Survey/Family Interviews	8/1/2016	Ongoing	Baseline August 2016; Annually
Intermediate Outcome	The use of evidence-based practices will improve and be implemented with fidelity to reach IFSP goals, strategies and outcomes to meet the social-emotional needs of the child and family.	Which EBPs have you implemented?	An increased percentage of EBP are being used by providers statewide.	Service Provider Survey	9/1/2016	Ongoing	Baseline September 2016; Annually
Intermediate Outcome	Families will be better able to support and enhance their child's social-emotional skills and overall development.	What is the percent of families reporting being able to better support their child's social-emotional development?	An increase in the number of families better able to support their child's social-emotional development.	Family Survey/Focus Group/Interviews with Families	12/1/2016	Ongoing	Baseline December 2016; 6 Months

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Long-Term Outcome (SIMR)	Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships).	What percent of infants and toddlers with IFSPs exiting EI having received at least 6 months of services demonstrate improved positive social-emotional skills (including social relationships)?	The percent of infants and toddlers with IFSPs exiting early intervention having received at least six months of services demonstrating improved positive social-emotional skills (including social relationships) will increase?	Child Outcomes Data	7/1/2016	7/1/2020	Annually
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<b>Evaluation of Implementation of Improvement Strategies - State and Local Provider Collaboration</b>							
<b>Activity 1: Identify specific areas for collaboration across state and federal programs at both the state and local level that are most relevant to linking families with appropriate resources related to addressing their child's social-emotional development.</b>							
	Strategy	Evaluation Questions	How will we know	Measurement/Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals
1	Compile report utilizing multiple information sources to identify resources at the state and local levels to support EIS providers and families in addressing the social-emotional needs of infants and toddlers and make the report available to stakeholders, families, service providers and the public.	Is there a compiled report available to stakeholders, families, service providers and the public that identifies available resources at the state and local levels to support EIS providers and families in addressing the social-emotional needs of infants and toddlers?	Resource report is compiled as planned and made available to stakeholders, families, service providers and the public.	IDEA Part C Office Project Assist website	7/1/2016	12/1/2016	Baseline 12/31/16 - Annually
<b>Activity 2: Align SSIP goals and activities with Nevada's Early Childhood Comprehensive System Strategic Plan relative to Professional Development, Social Emotional Health, Community Resources and Wrap-around Services to strengthen and maximize resources to support social emotional outcomes for infants and toddlers and their families.</b>							
	Strategy	Evaluation Questions	How will we know	Measurement/Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals
2	Engage in process of updating the Early Childhood System Strategic Plan (Silver State Strong Plan) including updating the informational (petal) graphic reflecting key agencies/programs related to early childhood supports and services; crosswalk Early Childhood System Strategic Plan with SSIP to identify key areas for collaboration.	Has the Early Childhood System Strategic Plan been updated as planned? Has a cross-walk between the two plans been completed as planned?	The revised Early Childhood System Strategic Plan and Crosswalk with the SSIP are available to stakeholders, families, service providers and the public.	Nevada Department of Education Website/IDEA Part C Office Website	4/1/2016	12/31/2016	One-time



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<b>Theory of Action Strand: Data System and Accountability</b>							
<b>Evaluation of Intended Outcomes</b>							
<b>If the State enhances and implements a data reporting system that has the ability and capacity to allow for effective program planning, monitoring and overall improvement, then ....</b>		<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
Short Term Outcome	Local providers will have a better understanding of how to complete child outcomes ratings and how to use child outcomes data for program improvement.	Are data reports used to improve program performance?	An increased percent of EIS programs report improved program performance as a result of using data reports.	Program Monitoring for Verification of Outcomes Ratings; Program survey	6/30/2016	Ongoing	Baseline - June 2016; Annually
Short Term Outcome	The IDEA Part C Office will have access to system data and be better able to monitor and support the full implementation of evidence-based practices.	Do program monitoring reports measure EBP implementation?	State procedures are revised to monitor the implementation of EBP.	Program Monitoring - EBP Implementation Checklists	1/1/2017	Ongoing	Baseline - January 2016; Annually
Intermediate Outcome	Local providers will be able to produce ongoing qualitative and quantitative reports to improve program performance and identify areas for targeted coaching and TA.	What % of providers use EBP with fidelity or as intended?	An increase in the # of programs reporting improved program performance as a result of using data reports.	Program Monitoring	6/30/2016	Ongoing	Baseline - January 2017; Annually
Intermediate Outcome	Sensitive, supportive relationship-based conversations with families will occur and will provide meaningful information regarding their child's social-emotional development and their needs relative to their ability to effectively support their child's social-emotional development.	What % of families are reporting meaningful conversations regarding SE concerns?	An increased percent of families report meaningful conversations.	Family Survey/Family Interviews	8/1/2016	Ongoing	Baseline - August 2016; Annually
Intermediate Outcome	IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.	Does the number of SE IFSP outcomes increase after providers have received training on identifying and addressing SE needs of children?	After providers receive training, IFSP outcomes addressing children's SE needs increase.	Program Monitoring/sample IFSPs of children with social-emotional concerns	7/1/2016	Ongoing	Baseline - July 2016; 6 months
Intermediate Outcome	Families will be better able to support and enhance their child's social-emotional skills and overall development.	What is the percent of families reporting being able to better support their child's SE development?	An increase in the number of families better able to support their child's social-emotional development.	Family Survey/Focus Group/Interviews with Families	12/1/2016	Ongoing	Baseline December 2016; 6 Months

