HAWAII PART C
FFY 2016 SPP/APR INDICATOR 11:
STATE SYSTEMIC IMPROVEMENT
PLAN (SSIP), PHASE III

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Overview of the State Systemic Improvement System (SSIP)

State Lead Agency

Hawaii Department of Health (HDOH), Early Intervention Section (EIS) is identified as the Part C Lead Agency (LA) and is responsible for developing and implementing a statewide, comprehensive, coordinated, multidisciplinary, interagency system that provides early intervention (EI) services for infants and toddlers with disabilities and their families as outlined in the Individuals with Disabilities Education Act (IDEA).

Hawaii has three (3) State EI Programs and fifteen (15) Purchase of Service (POS) EI Programs statewide. Hawaii also has fee-for-service contracts with individual providers and agencies to provide additional supports and services to the existing EI Programs.

The SSIP State Team, comprised of the Part C Coordinator, SSIP Coordinator (EI System Improvement and Outcomes Unit Supervisor), SSIP Data Coordinator (EI Outcomes Coordinator) and the Comprehensive System of Personnel Development (CSPD) Coordinator, work closely with the national Technical Assistant centers to guide the SSIP Leadership Team in developing and implementing the SSIP. The SSIP Leadership Team connects via face-to-face, phone conference and/or e-mail at least once a month. The SSIP Leadership Team provides input into the SSIP implementation and evaluation activities prior to presenting and obtaining feedback from stakeholders. The Leadership Team is comprised of EIS Administrative staff that oversee different aspects of Hawaii's EI System, representatives from local EI Programs, infant mental health professionals, representatives from state initiative groups, and parents. (Refer to Appendix A for SSIP Action Plan Progress Report that includes the SSIP Leadership Team Roster on page 1). Members of the SSIP Leadership Team also co-lead the various SSIP Implementation Workgroups that were created to address implementation and evaluation activities in strands of action from the Theory of Action (TOA) developed in Phase I of the SSIP.

There are four (4) Implementation Workgroups comprised of a broad range of stakeholders to implement and evaluate activities in the three (3) broad strands of action:

Strand 1: Professional Development (PD) and Technical Assistance (TA)

> Improvement Strategy: Enhance the statewide system of professional development (PD) to ensure implementation of evidence-based practices (EBPs) around Primary Service Provider (PSP) Approach to Teaming and Coaching model in the natural learning environment to support social-emotional (SE) development with fidelity. Workgroup: PD

> Enhancement of the current PD and TA system as it relates to SE development will directly impact the outcomes for infants and toddlers with disabilities and their families. Hawaii's implementation of state identified SE competencies, scaling up of

EBPs using PSP Approach to Teaming and Coaching Model in Natural Learning Environments, and provision of a comprehensive training plan that includes a mentoring component that will guide and support provider practices resulting in children's achievement of positive SE outcomes.

Strand 2: Fiscal

Improvement Strategy: Increase the capacity of early intervention programs to provide services and supports to address SE development.
Workgroups: Staffing, Telepractice

The development and implementation of a staffing (recruitment and retention) plan, as well as, increasing the use of technology in service delivery will have a significant impact on programs' and providers' ability to support children with SE needs. These infrastructure changes will increase programs' capacity to provide services and supports to address SE development.

Strand 3: Monitoring and Accountability

Improvement Strategy: Enhance the child outcomes summary (COS) process to ensure data is accurate and reliable and ensure program effectiveness to support EBPs to improve children's SE development.
Workgroup: COS Data

The enhancement of the current COS system will increase the providers' understanding of the COS rating process. As providers better understand the COS process, they will be able to engage families, implement with fidelity and gather accurate data which will be used for program improvement.

The Action Plan Progress Report is being implemented with the four demonstration sites identified and reported in Phase II submission:

- IMUA Maui County (including Maui, Lanai and Molokai – three programs merged into one contracted program serving all three areas, effective 7/1/17.)
- Kailua Easter Seals (ES)
- Parent Child Development Center (PCDC) Waipahu
- Windward Early Childhood Services Program (ECSP)

SSIP Process

The process to develop the SSIP for FFY 2016 included:

1. EI System Improvement (SI) Unit within HDOH, EIS continued to be the lead for the

planning, development and implementation of the SSIP.

2. EI System Improvement Unit (SIU) within HDOH, EIS continued to be the lead for the planning, development and implementation of the SSIP.

3. The SSIP State Team connected with the U.S. Department of Education, Office of Special Education Programs (OSEP)-funded TA Center staff from the Early Childhood Technical Assistance (ECTA) Center, the Center for IDEA Early Childhood Data Systems (DaSy), and the National Center for Systemic Improvement (NCSI). Anne Lucas, Kathryn Morrison, and Margaret Gillis are the primary TA consultants actively working with Hawaii.

4. The SSIP Leadership Team met or connected via e-mail at least one time per month.

5. Status of the SSIP was provided to approximately 80 stakeholders at the Annual Stakeholder meeting held in December 2017.

6. Quarterly Program Manager Meetings also included the SSIP as an agenda item, beginning in 2014, to be continued throughout the SSIP process.

7. Quarterly Hawaii Early Intervention Coordinating Council (HEICC) meetings also included the SSIP as a standing agenda item, beginning in 2016, to be continued throughout the SSIP process.

8. Implementation Workgroups were charged with implementing and evaluating activities for their assigned strands.

9. The SSIP Coordinator revised the SSIP Action Plan Progress Report based on recommendations from national TA consultants to ensure Implementation Workgroups addressed measurement intervals, data management and analysis description in the evaluation of intended outcomes section of the SSIP Action Plan Progress Report.

10. The SSIP Leadership Team finalized the SSIP Action Plan and Progress Report, including the evaluation plan submitted by the SSIP Implementation Workgroups with feedback from stakeholders.

11. The SSIP SPP/APR Indicator 11, Phase III report was:
    a. written by the SSIP Coordinator and reviewed by the EIS Part C Coordinator and the SSIP Leadership Team;
    b. routed to the Director of Health prior to submission to OSEP
    c. submitted to OSEP as required; and
    d. posted on the HDOH website (http://health.Hawaii.gov/eis/home/ssip/)

A. Summary of Phase III

1. Theory of action (TOA) or logic model for the SSIP, including the SiMR

   The TOA was revised in Phase III – FFY 2016 to ensure alignment with activities and outcomes. Changes were made to the TOA to align with the SSIP Action Plan Progress Report (Appendix A) that includes activities, strategies, outcomes, and the evaluation plan. Justifications for the changes have been included in the SSIP Action Plan Progress Report.

   Table 2 shows the TOA strands submitted in Phase III – FFY 2015 and the recommended changes for Phase III - FFY 2016 and Table 3 is the revised TOA.

   The SSIP Leadership Team developed Logic Models in Phase II based on the data analysis and infrastructure analysis gathered from Stakeholders during Phase I of the SSIP. The process of developing the Logic Models involved identifying short term and intermediate outcomes critical to achieving the long-term outcome which is the State Identified Measurable Result (SIMR). These short-term and intermediate outcomes were based on the outcomes identified in the Phase I TOA. Creating the Logic Models provided an opportunity to prioritize the activities and focus on the activities and outcomes that would have the greatest impact on the SIMR.

   The Logic Models (Appendix B) were revised in Phase III – FFY 2016 to reflect changes made to the TOA. Changes were made to outcomes for clarity and alignment purposes after participating in DaSy and ECTA Evaluation workshop series in Jan-Feb 2018.

   State Identified Measurable Result (SiMR)

   Hawaii's SIMR for demonstration sites is Child Outcomes, Summary Statement 1: "Hawaii's eligible infants and toddlers with disabilities will make greater than expected growth in social-emotional skills (including social relationships) by the time they exit early intervention."

   Table 1 below list the SSIP SiMR targets and compiled data from the Demonstration Sites.

Table 1

Child Outcome A: Positive Social-Emotional Skills (including social relationships) Summary Statement 1:		
FFY	SSIP Targets	Demonstration Site Data
2015	49.28%	55.71%
2016	49.28%	62.37%
2017	49.50%	
2018	50.00%	
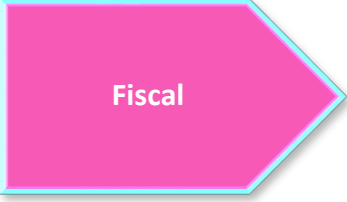
Although the FFY 2018 target was exceeded in FFY 2015 and FFY 2016, the targets will not be revised this year. COS training has recently been implemented (January 2018) and monitoring to ensure the COS process is implemented with fidelity has not been implemented yet. Data may change due to the training and ensuring implementation with fidelity. In addition to meeting the target for FFY 2016, there was an increase in the percentage of infants and toddlers making greater than expected growth in SE skills at exit between FFY 2015 and FFY 2016. A discussion with stakeholders will occur next year regarding targets after reviewing the data.

Table 2

Hawaii's SSIP Theory of Action with Recommended Changes

Strands of Action	IF Early Intervention (EI) Lead Agency	Then	Then	Then
Professional Development and Technical Assistance Phase III – FFY 2015	...develops and provides training, TA, and ongoing supports to ensure implementation of evidence-based practices (EBP) to support social-emotional (SE) development with fidelity	...EI providers will understand how to support SE development for children ages 0-3 ...EI providers will understand their roles, develop collaborative partnerships with families and other team members, identify and communicate with families about the SE needs of their children and develop functional SE objectives on the IFSP to support children's SE development	Phase III – FFY 2015 ... EI providers will implement EBPs (Primary Service Provider [PSP] Approach to Teaming and Coaching Model in Natural Learning Environments) related to SE development with fidelity ...SE IFSP objectives will be achieved	Phase III – FFY 2015 ...infants and toddlers with disabilities in demonstration sites, will substantially increase their rate of growth in SE skills (including social relationships) by the time they exit EI.
Phase III – FFY 2016	...develops and provides training, TA, and ongoing supports to ensure implementation of evidence-based practices (EBP) around Primary Service Provider (PSP) Approach to Teaming and Coaching model in the natural learning environment to support social-emotional (SE) development with fidelity	...EI programs will have the team structure necessary to implement EBP (PSP Approach to Teaming). ...EI providers will report improved quality implementation of EBP (coaching model in natural learning environments) to support SE development.		
Fiscal Phase III – FFY 2015	...increases funding (e.g., through grant writing, legislative support, etc.) to hire enough qualified staff, provide introductory and ongoing training, and support service delivery (e.g., tele-health capabilities, equipment availability)	...EI providers will have enhanced capacity to provide EBP and supports to children and families		
Phase III – FFY 2016	No Change	No Change	Phase III – FFY 2016 ... EI providers will implement EBPs (primary service provider [PSP] approach to teaming and coaching model in natural learning environments) to support SE development with fidelity. ...EI Care Coordinators will implement the COS process with fidelity.	
Monitoring and Accountability Phase III – FFY 2015	...develops and provides training on the child outcomes summary (COS) process, builds local program capacity to report accurate data and use data for improvement ...analyzes data to monitor program performance and fidelity of implementation and provide feedback to programs	...EI providers and families will understand the COS process ...EI programs will use monitoring feedback to help ensure providers are implementing the COS process with fidelity ...EI Program Managers will have the access and skills needed to use COS data for program improvement		No change
Phase III – FFY 2016	No Change	. . EI providers and families will understand the COS process ...EI Program Managers will have the access and skills needed to use COS data for program improvement		