**Nevada State Systemic Improvement Plan (SSIP) Phase II  
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**ATTACHMENT C**

		Evaluation Questions	How will we know	Measurement/Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals
Long-Term Outcome (SIMR)	Infants and toddlers exiting early intervention services will demonstrate a significantly increased rate of growth in positive social-emotional skills (including social relationships).	What percent of infants and toddlers with IFSPs exiting EI having received at least six months of services demonstrate improved positive social-emotional skills (including social relationships)?	The percent of infants and toddlers with IFSPs exiting EI having received at least six months of services demonstrating improved positive social-emotional skills (including social relationships) will increase?	Child Outcomes Data	7/1/2016	7/1/2020	Annually

**Evaluation of Implementation of Improvement Strategies - Data System and Accountability**

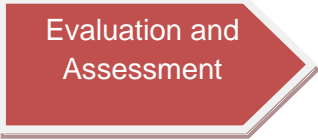


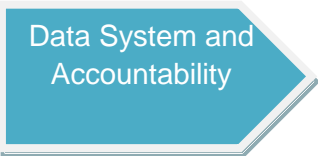
**Activity 1: Enhance the IDEA Part C Office Early Intervention Data System to support additional analysis and reporting of child outcomes data at all levels.**

Strategy	Evaluation Questions	How will we know	Measurement/ Data Collection Method	Projected Initiation	Projected Completion	Measurement Intervals	
1	Update the IDEA Part C Office statewide data system to ensure access to timely and accurate child outcomes data reports for ongoing evaluation of program performance in improving social-emotional outcomes for infants and toddlers.	Has the IDEA Part C statewide data system been updated to provide reports to support ongoing evaluation of program performance in improving social-emotional outcomes for infants and toddlers program improvement?	Child outcomes data reports are available on an ongoing basis to evaluate provider performance relative to improving social-emotional outcomes for infants and toddlers for whom they provide services.	IDEA Part C Office Documentation of Data System Evaluation and Updates	4/1/2016	4/1/2017	6 Months
2	The Child Outcomes Module in the revised IDEA Part C Office Evidence-Based Practice Guidelines (EBPG) includes a section COS data analysis and using the data for program improvement; module is distributed to all EIS providers and posted on IDEA Part C Office website for access by families and the public.	Is the EBPG Guidelines Child Outcomes Module distributed to providers as planned?	EBPG Child Outcomes Module is distributed to all EIS providers as planned.	Documentation of Distribution/IDEA Part C Office Website.	5/1/2016	5/1/2017	One-time

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<b>Activity 2: Provide/facilitate training on Child Outcome Rating process to ensure inter-rater reliability across the statewide system.</b>							
<b>Strategy</b>		<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
3	Training is provided to EIS providers on Child Outcome Rating Process utilizing ECO Center training modules to ensure inter-rater reliability across statewide system.	How many EIS providers participated in training and follow-up evaluation for completing the ECO rating process?	At least 85% of EIS providers participate in COS ratings training and follow-up.	Training and Follow-up Roster	7/1/2016	Ongoing	6 Months
<b>Activity 3: Develop and implement ongoing process for providing Data System training for EI providers in the analysis and use of child outcomes data reports.</b>							
<b>Strategy</b>		<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
4	Provide ongoing training and TA support for EI Providers on correct procedures for entering COS data in the statewide data system and generation and use of reports for program improvement.	Do EIS providers have support to analyze data across reports to support program planning?	Programs analyze data and apply to program improvement plans.	TA Provision Logs; Program Improvement Plans	4/1/2016	Ongoing	Annually
<b>Activity 4: Update IDEA Part C Office Accountability and Monitoring Processes to Included procedures for evaluating fidelity in implementation of EBP and improved social emotional outcomes for infants and toddlers with disabilities.</b>							
<b>Strategy</b>		<b>Evaluation Questions</b>	<b>How will we know</b>	<b>Measurement/Data Collection Method</b>	<b>Projected Initiation</b>	<b>Projected Completion</b>	<b>Measurement Intervals</b>
5	IDEA Part C Office General Supervision and Monitoring Procedures are revised to incorporate program fidelity measures data relative to the implementation of EBP in the provision of EIS to address the social emotional needs of the child and family.	Do the IDEA Part C Office General Supervision and Monitoring Procedures include the use of program fidelity measures data to evaluate the implementation of EBP in the provision of EIS to address the social emotional needs of the child and family?	IDEA Part C Office General Supervision and Monitoring Procedures incorporate program fidelity measures data relative to the implementation of EBP in the provision of EIS to address the social emotional needs of the child and family as planned.	IDEA Part C Office General Supervision and Monitoring Procedures Manual	1/1/2017	4/30/2017	Ongoing