Table 3

Hawaii's SSIP Theory of Action

Strands of Action	IF Early Intervention (EI) Lead Agency	Then	Then	Then
Professional Development and Technical Assistance (TA)	…develops and provides training, TA, and ongoing supports to ensure implementation of evidence-based practices (EBP) to support social-emotional (SE) development with fidelity	…EI programs will have the team structure necessary to implement EBP (PSP Approach to Teaming). …EI providers will report improved quality implementation of EBP (coaching model in natural learning environments) to support SE development.	… EI providers will implement EBPs (primary service provider [PSP] approach to teaming and coaching model in natural learning environments) to support SE development with fidelity.	…infants and toddlers with disabilities in demonstration sites, will substantially increase their rate of growth in SE skills (including social relationships) by the time they exit EI.
Fiscal	…increases funding (e.g., through grant writing, legislative support, etc.) to hire enough qualified staff, provide introductory and ongoing training, and support service delivery (e.g. tele-health capabilities, equipment availability)	…EI providers will have the capacity to provide EBP and supports to children and families		
Monitoring and Accountability	…develops and provides training on the child outcomes summary (COS) process, builds local program capacity to report accurate data and use data for improvement …analyzes data to monitor program performance and fidelity of implementation and provide feedback to programs	…EI providers and families will understand the COS process …EI Program Managers will have the access and skills needed to use COS data for program improvement	…EI Care Coordinators will implement the COS process with fidelity.	

2. Coherent improvement strategies or principle activities employed during the year, including infrastructure improvement strategies

Hawaii's infrastructure is designed to support the state's implementation of the Part C program, including implementation of EBPs to ensure that children and families receive necessary services and make progress because of these services. The various components of the system are aligned with each other and work together to achieve this goal.

The SSIP Action Plan Progress Report (Appendix A) includes status of implementation and supporting evidence for each step needed to accomplish the activity. Implementation Notes highlight barriers identified and how the Implementation Workgroups addressed the identified barriers that also included adjustments and implications of such adjustments.

During Phase III – FFY 2016, Implementation Workgroups focused on implementing the activities in the SSIP Action Plan as well as collecting and analyzing data to track progress of the evaluation plan.

The Professional Development (PD) and Technical Assistance (TA) Implementation Workgroup focused on building infrastructure components to enhance the statewide system of PD to increase staff knowledge and skills related addressing SE development using EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments). The PD & TA Implementation Workgroup focused on the following main activities related to infrastructure:

1. Disseminate and analyze data from the provider SE Competency Self-Assessment.
2. Based on feedback from stakeholders, definitions for each SE Competency was developed and disseminated.
3. Develop and implement a state training and mentoring plan for providers that addresses the SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments).

The ongoing implementation of the SE Competency Self-Assessment captured provider perceptions about their knowledge and skills related to the SE competencies. This information is critical for developing future annual training plans and for evaluating gains in providers' perceptions of their knowledge of SE competencies. The training plan included steps to incorporate the SE competencies into the training on EBPs (PSP Approach to Teaming and Coaching in Natural Learning Environments) and use of the training module which were determined to be critical steps in ensuring that providers in demonstration sites were trained on practices that support these competencies (See section A3 below). The training plan also addressed the use of mentors to support providers' implementation of EPBs with fidelity and how the SE Competency Self-

Assessment and coaching logs will be used for individual providers' training plans to sustain their implementation of EBPs.

The mentoring plan activity was completed and reported on in the last report; however, in implementing the mentor plan, it may be revised based on feedback during implementation.

The Fiscal Strand has two Implementation Workgroups: Staffing and Telepractice. The Staffing Implementation Workgroup focused on gathering data via Demonstration Site Program Staffing List that includes staff allocation and vacancies and a staffing survey to develop and implement a staffing plan to ensure the State has the infrastructure needed to hire and/or retain appropriate number of qualified staff to support children with SE needs. A salary study was also completed and the data was used to request additional funds for EI to offer competitive salaries. Currently waiting on legislature's approval for funding request.

The Telepractice Implementation Workgroup developed procedural guidelines and drafted training modules to ensure providers have the knowledge and skills to use telepractice.

Having a staffing plan to address recruitment and retention and using technology in service delivery are critical infrastructure components to increase the demonstration sites' ability to provide SE services and supports to families in their respective programs.

The Monitoring and Accountability (M &A) Implementation Workgroup implemented the on-line training modules developed by ECTA to include the purpose of the Child Outcomes Summary (COS) process and how to engage family/team in the process. Hawaii's COS procedures and forms continue to be included in the EI Part C Orientation for new providers. The Implementation Workgroup also worked on building infrastructure components such as developing and implementing a family questionnaire to get the families' perspective of the process and conducting a provider COS Self-Assessment regarding the COS process that will be used to support individual provider's training plan.

As providers better understand the COS process, they will be able to engage families, implement the process with fidelity and gather accurate data which will be used for program improvement.

Section B of this report, Tables 8-10, pages 17-19 provides a status report of the implementation activities for each of the strands.

3. The specific evidence-based practices (EBP) that have been implemented to date

As identified in Phase II of the SSIP, the State committed to implement the PSP Approach to Teaming and the Coaching Model in Natural Learning Environments. During Phase III, the State secured services from M'Lisa Shelden and Dathan Rush, nationally recognized trainers of the PSP Approach to Teaming and Coaching Model in Natural

Learning Environments.

The PSP Approach to teaming and the Coaching Model in Natural Learning Environments focus on supporting and strengthening parents' and other caregivers' abilities in interacting with their child in ways that support their child's learning and development within daily routines and activities and obtaining desired supports and resources. Using this approach will naturally support the child's SE development.

As reported in the previous SSIP report, Shelden and Rush conducted pre-training webinars (October – December 2016) and the on-site training (January 2017) for providers and mentors. The structured EBP (PSP Approach to Teaming and Coaching in Natural Learning Environments) was implemented in January 2018. Providers and mentors participated in six (6) coaching calls with Shelden and Rush to work towards implementing the EBPs (PSP Approach to Teaming and Coaching in Natural Learning Environments) with fidelity. Practice change and fidelity data was collected and reported in the SSIP Action Plan Progress Report (Appendix A).

In addition to the six coaching calls, Sheldon and Rush piloted the "Hawaii SE Competency Coaching Log Review" that they developed, based on Hawaii's SE competencies. The process rates the providers' implementation of practices that reflect each of Hawaii's SE competencies. Mentors struggled with using the tool and there was no fidelity criteria established. Therefore, the State extended Shelden & Rush's contract to provide additional support. Shelden & Rush hosted a webinar on March 13, 2018 to train staff on determining providers' coaching in natural learning environments fidelity status using their fidelity criteria and provided training on using the Hawaii SE Competency Coaching Log Review. Practice change and fidelity data was collected and reported on in the SSIP Action Plan Progress Report (Appendix A).

On-going data collection from the SE Competencies Self-Assessment Tool (Appendix C), based on Hawaii's SE Competencies is being analyzed. National TA consultants from DaSy and ECTA are supporting the analysis of the data.

The evaluation outcomes in the State Action Plan Progress Report (Appendix A) were revised to address the Demonstration Sites' requirement to make infrastructure changes outlined in the previous SSIP report as it is vital to the successful implementation of EBPs (PSP Approach to teaming and the Coaching Model in Natural Learning Environments).

4. Brief overview of the year's evaluation activities, measures, and outcomes

In Phase III – FFY 2016, the SSIP Coordinator and the Part C Coordinator worked closely with national TA consultants to streamline the evaluation plan to appropriately identify the intended impacts of the activities. The SSIP Leadership Team participated in two webinar series (Evaluating Infrastructure and Evaluating

Practices) provided by national TA providers (DaSy and ECTA). Based on the webinars, additional changes were made to evaluation outcomes to ensure it aligned with the activies outlined in the plan. Analysis of the data was added to the evaluation plan and timelines were adjusted accordingly based on the timeline changes of steps for the improvement activities.

The SSIP Action Plan Progress Report (Appendix A) includes the evaluation plan with the status and data information for each activity and outcome. Evaluation Notes highlight data quality issues and actions, performance indicator status and any applicable notes.

The evaluation activity completed and reported in previous SSIP reports is listed in Table 4 below.

Table 4

Improvement Activity	Type	Output	Status
1-1. Identify competencies related to SE development and incorporate them into EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) training	Infrastructure	• Competencies incorporated into trainings	Completed 1/18/17

The evaluation activities completed or in process in the second year of Phase III of the SSIP are outlined below, including a summarized status report. "Completed, on-going" indicates that activity initially completed, but on-going because data/updates will be collected and reported on through June 2019.

Table 5

Improvement Activity	Type	Output	Status
1-2. Develop or modify and implement provider self-assessment tool regarding SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments)	Infrastructure	• Providers complete self-assessment tool regarding SE competencies using the PSP Approach and Coaching Model	Completed, on-going

Improvement Activity	Type	Output	Status
1-3. Develop and implement a training plan for providers that addresses the SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments)	Infrastructure and Practice	State training plan that includes the following regarding SE competencies and EBP (PSP Approach to Teaming and Coaching in Natural Learning Environments): a. Training modules b. List of training resources/opportunities c. Individual training plan incorporating a & b above as needed ~~based on SE Competency – Mentor Assessment.~~	In Process: a. completed, on-going b. completed, on-going c. scheduled for FFY 2018
2-1. Hire and/or retain appropriate number of qualified staff to support children with SE needs	Infrastructure	1. Allocated positions are filled 2. Staffing plan includes components to address staffing needs based on survey results	In Process 1. completed, on-going 2. scheduled for FFY 2018
2-2. Develop and implement telepractice capability and procedures	Infrastructure	~~Technology established~~ Telepractice implemented at each Demonstration Site.	In Process
3-1. Develop or modify and implement COS process training to include: • Purpose of COS • COS process, including determining ratings • Engaging family/team	Infrastructure	• COS training module includes all specified components and providers trained	Completed, on-going

Improvement Activity	Type	Output	Status
in the process			
3-2. Develop and implement a monitoring process ~~tool~~ to improve implementation of the ~~ensure~~ COS process ~~is being implemented with fidelity~~.	Infrastructure	• COS Monitoring Process	In Process

The evaluation outcomes completed or in process in the second year of Phase III of the SSIP are outlined below, including a summarized status report. "Completed, on-going" indicates that activity initially completed, but on-going because data/updates will be collected and reported on through June 2019.