Strands of Action	If the State	Then	Then	Then
 <p>Evaluation and Assessment</p>	<p>...identifies evidence-based assessment instruments</p> <p>...enhances professional development resources and provides ongoing support to ensure evidence-based functional assessments are implemented with fidelity</p>	<p>...service provider's confidence level will improve when identifying social-emotional needs for infants and toddlers</p> <p>... service provider's will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers</p>	<p>...evidence-based practices will improve, be sustainable and implemented with fidelity</p>	<p><b>...infants and toddlers exiting early intervention services will demonstrate a significant increased rate of growth in positive social-emotional skills (including social relationships)</b></p>
 <p>Practitioner Knowledge and Skills/ Local System Support</p>	<p>... further develops and provides ongoing training and resources to support the utilization of evidence-based practices for social-emotional development</p>	<p>... service provider's knowledge and ability to communicate with families about the role and impact of social-emotional development on successful interventions will increase</p>	<p>...meaningful conversations will occur with families to gather information regarding their child's social-emotional development</p>	
 <p>State and Local Provider Collaboration</p>	<p>...establishes and facilitates strong collaborations with early childhood partner agencies to help link families with appropriate resources related to addressing their child's social-emotional skills</p>	<p>...all service providers will know how to access resources to effectively improve and effectively implement evidence-based practices</p>	<p>...more appropriate outcomes and strategies will be included in IFSPs, including social-emotional skills when appropriate</p>	
 <p>Data System and Accountability</p>	<p>...enhances and implements a data reporting system that has the ability and capacity to allow for effective program planning, monitoring and overall improvement</p>	<p>...local providers will be able to produce ongoing qualitative and quantitative reports to improve program performance and identify areas for targeted coaching and TA</p> <p>... the state will be better able to monitor and support the full implementation of evidence-based practices</p>	<p>...families will be better able to support and enhance their child's social-emotional skills and overall development</p>	

## Acronyms For SSIP

Acronym	Meaning
ADOS	Autism Diagnostic Observation Schedule
ADSD	Aging and Disability Services Division
APR	Annual Performance Report
ASD	Autism Spectrum Disorder
ASQ	Ages and Stages Questionnaire
ASQ-SE	Ages and Stages Questionnaire – Social Emotional
ATAP	Autism Treatment Assistance Program
CAPTA	Child Abuse Prevention and Treatment Act
COS	Childhood Outcomes Summary
COSF	Child Outcome Summary Form
DaSy	The Center for IDEA Early Childhood Data Systems
DCFS	Division of Child and Family Services
DEC	Division for Early Childhood
DHCFP	Division of Health Care Financing and Policy
DHHS	Division of Health and Human Services
DPBH	Division of Public and Behavioral Health
DS	Developmental Specialist
DWSS	Division of Welfare and Supportive Services
EBP	Evidence-Based Practices
ECAC	Early Childhood Advisory Council
ECO	Early Childhood Outcomes Center
ECPC	Early Childhood Personnel Center
ECSE	Early Childhood Special Education
ECTA	Early Childhood Technical Assistance Center
EHDI	Early Hearing Detection and Intervention
EHS	Early Head Start
EI	Early Intervention
EIS	Early Intervention Services
FFY	Federal Fiscal Year
HDFS	Human Development and Family Studies
HS	Head Start
ICC	Interagency Coordinating Council
IDC	IDEA Data Center
IDEA	Individuals with Disabilities Education Act
IFSP	Individual Family Service Plan
IHE	Institutions of Higher Education
ITCA	Infant Toddlers Coordinators Association
MCH	Maternal and Child Health
NCED	Nevada Center for Excellence in Disabilities

NCSI	National Center for Systemic Improvement
NDALC	Nevada Disability Advocacy and Law Center
NDE	Nevada Department of Education
NEIS	Nevada Early Intervention Services
NV Lend	Nevada Leadership Education in Neurodevelopment and Related Disabilities
OSEP	United States Department of Education, Office of Special Education Programs
PEP	Parents Educating Parents
QRIS	Quality Rating and Improvement System
SAM	Screening and Monitoring
SD	Standard Deviation
SES	Socioeconomic Status
SFY	State Fiscal Year
SIMR	State Identified Measurable Results
SKI HI	Sensory Impaired Home Intervention
SPP	State Performance Plan
SS	Summary Statement
SSIP	State Systems Improvement Plan
SFY	State Fiscal Year
SWOT	Strengths, Weaknesses, Opportunities and Threats
TA	Technical Assistance
TACSEI	Technical Assistance Center on Social Emotional Intervention for Young Children
TECAC	Tribal Early Childhood Advisory Council
TRAC	Tracking Resources and Children
UNLV	University of Nevada, Las Vegas
UNR	University of Nevada, Reno