Table 6

Outcome	Type	Performance Indicator	Status
Short-Term (PD & TA) New: EI Demonstration Sites will have the team structure necessary to implement EBP PSP Approach to Teaming.	Infrastructure	1. 100% of demonstration sites will have all nine components (of the teaming structure) in place for implementation of the PSP Approach to Teaming.	Completed, on-going
Short-Term (PD & TA) EI providers will ~~understand how~~ report improved quality implementation of EBP (Coaching Model in natural learning environments) to support SE development ~~for children ages 0-3~~.	Provider Practice	1. 75% of providers demonstration site provides ~~who participated in the training~~ will report being at ~~or at least one step movement towards~~ level III- Triadic Relationships for at least 7 competencies on the SE Competency Self-Assessment	Completed, on-going
Short Term (Fiscal) EI Programs will have sufficient staff and services to implement EBPs and supports to children and families	Infrastructure	1. Each demonstration site provides timely services by achieving 100% on APR Indicator 1	In Process

Outcome	Type	Performance Indicator	Status
<u>Short Term (M & A)</u> EI providers and families will understand the COS process.	Provider Practice	1. 80% of families who complete the Family Questionnaire report that they understand the COS process 2. 90% of training attendees maintained or improved from pre-post training self-assessment scores for questions related to the COS process	In process 1. completed, on-going 2. baseline date collected
<u>Intermediate (All)</u> EI providers will implement EBP (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) ~~related~~ to support SE development with fidelity	Provider Practice	1. 75% of demonstration site providers are implementing EBP (coaching in natural learning environments) with fidelity. 2. 75% of demonstration site providers demonstrate at least one-step movement for each competency towards "actively supports caregivers" on the Hawaii SE Competencies Coaching Log Review	Completed, on-going
<u>Long-Term (All)</u> Infants and toddlers with disabilities in demonstration sites will have substantially increased their rate of growth in SE skills (including social relationships) by the time they exit EI	Child	Combined demonstration sites data meet Positive SE Summary Statement 1 Targets for: FFY 2015: 49.28% FFY 2016: 49.28% FFY 2017: 49.50% FFY 2018: 50.00%	Completed, on-going

5. Highlights of changes to implementation and improvement strategies

   Most changes to outcomes, improvement activities (refer to Tables 8-10, pages 17-19)

and steps were for clarity and alignment purposes. Many of the timelines changed due to various reasons (i.e., competing priorities, delay in purchasing equipment) that are described in the Implementation Notes of the Action Plan Progress Report table. Changes are indicated in red in the SSIP Action Plan Progress Report (Appendix A) and justifications are in blue for new information added to the table.

Table 7 below lists outcomes and steps to achieve improvement activities that have been deleted:

Table 7

Outcome/Steps	Justification for Deletion
Short-term Outcome: Early intervention providers will identify and communicate with families about the SE needs of their children and write functional SE objectives to support children's SE development.	If EI providers implement EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) related to SE development with fidelity, then providers will be working with families to support their child's positive SE development within their daily routines and activities. Providers' implementation of the EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) with fidelity are being evaluated. Furthermore, if the COS process is implemented with fidelity, then providers will be communicating with families about the SE needs of their children.
Intermediate Outcome: SE objectives will be achieved.	If EI providers implement EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) related to SE development with fidelity, then providers will be working with families to support their child's positive SE development and thus, SE IFSP objectives will be achieved. Furthermore, the State is in the process of organizing training on functional outcomes by ECTA and objectives will be removed from the IFSP.

B. Progress in Implementing the SSIP

1. Description of the State's SSIP implementation progress

   a. *Description of extent to which the State has carried out its planned activities with fidelity – what has been accomplished, what milestones have been met, and whether the intended timeline has been followed*

   The Action Plan Progress Report (Appendix A) captures progress on the implementation of the improvement activities and steps that included how stakeholders were engaged, quarterly status (completed, in process, or not initiated) and evidence for each step and implementation notes. Implementation Notes identified barriers to implementation, actions to address barriers, description of adjustments and implications of adjustments.

   Main barriers that impacted implementation of activities according to intended timelines were competing priorities and delay in procurement process for obtaining telepractice equipment, which resulted in adjustment to timelines for some activities. Barriers for each step in more detail can be found in the Action Plan Progress Report (Appendix A).

   The prioritized strategies and activities developed in Phase II of the SSIP are outlined in Tables 8-10 below, including a summarized status report of implementation during the second year of Phase III.

   Strand 1: Professional Development and Technical Assistance

   Improvement Strategy: Enhance the statewide system of professional development to ensure implementation of evidence-based practices (EBPs) around Primary Service Provider (PSP) Approach to Teaming and Coaching Model in Natural Learning Environments to support SE development with fidelity.

Table 8

Improvement Activities	Type	# of Steps	Status of Steps
1-1. Identify competencies related to SE development and incorporate them into EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) trainings.	Infrastructure	3	• 3 completed (reported in SSIP FFY 2015)
1-2. Develop or modify and implement provider self-assessment tool regarding		4	• 2 completed • 2 completed, on-going: initially

Improvement Activities	Type	# of Steps	Status of Steps
SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments)	Infrastructure		completed, and on-going because data will be collected and reported on through 6/2019
1-3. Develop and implement a training plan for providers that addresses the SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments)	Infrastructure and Practice	8	• 3 completed • 4 completed, on-going: initially completed, and on-going because data/updates will be collected and reported on through 6/2019 • 1 in process

Strand 2: Fiscal

Improvement Strategy: Increase the capacity of early intervention programs to provide serves and supports to address SE development.

Table 9

Improvement Activities	Type	# of Steps	Status of Steps
2-1. Hire and/or retain appropriate number of qualified staff to support children with SE needs	Infrastructure	5	• 1 completed • 1 completed, on-going: initially completed, and on-going because data will be collected and reported on through 6/2019 • 2 in process • 1 not initiated
2-2. Develop and implement Telepractice capability and procedures	Infrastructure	5	• 1 completed • 3 in process • 1 not initiated

Strand 3: Monitoring and Accountability

Improvement Strategy: Enhance the child outcomes summary (COS) process to ensure data are accurate and reliable and ensure program effectiveness to support

EBPs to improve children's SE development.

Table 10

Improvement Activities	Type	# of Steps	Status of Steps
3-1. Develop or modify and implement COS process training to include: • Purpose of COS • COS process, including determining ratings • Engaging family/team in the process	Infrastructure and Practice	5	• 4 completed • 1 completed, on-going: initially completed, and on-going because data will be collected and reported on through 6/2019
3-2. Develop and implement a monitoring process ~~tool~~ to improve implementation of the ~~ensure~~ COS process ~~is being implemented with fidelity~~.	Justification for change: Wording changed from "tool" to "process" to broaden the activity as the Workgroup has being developing a monitoring process to support providers and improve the COS process. Fidelity was removed as it is being addressed in the evaluation component of the plan as an intermediate outcome.		
3-2. Develop and implement a monitoring process to improve the implementation of the COS process.	Infrastructure and practice	6	• 1 completed • 1 completed, on-going: initially completed, and on-going because data will be collected and reported on through 6/2019 • 2 in process • 2 not initiated
3-3. Develop and implement training module on using COS data for program improvement.	Infrastructure	8	• 1 completed • 1 in process • 6 not initiated

b. *Intended outputs that have been accomplished as a result of the implementation activities*

The Evaluation Plan, which is embedded in the Action Plan Progress Report, was revised to include measurement intervals and data management in the Measurement/Data Collection Method column and analysis description in the

Timeline column for clarification purposes.

While there are no completed outputs this reporting year as a result of the implementation activities; there has been progress in achieving components of outputs. Table 11 below outlines the status of output components and conclusions based on the completion of the respective portion of the output completed.

Table 11

Activity	Output	Status	Conclusion
1-2. Develop or modify and implement provider Self-Assessment tool regarding SE competencies and EBP (PSP Approach to Teaming and Coaching in Natural Learning Environments).	Providers complete Self-Assessment tool regarding SE competencies and EBP (PSP Approach to Teaming and Coaching in Natural Learning Environments).	Intervals: a. Prior to training: completed b. 6-months after the training: completed c. 1-year after the training completed d. At-least once each following fiscal year: scheduled for January 2019	At least 85% of providers completed the SE Competency Self-Assessment at interval a, b, and c; therefore, the performance indicator has been met for intervals a, b, and c.
1-3. Develop and implement training plan for providers that address SE competencies and EBP (PSP Approach to Teaming and Coaching in Natural Learning Environments).	State training plan that includes the following regarding SE competencies and EBP (PSP Approach to Teaming and Coaching in Natural Learning Environments): a. Training modules b. List of training resources/ opportunities	a. Training modules: completed b. List of training resources/opportunities: completed c. Individual training plans: scheduled for FFY 2018	a. Training module revised based on feedback from pilot. b. List developed and will be updated on an on-going basis c. N/A

Activity	Output	Status	Conclusion
	c. Individual training plan incorporating a & b above as needed based on ~~providers knowledge and skills~~ SE Competency – Mentor Assessment.		
2-1. Hire and/or retain appropriate number of qualified staff to support children with SE needs.	1. Allocated positions are filled 2. Staffing plan includes components to address staffing needs based on survey results.	1. Staffing list completed and data collected on a quarterly basis 2. Staffing plan to be developed in FFY 2018	1. 90% of all positions in demonstration sites are not filled and data will be used to develop staffing plan 2. N/A
3-1. Develop or modify and implement COS process training to include: • Purpose of Child Outcomes • COS process, including determining ratings • Engaging family/team in the process	COS training module includes all specified components and providers trained.	1. Training module: completed 2. Training completed in January 2018	1. Training module has all three components; therefore, performance measure met 2. 68% of providers completed training module; therefore, performance indicator not met and data will be collected and reported on an on-going basis.
3-2. Develop	COS monitoring	1. COS Self-	1. 90% of

Activity	Output	Status	Conclusion
and implement a monitoring ~~tool~~ process to improve implementation of the COS process. ~~ensure COS process is being implemented with fidelity.~~	~~tool and~~ process that includes: 1. COS Self-Assessment 2. Individual training plan based on monitoring process	Assessment completed in January 2018 (baseline data obtained) 2. Individual training plans: scheduled for FFY 2018.	providers completed the COS Self-Assessment; therefore, the performance indicator was met. 2. N/A

The remaining outputs for activity 2-2 and 3-3 are not yet achieved as implementation activies are still in process. Refer to the SSIP Action Plan Progress Report (Appendix A) for detailed progress on evaluation activities and outcomes in the SSIP Action Plan. For outputs previously completed and reported, refer to FFY 2015 SSIP report.

2. Stakeholder involvement in SSIP implementation

   a. How stakeholders have been informed of the ongoing implementation of the SSIP

      Hawaii has continued to gather and use input from stakeholders at the local and state level to assist with the implementation of the SSIP. Stakeholders participated either via e-mail or in-person meetings.

      Table 11 below outlines the different stakeholders and how they are informed of ongoing implementation of the SSIP.

      The Action Plan Progress Report (Appendix A) includes how stakeholders were engaged in the implementation each of the steps for the improvement activities.

   b. How Stakeholders have a had a voice and been involved in decision-making regarding the ongoing implementation of the SSIP

      Stakeholders participated on the SSIP Leadership Team and Implementation Workgroups whereby they were actively involved in the SSIP implementation and evaluation, that included data collection, review and analysis of data, and helping to determine if activities were on target and if adjustments were needed. As part of their participation on the SSIP Leadership Team and/or Implementation Workgroups, they were involved in the discussions and part of the decision-making process.

Examples of some of the decisions made by the Implementation Workgroups and/or SSIP Leadership Team based on input from national TA consultants and other stakeholders:

- PD & TA Implementation Workgroup did not make any changes to existing outcomes and activities; however, they made changes while implementing the activities. Based on feedback and suggestion from stakeholders, the provider SE Self-Assessment was changed to an on-line survey (Google Docs). Providers preferred this method and Google Docs can compile survey results. The Workgroup also developed definitions for the SE Competencies at the request of providers to help them understand the SE Competencies and for clarity purposes when completing the SE Self-Assessment. In developing and implementing the mentoring plan, mentors reported confusion and requested additional support from Shelden & Rush regarding their role as mentors and determining fidelity status of providers. The training module was also revised based on input/feedback from Demonstration Sites.

- Staffing Implementation Workgroup did not make any changes to existing outcomes and activities; however, they made changes while implementing the activities. The Staffing Workgroup consulted with an outside agency to complete a salary study in which the findings of that study will be incorporated into the staffing plan and/or support funding requests.

- Telepractice Implementation Workgroup did not make any changes to existing outcomes and activities. Despite the delays and adjustments made to timelines, the workgroup feels the activities are appropriate to accomplish their outcomes.

- The M & A Implementation Workgroup revised one activity (3-2) to broaden the activity to develop a monitoring process instead of a tool to ensure the improved implementation of the COS process. Three new steps were added to support the activity of developing and implementing a monitoring process.

Table 12 below outlines the different stakeholder groups and how they were involved in decision-making of ongoing implementation of the SSIP.

Table 12

Stakeholders	Meeting Frequency	Purpose	Informed	Decision-making
SSIP Leadership Team (roster included in the SSIP Action Plan Progress Report – Appendix A)	Monthly	Discussion of SSIP Action Plan and Evaluation Plan and provides feedback to Implementation Workgroups as requested.	Implementation Workgroups provide updates at meetings and/or e-mail. Recommendations and/or discussion with TA providers	Made decisions as needed so workgroups can proceed with implementing activities.
SSIP Implementation Workgroups (roster Appendix D)	Monthly	Develop, implement, and evaluate respective section of the SSIP Action Plan and Evaluation Plan.	Co-Leads participated as members of the SSIP Leadership Team so they can share information about their respective workgroups regarding the SSIP Action Plan, including the evaluation plan.	Made decisions about implementation activities and/or changes needed as a result of data analysis based on input from various stakeholder
Statewide Program Managers	Quarterly	Meeting to share EI up-dates, provide TA, get input/feedback on items affecting the EI system. SSIP is a standing agenda item.	Updates are provided and SSIP Implementation Workgroups get input/feedback on what has been and will be developed, implemented, and/or evaluated.	Provided input to various activities that were taken into consideration prior to Implementation Workgroups and/or SSIP Leadership making decisions

Stakeholders	Meeting Frequency	Purpose	Informed	Decision-making
Demonstration Site Program Managers	Monthly	Discussion of implementation and evaluation of the SSIP. Program Managers review forms, documents (process, procedural guidelines), provide input/feedback on what is happening at the program level.	Updates are provided and SSIP Implementation Workgroups get input/feedback on what has been and will be developed, implemented, and/or evaluated.	Made decisions on various implementation items that support the SSIP activities. Provided input to various activities prior to Implementation Workgroups and/or SSIP Leadership making decisions
Demonstration Site Program Leadership Team	Monthly	Discussion of implementation and evaluation of the SSIP at the program level.	Program Managers review forms, documents (process, procedural guidelines), discuss how the SSIP impacts the program, generate questions for the SSIP State of Leadership Team to address.	Made decisions on how at the program level SSIP activities will be implemented.
Hawaii Early Intervention Coordinating Council (HEICC)	Quarterly	Advisory board and advocates for EI. SSIP is a standing agenda item. Members of the HEICC participate on different Implementation Workgroups	A presentation was done regarding the SSIP and updates. The Part C Coordinator provides quarterly updates.	Provided input to various activities that were taken into consideration prior to Implementation Workgroups and/or SSIP Leadership making

Stakeholders	Meeting Frequency	Purpose	Informed	Decision-making
		and are invited to the Annual Stakeholder Meeting.		decisions
Broad Stakeholders	Annually	To share information and data and get input/feedback on the SSP/APR and the SSIP Action Plan, including the evaluation plan. Implementation Workgroups get input/feedback on forms, procedural guidelines, documents, etc.	Update of the SSIP is presented and Implementation Workgroups get input/feedback on their respective sections.	Provided input to various activities that were taken into consideration prior to Implementation Workgroups and/or SSIP Leadership making decisions

C. Data on Implementation and Outcomes

1. How the State monitored and measured outputs to assess the effectiveness of the implementation plan

   a. How evaluation measures align with the TOA

      The SSIP Coordinator and Co-Leads of the Implementation Workgroups participated in the DaSy/ECTA SSIP Evaluation Webinars in January – March of 2018. Based on the webinars, changes were made to the evaluation plan, TOA (refer to Table 3, page 7) and the Logic Model (Appendix B) for alignment purposes.

      The TOA broadly describes the outcomes that will be achieved if activities are implemented. The Logic Models describes the activity, resulting output and associated outcomes that is hoped to be achieved. The Logic Models include more details than the TOA but it reflects what is in the TOA. The evaluation questions and performance indicators associated with identified outputs and outcomes are aligned with the Logic Models.

   b. Data sources for each key measure

      Data sources and how they will be used to measure progress for each evaluation item are described in detail in the SSIP Action Plan Progress Report (Appendix A). Table 13 below outlines data sources used this reporting period with a brief description of what is being measured.

Table 13

Data Source	Data Source Measuring Description
Demonstration Site Provider Tracking Sheet	Tracks list of providers in demonstration sites and whether the providers: • Attended various trainings (PSP & Coaching, Tele-Practice, COS, COS Data Use) • Completed Self-Assessments
SE Competency Self-Assessment Tracking Sheet	Tracks list of providers in demonstration sites and documents providers: • Completion of SE Competency Self-Assessment • SE Competency Self-Assessment responses
Checklist for Implementing a Primary-Coach Approach to Teaming – Preparedness Component	Measures necessary components to implement the PSP Approach to Teaming and Coaching Model.

Data Source	Data Source Measuring Description
Coaching Log Summary Form	Captures Mentors' ratings of providers implementation of EBPs to determine fidelity.
Hawaii SE Competency Coaching Log Review	Captures Mentors' ratings of providers level of support to families regarding child's SE development.
EI Program Staffing List	Measures percentage of filled positions in demonstration sites
Self-Assessment Monitoring (SAM) tool	Measures percentage of timely services for children monitoring in demonstration sites
COS Family Questionnaire Tracking Sheet	Tracks CCs and families completing Family Questionnaire, including their responses.
COS Self-Assessment Tracking Sheet	Tracks list of providers in demonstration sites and documents providers: • Completion of COS Self-Assessment • COS Self-Assessment responses
HEIDS	• COS Report – list of children with COS rating of ≤ 5 for Positive SE Skills • COS Report – Child Outcome A (positive SE skills) Summary Statement 1 percentage based on entry and exit ratings

c. Description of baseline data for key measures

Baseline data was collected and reported in the SSIP Action Plan Progress Report (Appendix A) in the "Status and Data" column of the Evaluation Plan. Table 14 below outlines the Improvement Activity and Output/Performance Indicator where baseline data was collected and reported for FFY 2016 SSIP Report.   Other improvement activities and output/performance indicators where baseline data was collected and reported on in previous SSIP reports are not included in the table below.

Table 14

Improvement Activity	Output/Performance Indicator
3-1. Develop or modify and implement COS process training to include: • Purpose of child outcomes (CO) • COS process, including determining ratings • Engaging family/team in the process.	Output: COS training module includes all specific components and providers trained. Performance Indicator: 1. 100% of trainings provided to Demonstration Sites include the COS components 2. 100% of EI providers in Demonstration Sites complete the COS trainings.

Improvement Activity	Output/Performance Indicator
3-2. Develop and implement a monitoring process ~~tool~~ to improve implementation of the ~~ensure~~ COS process ~~is being implemented with fidelity~~.	Output: COS monitoring process Performance Indicator: 1. 85% of CCs (including new CCs) in the demonstration sites complete the COS Self-Assessment prior to the training, 6-months after the training, and at least once each following fiscal year.

Table 15 below outlines the Outcome and Performance Indicator where baseline data was collected and reported for FFY 2016 SSIP Report. Other Outcomes and performance indicators where baseline data was collected and reported on in previous SSIP reports, are not included in the table below.

Table 15

Outcome	Performance Indicator
<u>Short Term (PD & TA)</u> <u>New:</u> EI Demonstration Sites will have the team structure necessary to implement EBPs (PSP Approach to Teaming)	1. 100% of Demonstration sites will have all nine components (of the teaming structure) in place for implementation of the PSP Approach to teaming.
<u>Short Term (M &A)</u> EI providers and families will understand the COS process.	1. 80% of families who complete the Family Questionnaire report that they understand the COS process 2. 90% of training participants maintained or improved form the pre-training to the post-training on COS Self-Assessment scores for questions related to the COS process.
<u>Intermediate</u> EI providers will implement EBP (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) ~~related~~ to support SE development with fidelity.	1. 75% of Demonstration Sites providers are implementing EBP (Coaching in the Natural Learning Environments) with fidelity.

d. Data collection procedures and associated timelines

Data collection procedures and associated timelines are included in detail in the SSIP Action Plan Progress Report (Appendix A) for each evaluation item. Some data collection tools used are tracking sheets, self-assessments, checklists, logs, monitoring

tools, and HEIDS. Generally, after baseline data, data is collected quarterly, 6-month and/or annual intervals.

e. Sampling Procedures

For the evaluation of the Fiscal short-term outcome that EI programs will have sufficient staff and services to implement EBPs and support to children and families, the State will be using APR reporting data for Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner in demonstration sites. Sampling data is used for this indicator and described in Monitoring Process below.

Monitoring Process

On-site monitoring occurs within the FFY being reported. The EI Self-Assessment Monitoring (SAM) Tool which was developed by Part C LA with feedback from EI providers was utilized to gather data.

1. Identification of Children. To ensure a random selection of children for review with the SAM Tool, the following criteria were followed:

    - Names of all children with an Initial, Review or Annual IFSP between July and two months prior to the on-site monitoring of the reporting FFY were obtained by Part C LA for each demonstration site. The timeframe was chosen to ensure that there was at least one month to confirm that services were provided in a timely manner within the reporting FFY.
    - Part C LA identified 10% of children at each demonstration site based on the December 1 Child Count, or a minimum of fifteen (15) children to be monitored, unless there were an insufficient number of children who met the above criteria. If there were an insufficient number of children, all were chosen to ensure as complete monitoring as possible.
    - An Initial, Review, or Annual IFSP for each selected child was reviewed to determine if new services were timely. If the Review or Annual IFSP was the identified IFSP and there were no new services, N/A was noted for this indicator.

2. Determination of Timeliness: The SAM Tool was completed for each child selected using the specified IFSP (Initial, Review, Annual), following the guidelines developed by Part C LA to determine if services were timely, consistent with Hawaii's definition for timely services.

    For each service, the following documentation was required to confirm the service was both provided and timely:

- If the service was provided by the program providing care coordination, documentation must be included in anecdotal notes in the official child's record.

- If the service was provided by a Part C program not providing service coordination, the provider must verbally inform the service coordinator of the date services were initiated or provide copy of written documentation.

- If the service was provided by a contracted fee-for-service provider, documentation must be via the required Service Attendance Log developed by the Part C LA.

- If the service was not timely due to an "exceptional family reason," there must be confirmation of the family reason via an anecdotal note in the official child's record (e.g., child was sick; family on vacation).

- If the service was late, and there was no documentation of an exceptional family reason (only a date of when the service occurred), it was considered a program reason and therefore did not meet the definition of timely services.

- If there was no documentation that the service was provided, it was considered a program reason and therefore did not meet the definition of timely services.

3. Self-Assessment Results

   - Raw data was gathered by Part C LA.

   - Part C LA inputted the data into the SAM database, which was developed by Part C LA.

   - Part C LA analyzed the data for noncompliance with Timely Services. The data was given to each demonstration site as part of the notification of noncompliance.

4. Verification of Data: The following activities occurred to verify the Self-Assessment results.

   - The SAM results were reviewed to identify any possible inconsistencies.

   - Program Managers/Supervisors were contacted, as necessary, for additional data to confirm results.

   - The SAM results were revised, if necessary, based on additional data received.

f. Planned data comparisons

   Pre- and Post- data analysis is identified in the SSIP Action Plan Progress Report (Appendix A) for several evaluation items. Table 16 below summarizes the planned data comparisons reported in FFY 2016 SSIP Report.

Table 16

Outcome/Output	Description of Data Comparison
<u>Short-Term (PD & TA) Outcome</u> EI Demonstration Sites will have the team structure necessary to implement EBP (PSP Approach to Teaming)	Pre-Demonstration Site Checklist for Implementing a Primary-Coach Approach to Teaming percentage compared to pre-implementation done prior to training and annually thereafter regarding team structure.
<u>Short-Term (PD & TA) Outcome</u> EI providers will ~~understand how~~ report improved quality implementation of EBP (Coaching Model in Natural Learning Environments) to support SE development.	Pre-training SE Competency Self-Assessment ratings by providers in demonstration sites will be compared to post-training SE Competency Self-Assessment done 6-months following the training and annually thereafter regarding how to support SE development.
Output (Fiscal): Allocated positions are filled	Pre- Staffing Plan implementation percentage of allocated positions in demonstration sites will be compared to Post- Staffing Plan implementation to assess if implementation plan is affecting the filled staffing position percentages.
Output (Fiscal): Telepractice ~~Technology established~~ implemented at each Demonstration Site.	First quarter after implementation compared to quarterly reports thereafter.
Short-Term (Fiscal) EI Programs will have sufficient staff and services to implement EBPs and supports to children and families.	Pre-implementation of EBP (PSP Approach to Team and Coaching in the Natural Environments) compared to annual data for timely services.
<u>Short Team (M & A)</u> EI providers and families will understand the COS process	Pre-training COS Self-Assessment ratings by providers in demonstration sites will be compared to post-training COS Self-Assessment done 6-months following the training and annually thereafter regarding their understanding of the COS process. Pre- training Family Questionnaire rating by families in demonstration sites will be compared to Post- Training Family Questionnaire rating done 6 months following the training and annually thereafter regarding their understanding of the COS process.

Outcome/Output	Description of Data Comparison
Short Term (M & A) EI Program Managers will have the access and the skills needed to use COS data for program improvement.	Pre-training COS Data Use Self-Assessment ratings by Program Managers in demonstration sites will be compared to post-training COS Data Use Self-Assessment done 6-months following the training and annually thereafter regarding their ability to use COS data for program improvement.
Intermediate (All) EI providers will implement EBP (PSP Approach to Teaming and Coaching in Natural Learning Environments) ~~related~~ to support SE development with fidelity.	Initial log (baseline data) compared to data after six coaching calls by Shelden and Rush to determine fidelity status. For those not at fidelity, data will be collected on a quarterly basis effective April 2018.
Intermediate (M&A) ~~EI Programs will use the self-assessment to monitor~~ Demonstration Site CCs ~~to ensure they~~ are implementing the COS process with fidelity.	Pre-training and post training data from monitoring process.
Long-Term (All) Infants and toddlers with disabilities in demonstration sites will have substantially increased their rate of growth in SE skills (including social relationships) by the time they exit EI.	Pre- SSIP implementation percentage of combined demonstration sites data of Positive SE Skills (including social relationships) Summary Statement 1 will be compared on an annual basis as SSIP improvement activities are implemented.

g. How data management and data analysis procedures allow for assessment of progress toward achieving intended improvements.

Implementation Workgroups utilized the Action Plan Progress Report (Appendix A to ensure Implementation Workgroups stayed on track. The Implementation Workgroup submits the Action Plan Progress Report (Appendix A) for their respective sections to the SSIP Coordinator on a quarterly basis.

With guidance from national TA consultants, "Measurement intervals, Data Management and Analysis Description" was added to the Header Columns.   The SSIP Coordinator revised the reporting format to ensure each category was addressed in the evaluation plan.

Implementation Workgroups are responsible for collecting and analyzing the data

for their respective sections and make changes to implementation activities and/or evaluation plan based on data analysis. For example, the PD & TA Implementation Workgroup is in the process of analyzing data collected from the SE Competency Self-Assessment. They will determine if any changes need to be made to the SE Competency Self-Assessment to ensure data is accurate and meaningful. Also, Self-Assessment data is part of the mentoring process to determine individualized training needs (one competency consistently low may indicate a training need).   The Staffing Implementation Workgroup reviewed data collected from the Staffing Survey and determined that another survey was needed to collect providers' perspective regarding staffing needs. It was also determined that a Salary Study was needed to support the development and implementation of the Staffing Plan.

Data and analysis was and will continue to be shared with other stakeholders and input will be obtained if any changes are recommended based on the data analysis.

2. How the State has demonstrated progress and made modifications to the SSIP as necessary

   a. How the State has reviewed key data that provide evidence regarding progress toward achieving intended improvements to infrastructure and the SiMR

   Data was collected and analyzed as outlined in the SSIP Action Plan Progress Report (Appendix A). Data was analyzed based on the measures and analysis plan identified for each outcome. The analysis determined if performance indicators were met or not and if outcomes were achieved or not.

   Of the 12 performance indicators reported on this reporting period, five (5) targets were met and seven (7) were not met. There were 12 performance indicators not reported on this year due to data not yet collected. Refer to the Action Plan Progress Report (Appendix A for more details.

   As mentioned in C.1g above, the Implementation Workgroups used the Action Plan Progress Report (Appendix A) and submitted it to the State via the SSIP Coordinator of their progress. The Implementation Workgroup is responsible for implementing the activities outlined in the SSIP Action Plan Progress Report (Appendix A) and documenting progress, including evidence to support the progress noted. The Implementation Workgroup also collected and analyzed data and made and/or proposed changes with stakeholder input based on the data analysis. Justification for any proposed changes were included in their report.

   The SSIP Coordinator reviewed and revised the SSIP Action Plan Progress Report with input from Stakeholders and national TA consultants to ensure the State continues to work towards achieving the SiMR.

Demonstration Site providers and mentors felt that there weren't clear expectations in determining fidelity. The State extended Shelden & Rush's contract to provide additional support to providers and mentors regarding the fidelity criteria and how to determine fidelity.

The mentoring plan has been revised based on the feedback and additional information received from Shelden & Rush.

b. Evidence of change to baseline data for key measures

Evidence of change to baseline data is included in the SSIP Action Plan Progress Report (Appendix A) in the Evaluation Plan section of the report for several evaluation items

Table 17 below summarizes the improvement activities and performance indicators related to outputs and if baseline data was collected in Phase III – FFY 2016 of the SSIP. It also states evidence of change or when it will be reported. Completed activities reported in previous SSIP reports are not included.

Table 17

Activity	Performance Indicator	Baseline Data Collected	Status/Evidence of Change
1-2. Develop or modify and implement provider self-assessment tool regarding SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments)	85% of all providers (including new staff) in the demonstration sites complete the SE Competency Self-Assessment prior to the training, 6-months after the training, and at least once each following fiscal year.	Yes	Data will be collected in July 2017 and every July thereafter for comparison. Progress change currently being analyzed with support from national TA consultants. Evidence of change will be reported next year.
1-3. Develop and implement a training plan for providers that addresses the SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning	100% of EI providers identified as needing additional training based on SE Competencies Self-Assessment have an individualized training plan.	No	Hawaii SE – Mentor Self-Assessment will be implemented in FFY 2018. Baseline data will be collected at that time.

Activity	Performance Indicator	Baseline Data Collected	Status/Evidence of Change
Environments)			
2-1. Hire and/or retain appropriate number of qualified staff to support children with SE needs	90% of all positions in each demonstration site are filled	Yes	FFY 2016 Q1 to FFY 2017 Q2 comparison: • 2 of 4 (50%) improved & exceeded target. • 1 of 4 (25%) improved, but did not meet the target. • 1 of 4 (25%) remained the same & did not meet the target.
2-2. Develop and implement telepractice capability and procedures	100% of demonstration sites will increase delivering services via telepractice by two hours per quarter	No	Analysis of data will be done within one month following the previous quarter once tele practice is implemented in FFY 2018.
3-2. Develop and implement a monitoring process ~~tool~~ to improve implementation of the ~~ensure~~ COS process ~~is being implemented with fidelity~~.	100% of Care Coordinators (CCs) in demonstration sites will implement the COS process with fidelity.	No	Analysis of data will be done in July for the preceding FFY once monitoring is initiated in FFY 2018.

Table 18 below summarizes the outcomes, performance indicator and if baseline data was collected in Phase III of the SSIP. It also states evidence of change or when it will be reported.

Table 18

Outcome	Performance Indicator	Baseline Data Collected	Evidence of Change
Short-Term (PD & TA) NEW: EI Demonstration Sites will have the team infrastructure necessary to implement EBP (PSP Approach to Teaming).	100% of Demonstration Sites will have all nine components of the teaming structure in place for implementation of the EBP (PSP Approach to Teaming).	Yes	Data collected to report teaming structure prior to becoming a Demonstration Site, prior to implementation, and one year after implementation.
Short-Term (PD & TA) EI providers will report improved quality implementation of EBP (Coaching Model in Natural Learning Environments) understand how to support SE development.	75% of providers who participated in the training demonstrate at least one step movement towards level III-Triadic Relationships on the SE Competency Self-Assessment	No	Data was collected in July 2017 and every quarter thereafter until January 2018 for comparison. Data is currently being analyzed to report evidence of change.
Short Term (Fiscal) EI Programs will have sufficient staff and services to implement EBPs and supports to children and families	Each demonstration site provides timely services by achieving 100% on APR Indicator 1	Yes	Originally reported FFY 2015 as baseline data; however, FFY 2016 data will be used as baseline data due to when data for timely services in collected. Evidence of change will be reported next year.

Outcome	Performance Indicator	Baseline Data Collected	Evidence of Change
<u>Short Team (M & A)</u> EI providers and families will understand the COS process	1. 80% of families who complete the Family Questionnaire report that they understand the COS process 2. 90% of training attendees maintained or improved from the pre-training to the post-training self-assessment scores for questions related to the COS process.	Yes	1. Comparison data will be collected within the next quarter after CCs complete the COS training 2. Comparison data will be collected quarterly after completing the COS training.
<u>Short Term (M & A)</u> EI Program Managers will have the access and the skills needed to use COS data for program improvement	Among Program Managers from demonstration sites: 1. 100% report on COS Data Use Self-Assessment that they can print out COS rating reports in HEIDS 2. 90% demonstrate an increase of at least one (1) point on their response to question on this competency	No	Data will be collected prior to training and 6 months after the training and annually thereafter.
<u>Intermediate (All)</u> EI providers will implement EBP (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) ~~related~~ to support SE development with fidelity	1. 75% of providers who participated in the trainings demonstrate at least one-step movement for each competency towards "actively supports caregivers" on the Hawaii SE Competencies Coaching Log Review	Yes	Comparison Data will be completed in FFY 2018.

Outcome	Performance Indicator	Baseline Data Collected	Evidence of Change
Intermediate (M & A) ~~EI Programs will use the COS Self-Assessment to monitor~~ Demonstration Site CCs ~~to ensure they~~ are implementing the COS process with fidelity	1. 75% of CCs who participated in the training will ~~demonstrate at least one (1) rating point increase on their COS Self-Assessment on~~ implementing the COS process with fidelity.	No	Data will be collected prior to training and 6 months after the training and annually thereafter.
Long-Term (All) Infants and toddlers with disabilities in demonstration sites will have substantially increased their rate of growth in SE skills (including social relationships) by the time they exit EI	Combined demonstration sites data meet Positive SE Summary Statement 1 Targets for: FFY 2015: 49.28% FFY 2016: 49.28% FFY 2017: 49.50% FFY 2018: 50.00%	Yes	The demonstration site percentage data: FFY 2015: 55.71% exceeding the target. FFY 2016: 62.37% exceeding the target

c. How data support changes that have been made to implementation and improvement strategies

Changes that were made to the Action Plan Progress Report (Appendix A), including the Evaluation Plan, were for clarity and alignment purposes or adjusting timelines due to barriers encountered that delayed implementation.

While no changes were made to implementation activities, there were three steps added (identified below) and Implementation Workgroups did additional things to support the implementation activities and steps based on data analysis and/or feedback from stakeholders such as:

PD Implementation Workgroup/SSIP Coordinator:

- Created SE Competency definitions as a supplement to the SE Self-Assessment
- Obtained from Shelden & Rush:
  - ✓ Fidelity criteria for Coaching within Natural Learning Environments, including revision to requirement for Care Coordinators

- ✓ Fidelity criteria for Hawaii SE Competency via Coaching
- ✓ Participant Agreement form for new providers and when it's rolled out statewide
- Provided additional webinars by Shelden & Rush to support Demonstration Sites
  - ✓ Webinar on "Determining Fidelity"
  - ✓ Webinar on "Coaching in Natural Learning Environments links to Positive SE Outcomes"
  - ✓ Coaching calls for providers who have not yet demonstrated coaching fidelity
  - ✓ Coaching calls for mentors who have reached fidelity
  - ✓ Coaching calls for mentors who have not yet demonstrated mentoring fidelity
- Revised Mentoring Plan
- Revised training module

Fiscal Staffing Implementation Workgroup:

- Conducted a salary study to have additional data to support the development of the Staffing Plan and legislative requests to increase funding for salaries.

Monitoring and Accountability Implementation Workgroup:
- Added three steps for clarity and alignment purposes
  - ✓ 3-2a. Develop COS Self-Assessment tool for providers
  - ✓ 3-2b. Disseminate and implement COS Self-Assessment tool to EI Providers
  - ✓ 3-2c. Analyze COS Self-Assessment data to identify training needs

The SSIP Action Plan Progress Report (Appendix A) identifies changes in the Improvement plan, barriers, actions to address barriers, description of adjustments and implications of the adjustments.

d. How data are informing next steps in the SSIP Implementation

Table 19 and 20 below outlines data collected in the second year of Phase III and the next steps regarding data collection and implementation activities. Many of the activities are in process or not yet initiated at the time of the SSIP Report submittal so the intent is to continue the activities in process and begin the activities not yet initiated based on revised timelines. The SSIP Action Plan Progress Report (Appendix A) outlines the activities and steps with adjusted timelines.

Table 19

Table 19Activity	Performance Indicator	Data Collected	Conclusion	Next Steps	
				Data	Implementation
1-1. Identify competencies related to SE development and incorporate them into EBP (PSP Approach to Teaming and Coaching model within natural learning environments) training.	1. 100% of demonstration site received SE Competencies 2. 100% of SE competencies are addressed across Shelden & Rush webinars and trainings	1. 100% of demonstration sites received the SE Competencies 2. 100% of SE competencies were addressed in Shelden & Rush webinars and/or trainings	Performance Indicator of 100% was met.	N/A – Completed	
1-2. Develop or modify and implement provider self-assessment tool regarding SE competencies and EBPs (PSP Approach to Teaming and Coaching Model within natural learning environments).	85% of all providers (including new staff) in the demonstration sites complete the SE Competency Self-Assessment prior to the training, 6-months after the training, and at least once each following fiscal year.	Demonstration Site Providers completed the SE Competency Self-Assessment 1/2017: 67/72 (93%) 7/2017: 61/72 (85%) 1/2018: 58/62 (94%)	Performance Indicator of 85% was met at each interval.	Data will be collected and analyzed to assess progress on an annual basis.	• SE Competency Self-Assessment will be implemented at least annually.

Activity	Performance Indicator	Data Collected	Conclusion	Next Steps	
				Data	Implementation
1-3. Develop and implement training plan for providers that address SE competencies and EBP (PSP Approach to Teaming and Coaching Model in Natural Learning Environments).	100% of EI providers identified as needing additional training based on the Hawaii SE Competency - Mentor Self-Assessment will have an individualized training plan.	Data collected for: Provider SE Competency Self-Assessment & Hawaii SE Competency Coaching Log Review	Data not yet collected – in process	Data will be collected regarding # and % of providers having an individualized training plan.	• Finalize training module on SE Competencies & EBP • Distribute list of resources/training opportunities Implement Hawaii SE Competency – Mentor Assessment based on Coaching Log Reviews to develop individual provider training plans
2-1. Hire and/or retain appropriate number of qualified staff to support children with SE needs	90% of all positions in each demonstration site are filled FFY 2016: Q1: 7/1/16 – 9/30/16 Q2: 10/1/16 – 12/31/16 Q3: 1/1/17 – 3/30/17 Q4: 4/1/17 – 6/30/17	FFY 2016 Q1 to FFY 2017 Q2 comparison: • 2 of 4 (50%) improved & exceeded target. • 1 of 4 (25%) improved, but did not meet the target. • 1 of 4 (25%) remained the same & did not meet the target.	Performance Indicator of 100% not met	Continue to collect Staffing List for comparison.	• Analyze staffing survey results to develop staffing plan • Develop staffing plan Implement staffing plan

Activity	Performance Indicator	Data Collected	Conclusion	Next Steps	
				Data	Implementation
2-2. Develop and implement telepractice capability and procedures	1. 100% of telepractice technology is available at each demonstration site 2. 100% of demonstration sites will participate in training based on the procedural guidelines training regarding implementation of telepractice 3. 100% of demonstration sites will increase delivering services via telepractice by two hours per quarter	Data is not yet available	N/A	Need to collect the following data: • telepractice technology available at demonstration site • attendance at trainings services via telepractice	• Establish Zoom license and WIFI prior to training • Finalize telepractice procedural guidelines • Finalize telepractice training • Conduct telepractice training • Implement telepractice
3-1. Develop or modify and implement COS process training to include:	100% of trainings provided to demonstration sites include the COS components	1. 100% of COS training modules including the three components	1. Performance Indicator of 100% met	1. N/A	1. N/A

Activity	Performance Indicator	Data Collected	Conclusion	Next Steps	
				Data	Implementation
• Purpose of child outcomes (CO) • COS process, including determining ratings • Engaging family/team in the process	2. 100% of EI providers in demonstration sites ~~attend~~ complete COS trainings	2. 43 of 63 (68%) providers completed the COS training modules.	2. Performance Indicator of 100% not met	2. Training attendance tracking sheet	2. Program Managers to ensure providers complete the COS training modules.
3-2. Develop and implement a monitoring ~~tool~~ process to ~~ensure~~ improve implementation of the COS process. ~~is being implemented with fidelity~~	100% of CCs in demonstration sites will implement the COS process with fidelity.	Data is not yet available	N/A	To be determined	Develop monitoring process
3-3. Develop and implement training module on using COS data for program improvement	100% of Program Managers from demonstration sites attended training	Data is not yet available	N/A	Training attendance	• Develop guidelines for using COS data for program improvement • Develop and Implement COS Data Use Self-Assessment • Develop and implement training on using COS data for program improvement

Activity	Performance Indicator	Data Collected	Conclusion	Next Steps	
				Data	Implementation
					• Develop individualized training plan based on COS Data Use Self-Assessment responses

Table 20

Outcome	Performance Indicator	Data Collected	Conclusion	Next Steps	
				Data	Implementation
Short-term: EI Demonstration Sites will have the team structure necessary to implement EBP (PSP Approach to Teaming).	100% of Demonstration Sites will have all nine components (of the teaming structure) in place for implementation of the PSP Approach to Teaming.	2 of 4 (50%) Demonstration Sites have all nine components	Performance Indicator of 100% not met	Collect data on a quarterly basis	Implement staffing plan developed by the Fiscal Staffing Implementation Workgroup with input from stakeholders
Short-term: EI providers will understand how report improved quality implementation of EBP (Coaching Model in natural learning environments) to support SE development for children ages 0-3.	75% of Demonstration Site providers who participated in the training will report being at or an overall step movement towards level III: Triadic Relationships for at least 7 competencies on the SE Competency Self-Assessment.	Providers report at being at Level III for at-least 7 competencies: 1/2017: 23% 7/2017: 30% 1/2018: 31%	Performance Indicator of 75% not met	Collect data on an annual basis	Disseminate surveys on annual basis, collect and analyze data.

Outcome	Performance Indicator	Data Collected	Conclusion	Next Steps	
				Data	**Implementation**
Short-term: EI programs will have sufficient staff and services to implement EBPs and supports to children and families.	Each Demonstration Site provide timely services by achieving 100% for APR indicator 1.	Timely Services Data: Programs that provided timely service: FFY 2015: 2 of 6 (33%) programs FFY 2016: 1 of 4 (25%) programs	Performance indicator of 100% not met	Collect data on an annual basis	Implement staffing plan and telepractice
Short-term: EI providers and families will understand the COS process.	80% of families who complete the Family Questionnaire report that they understand the COS process 90% of training attendees maintained or improved from the pre-training to the post-training on the COS self-assessment.	28 of 30 (93%) of families that completed the questionnaire reported that they fully understand the COS process. Baseline data was obtained	Performance indicator of 80% was met Need comparison data	1. Collect family questionnaire date within one month of Initial IFSP and Annual IFSP 2. Collect comparison data quarterly after completing the training	Collect and analyze family questionnaire and provider COS Self-Assessment data

Outcome	Performance Indicator	Data Collected	Conclusion	Next Steps	
				Data	Implementation
Intermediate: EI providers will implement EBPs (PSP Approach to Teaming and Coaching Model in natural learning environments) ~~related~~ to support SE development with fidelity.	1. 75% of Demonstration Site Providers are implementing EBP (Coaching Model in natural learning environments) with fidelity. 2. 75% of Demonstration Site Providers reach an average of 80% in supporting parent/caregiver level on the Hawaii SE Competencies Coaching Log Review.	1. 15% of providers are coaching with fidelity 2. 2% of providers are practicing fidelity in supporting caregivers regarding child's SE development with fidelity.	1. Performance indicator not met. 2. Performance indicator not met.	Collect and analyze data	Continue mentoring process to support providers in achieving fidelity.
Long-Term: Infants and toddler with disabilities in Demonstration Sites will have substantially increased their rate of growth in social-emotional skills (including social relationships) by the time they exit EI.	Combined Demonstration Sites data meeting positive SE Summary Statement 1. Targets: FFY 2015: 49.28% FFY 2016: 49.28% FFY 2017: 40.50% FFY 2018: 50.00%	Positive SE Summary Statement 1: FFY 2015: 55.71 FFY 2016: 62.37	Performance target met for FFY 2015 and FFY 2016.	Collect and analyze data	Implement the SSIP activities and steps

e. How data support planned modifications to intended outcomes (including the SiMR) – rationale or justification for changes or how data support the SSIP is on the right path

Changes to intended outcomes were for clarity and alignment purposes. It was addressed in Section A of this report and in the SSIP Action Plan Progress Report (Appendix A). No changes to intended outcomes were made as a result of evaluation data.

However, based on the data that was reviewed, it appears that progress is being made in the SSIP and Hawaii is on the right track. Seven (7) activities were implemented this year or on-going from previous years, six (6) steps were completed as originally scheduled, and eighteen (18) steps were in process or on-going. Furthermore, three (3) outputs were achieved this year as well as three (3) short-term outcomes and one (1) intermediate outcomes. It includes outputs and outcomes where data was collected and reported on as scheduled and will continue as outlined in the Action Plan Progress Report (Appendix A). Progress data will continue to be collected and analyzed to determine revisions that may be needed.

Although some timelines were adjusted and it slowed some of implementation activities/steps, the State is confident it has not impacted its ability to achieve the SIMR by the end of the SSIP.

The following table highlights the status of performance indicators for the respective workgroups that supports the SSIP is on the right path. Refer to the SSIP Action Plan Progress Report (Appendix A) for actual data and additional information regarding implementation activities and evaluation activities and outcomes.

Table 21

Implementation Workgroup	Activity	Performance Indicator	Status
PD & TA	1-1. Identify competencies related to SE development and incorporate them into EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments)	1. 100% of demonstration sites received Se Competencies 2. 100% of SE competencies are addressed across Shelden &Rush webinars and trainings	Completed 1. 100% of demonstration sites received the SE Competencies 2. 100% of SE competencies were addressed in the either the webinars and/or the trainings

Implementation Workgroup	Activity	Performance Indicator	Status
	1-2. Develop or modify and implement provider self-assessment tool regarding SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments)	85% of all providers (including new staff) in the demonstration sites complete the SE Competency Self- Assessment prior to the training, 6-months after the training, and at least once each following fiscal year.	In Process Completion of the SE Competency Self-Assessment by providers: • 93% prior to the training (baseline) • 85% (6 months after training, 7/2017)
	1-3. Develop and implement a training plan for providers that addresses the SE competencies and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments)	100% of EI providers identified as needing additional training based on SE Competencies Self-Assessment have an individualized training plan.	In Process • Tracking sheet developed to include all SE Competency Self-Assessment ratings/responses over time • Workgroup finalizing Training Plan • Workgroup is on track to implement other steps based on revised timelines
Fiscal Staffing	2-1. Hire and/or retain appropriate number of qualified staff to support children with SE needs	1. 90% of all positions in each demonstration site are filled 2. Staffing plan addresses 100% of staffing needs identified in staffing survey	In Process • Staffing list data analyzed • Staffing Survey completed and data being analyzed • Workgroup is on target to develop and implement staffing plan based on revised timelines

Implementation Workgroup	Activity	Performance Indicator	Status

Fiscal Telepractice	2-2. Develop and implement tele- practice capability and procedures	100% of demonstration sites will increase delivering services via Tele-Practice by two hours per quarter	In Process
			
			• Equipment received
			• Finalizing:
			  ✓ procedural guidelines
			  ✓ training modules
			• Workgroup is on target to provide training and implement telepractice based on revised timelines.

Monitoring & Accountability	3-1. Develop or modify and implement COS process training to include:
	  • Purpose of COS
	  • COS process including determining ratings
	Engaging family/team in the process
		1. 100% of trainings provided to demonstration sites include the COS components
		2. 100% of EI providers in demonstration sites ~~attend~~ complete COS trainings
			In Process
			
			• Adopted ECTA's on-line COS training module
			• Training implemented at Demonstration Sites
			• Workgroup is on target to provide training and implement telepractice based on revised timelines.

	3-2. Develop and implement a monitoring ~~tool~~ process to ~~ensure~~ improve implementation of the COS process ~~is being implemented with fidelity~~	1. ~~100~~85% of Care Coordinators (CCs) in demonstration sites will implement the COS Self-Assessment ~~process with fidelity~~.	In Process • COS Self-Assessment tool developed and implemented • COS Self-Assessment data will be analyzed

Implementation Workgroup	Activity	Performance Indicator	Status
		2. 100% of Demonstration Site will implement the COS monitoring process 3. 100% of Demonstration Site providers-identified as needing additional trainings/ support based on COS Self-Assessment and monitoring tool will have an individualized training plan.	• Workgroup is on target to develop and implement monitoring process based on revised timelines.

No changes were made to the SiMR. FFY 2015 and FFY 2016 data exceeded the target established in Phase II of the SSIP. Evidence of change data will be reviewed with stakeholders next year to determine if targets need to be adjusted.

3. Stakeholders involvement in the SSIP evaluation

   a. How stakeholders have been informed of the ongoing evaluation of the SSIP

   The evaluation plan is part of the SSIP Action Plan Progress Report. Refer to Table 12 in Section B2 (pages 24-26) of this report for stakeholder involvement and how they were informed of ongoing evaluation of the SSIP.

   b. How stakeholders have had a voice and been involved in decision-making regarding the ongoing evaluation of the SSIP

   Stakeholders participated in Implementation Workgroups that were responsible for collecting, managing, and analyzing evaluation data and the State Leadership Team where decisions were made. Stakeholders were also given opportunities to provide input prior to decisions being made as well as reviewing the SSIP Action Plan Progress Report that includes the evaluation plan. The State Team met with the Demonstration Site Program Managers monthly and they collected and provided

data as well as feedback throughout the implementation process.

Changes to implementation activities and/or evaluation plan will be made according to data analysis. Refer to Section C.1g (page 33) for examples of how stakeholders in implementation workgroups made decisions in implementation based on data analysis.

Refer to Table 12 in Section B2 (pages 24-26) of this report for stakeholder involvement and how they were involved in decision-making of ongoing evaluation of the SSIP.

D. Data Quality Issues

1. Data limitations that affected reports of progress in implementing the SSIP and achieving the SiMR due to quality of the evaluation data

   Table 21 highlights the following components related to data quality:

   a. Concern or limitations related to the quality or quantity of the data used to report progress or results

      - Baseline data regarding the staffing list for evaluating the Fiscal Activity 2-1. Hire and/or retain appropriate number of qualified staff to support children with SE needs. Programs were completing the Staff list form incorrectly so data reported in the fourth quarter of FFY 2015 was not accurate. The form was revised with written instructions and training on how to complete the form was provided to ensure accurate data was being reported.
      - One program did not complete the COS training so data reported is incomplete. While it may not be a data quality issue, the incomplete data impacted the data percentages.

   b. Implications for assessing progress or results

      - The staffing data submitted was inconsistent across programs so filled allotted positions could not be accurately determined; therefore, FFY 2015 data was not used and first quarter data for FFY 2016 is the baseline data.
      - Performance target was not met because one program did not complete the training.

   c. Plans for improving data quality

      - The Program Staffing List template was revised, instructions developed and distributed to Program Managers. The Contracts Coordinator and SSIP Coordinator provided technical assistance to all EI Programs. Program Staffing List was reviewed and corrections made prior to analysis.
      - The Program Manager of that one program will ensure providers complete the training by April 30, 2018.

Table 22

a. Concerns or Limitations	b. Implications	c. Plans for Improvement
Errors found in Demonstration Sites Staffing List	Contracts Coordinator corrects the errors found to ensure data is accurate and reliable.	Workgroup Co-Leads will work one on one with Demonstration Site Program Managers to ensure they understand

a. Concerns or Limitations	b. Implications	c. Plans for Improvement
		how to complete the form. Based on feedback, instructions will be revised.
One program did not complete the COS training.	Incomplete data.	Program Managers will follow-up with providers and ensure they complete the training modules by April 30, 2018.

E.   Progress Toward Achieving Intended Improvements

1. Assessment of progress toward achieving intended improvements

    a. Infrastructure changes that support SSIP initiatives, including how system changes support achievement of the SiMR, sustainability, and scale-up

    The State's commitment to implementing a structured PSP Approach to Teaming and Coaching Model in Natural Learning Environments requires infrastructure enhancement in the three strands: PD & TA, Fiscal, and M & A.

    Section A.2 identifies infrastructure changes that have supported SSIP initiatives and sustainability to ensure achievement of the SiMR. Tables 8-10 (pages 17-19) in Section A of this report identify infrastructure improvement activities and the status of steps for each improvement activity. Further details are included in the SSIP Action Plan Progress Report (Appendix A).

    The PD & TA Implementation Workgroup focused their work on building the capacity of the PD & TA system to support providers' implementation of EBPs. The workgroup revised the SE Competency Self-Assessment based on feedback and will be revising the mentoring plan based on feedback after completing the Shelden and Rush training process. Based on the feedback, the Demonstration Sites are receiving additional support from Shelden and Rush to address coaching with fidelity and supporting the sustainability of EBPs. Shelden and Rush developed a written fidelity criterion for coaching, a Participant Agreement Form and developed a new Coaching Log Summary Form for Care Coordinators. Furthermore, the new short-term outcome regarding teaming structure was added to ensure the team's infrastructure is maintained throughout the process.

    As a result of these infrastructure improvements, identified mentors are reviewing the SE Self-Assessment responses and Coaching Logs and providing support to providers in implementing EBPs related to SE competencies. Individual providers will have a training plan that may involve training and/or additional support by their mentor.

    The Fiscal Staffing Implementation Workgroup focused its effort on building the staffing capacity – having the appropriate number of qualified staff to meet the needs of the children and families served in EI. The Staffing Implementation Workgroup has gathered data via Demonstration Site staffing lists and staffing surveys. The Fiscal Staffing Implementation Workgroup decided to conduct an independent salary study since salary rates were one of the main issues/concerns identified in the surveys. The information gathered from the staffing list, surveys, and salary study will be used to develop a staffing plan and

was used to develop a funding request from the legislature. The staffing plan will incorporate the use of telepractice as developed by the Telepractice Implementation Workgroup as an option to ensure children and families have access to providers needed to support their child's SE development. Implementation of the staffing plan will ensure programs have the appropriate number of qualified staff needed to support children with SE needs.

The Monitoring and Accountability Implementation Workgroup focused its efforts on improving the capacity of the Monitoring and Accountability system to support program improvement over time. The workgroup has identified COS training modules that incorporate the purpose and process of the COS and engaging families in the COS process. The use of the training modules was implemented in January of 2018. COS procedural guidelines were updated to include revised forms and procedures such as conducting the COS process at Annual IFSPs. A COS Self-Assessment tool was developed and implemented to assess providers' knowledge and skills of the COS process as well as a family questionnaire to assess their understanding of the COS process. A monitoring process will be developed and implemented to develop an individualized training plan as needed to support providers in implementing the COS process with fidelity. A COS Data Use Self-Assessment will be developed and used to assess Program Manager's knowledge and skills. Training on how to use COS data for program improvement will be developed based on the COS Data Use Self-Assessment.

The TOA (Table 3, page 7) and the Logic Models (Appendix B) demonstrate how the activities, short-term and intermediate outcomes are expected to impact the SiMR.

Once the infrastructure improvements are established and EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments) are sustained over time in demonstration sites, they will be scaled up and implemented across all EI Programs statewide.

b. Evidence that SSIP's EBPs are being carried out with fidelity and having the desired effects.

The demonstration site providers and State Mentors received training from nationally recognized trainers, Shelden and Rush, on EBPs (PSP Approach to Teaming and Coaching Model in Natural Learning Environments).

One of the reasons Hawaii selected Shelden and Rush is their model of training that includes pre-webinars, on-site training, and six months of follow-up with the programs to ensure the practices are implemented with fidelity. They also recognize the value of mentors who will be involved in the training and will

receive on-going support from Rush and Shelden. Rush and Shelden's checklists and coaching logs will be utilized to collect data as well as to demonstrate that providers are implementing the model with fidelity.

The Shelden and Rush training incorporated natural learning environment practices, parent responsiveness and child learning, all of which are key to SE development. The PSP Approach to Teaming also builds in the EBP of building parent capacity (e.g., resource-based capacity-building practices, responsive caregiving practices) within every day routines and activities.

Shelden and Rush incorporated Hawaii's SE competencies into the training and developed a SE Competencies Log Review to evaluate provider implementation of SE practices with fidelity that they will be piloting with the Mentors coaching providers for the next 6 months.

All the Demonstration Site providers participated in the training by Shelden and Rush and received six (6) follow-up coaching calls. Of those that participated, 15% were practicing coaching fidelity.

Based on the fidelity status results, the State extended Shelden and Rush's contract to support other providers and mentors who are not yet practicing with fidelity.

c. Outcomes regarding progress toward short-term and long-term objectives that are necessary steps toward achieving the SiMR

Tables 4-6 (pages 12-15) in Section A of this report summarizes the status of the short-term, intermediate and long-term outcomes. Further details are included in the SSIP Action Plan Progress Report (Appendix A).

Based on the revised implementation timelines, data comparisons and evidence of change for outputs and outcomes are expected to be reported next year (Table 19 & 20, pages 41-47).

d. Measurable improvements in the SiMR in relation to targets

The SiMR target for FFY 2016 has been met. Further details are included in the SSIP Action Plan Progress Report (Appendix A).

F. Plans for Next Year

1. Additional activities to be implemented next year, with timelines

   Tables 4-6 (pages 12-15) in Section A of this report outline the Improvement Activities and status of the steps to achieve the improvement activities. All the steps that have not been initiated are targeted to be initiated and reported on next year.

   The SSIP Action Plan Progress Report (Appendix A) has additional data and timelines for each of the activities and steps.

   While all the activities/steps in the Action Plan Progress Report (Appendix A) are important, Table 22 below highlights critical activities/steps the respective implementation workgroups will be developing and/or implementing next year to progress towards achieving the SiMR.

Table 23

Implementation Workgroup	Activity Steps/Data Collection & Analysis
PD & TA	• Finalize the SE Competency and EBPs training module • Implement the SE Competency – Mentor Assessment • Continue supporting providers and Mentors in reaching fidelity of EBPs (Primary Service Provider and Coaching Model in Natural Learning Environments) • Develop and Implement Individualized Training Plan as part of the mentoring process
Fiscal – Staffing	• Develop and implement staffing plan
Fiscal – Telepractice	• Develop and implement telepractice training • Implement telepractice
M & A	• Develop monitoring tool • Develop and implement monitoring process • Develop and implement training on using COS data for program improvement

2. Planned evaluation activities including data collection, measures, and expected outcomes

   Tables 4-6 (pages 12-15) in Section A of this report outline the Evaluation Activities and Outcomes that include the status of data collection and Table 11 (pages 20 – 22) in Section B of this report outlines the Status of output components and conclusions based on the completion of the respective portion of the output

completed.   All the activities and outcomes where data collection has not been initiated are targeted to be initiated and reported on next year:

- Professional Development and Technical Assistance Implementation Workgroup will collect and report data on development and implementation of individualized training plans related to SE competencies

- Staffing Implementation Workgroup plans to collect and report data related to the development and implementation of the staffing plan

- Telepractice Implementation Workgroup plans to collect and report data on:
  - ✓ Technology for telepractice available at the Demonstration Sites
  - ✓ Participation in Telepractice Training
  - ✓ Services delivered via telepractice

- Monitoring and Accountability Implementation Workgroup will collect and report data on:
  - ✓ Implementation of the COS monitoring process
  - ✓ Development and implementation of individualized training plans
  - ✓ Participation in COS Data Use for Program Improvement training
  - ✓ COS Data Use Self-Assessment
  - ✓ Implementing the COS process with fidelity

The SSIP Action Plan Progress Report that includes the Evaluation Plan (Appendix A) has additional data and timelines for each of the activities and outcomes.

3. Anticipated barriers and steps to address those barriers

While the SSIP is important to enhancing Hawaii's early intervention system, competing priorities continues to be a challenge for implementation workgroups as the SSIP work is an added responsibility to staffs' existing job duties.

Currently the Action Plan Progress Report is submitted to the SSIP Coordinator on a quarterly basis. Effective July 2018, implementation workgroup will update their Action Plan Progress Report within one month of receiving feedback from the SSIP Coordinator in addition to their quarterly submissions.

4. The State describes any needs for additional support and/or technical assistance

Hawaii utilized all the national technical assistance (TA) that was made available to the States. Anne Lucas and Kathryn Morrison are the TA consultants that worked tirelessly with Hawaii. They are very knowledgeable about Hawaii's EI system, which allowed them to provide individualized TA. The TA Consultants work well as a team

and keep Hawaii on track. They share resources, review SSIP materials and reports thoroughly, analyze data, and provide exceptional overall guidance around the SSIP. The progress Hawaii has made is in large part due to the cohesive teamwork and expertise of our TA consultants.

Hawaii's original evaluation plan that was submitted was revised many times and was overwhelming and confusing. The TA consultants worked with Hawaii to streamline the evaluation plan and identify appropriate measurements needed to accurately assess progress of activities and outcomes.

Hawaii will continue to access TA around the overall implementation and evaluation of the SSIP. Specific TA will be requested based on need. For example, Anne Lucas will provide TA directly related to PD & TA (Strand 1); ECTA and NCSI will provide TA related to Telepractice (Strand 2), and Abby Weiner and Amy Nichols will provide TA directly related to the COS process (Stand 3). ECTA and NCSI (Margaret Gillis and Kathryn Morrison) will provide TA with data analysis across all three strands. In addition, Hawaii has been selected to be part of the Early Childhood Personnel Center Cohort 3 to develop the Comprehensive System of Personnel Development.

The Early Childhood Technical Assistance Center (ECTA), NCSI SE Cross State Learning Collaborative, the Center for IDEA Early Childhood Data Systems (DaSy), the National Center for Systemic Improvement (NCSI) and OSEP are all valuable sources of knowledge and resources that Hawaii plans to continue to access as needs arise during the implementation and evaluation phases.

APPENDICES: