## Nebraska IDEA Part C Results Driven Accountability Quality Home Visitation Practices Evaluation February 2016 Executive Summary

The Nebraska Department of Education and the Nebraska Department of Health and Human services have developed a State Systematic Improvement Plan (SSIP) to improve State Identified Measurable Results (SIMRs) related to increasing the number and percentage of infants and toddlers enrolled in Part C (early intervention) services who demonstrate progress in the acquisition and use of knowledge and skills. In order to impact these results, Nebraska has identified three improvement strategies: (1) Implementation of the Routines-Based Interview (RBI) as the recommended child and family assessment process; (2) Development of meaningful and measurable child and family outcomes using information obtained from the RBI; and (3) Implementation of quality routines-based home visits. The implementation of the RBI and the development of meaningful and measurable child and family outcomes the strategies are being actively promoted across the state via training and technical assistance.

In order to identify the remaining statewide training needs related to quality home visits, a sample of home visits was reviewed to explore the current status of home visitation practices. Three groups with varying levels of RBI training submitted videotaped home visits for review: (1) providers with two to three years of experience with RBI and functional outcomes (2) providers recently trained in RBI and functional outcome practices and (3) providers with no RBI or functional outcomes training.

## **Quality Home Visit Practices**

Quality evidenced based home visitation practices promote child development by (1) strengthening parenting confidence and competence (Klass, 2010) and (2) facilitating developmentally supportive parent-child interactions (Roggman, et al., 2012).

Key home visit practices include:

- Home visitor relationship with family and responsiveness to family
- Parent and child **engagement** during home visits
- Home visitor collaboration with the family
- Facilitation of parent-child interactions



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NDE RDA Home Visitation Practices Executive Summary

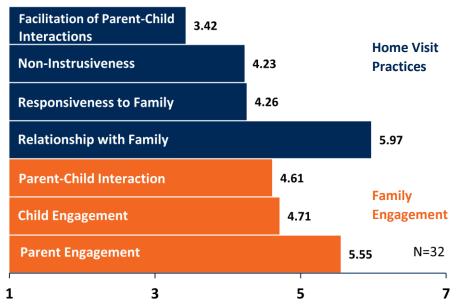


The *Home Visit Rating Scales-Adaptive and Extended* (**HOVRS-A+ v.2.1**) assesses the quality of home visitation practices based on a video of a home visit. The observational measure is scored on a 7 point scale, with **7** indicating **high quality**. The HOVRS-A+ v.2.1 results are reported in two domains. The first domain, *Home Visit Practices,* measures the home visitor's responsiveness to the family and how the visitor facilitates parent-child interaction, builds relationships with the family, and uses non-intrusive approaches. The second domain, *Family Engagement,* measures parent-child interaction and the level of parent and child engagement within the activities of the home visit.

## What was the quality of home visit practices?

### Home Visitors have built strong relationships with their families.

Parents were engaged during home visits.





# Implementation of the RBI in and of itself was not enough to signifcantly influence home visit practices.

To explore the relationships between implementation of the RBI and writing fucntional outcomes, and implementation of quality home visit practices, EI providers were assigned to three groups: 1) EI providers who have used the RBI for 2-3 years; 2) EI providers recently trained on the RBI; and 3) EI providers who have not been trained on the RBI. Comparisions between the quality of home visit practices for each group found no significant differences.

## Summary

A quality benchmark was used to measure the percentage of providers meeting or exceeding quality practices on the HOVRS. The subscales which should be targeted are those which did not reach a level 5. Future considerations for quality home visit implementation training and technical assistance include supporting early intervention providers in:

- Actively engaging both the parent and child in daily routines and activities during home visits
- Promoting positive parent-child interactions during home visits
- Collaborating with parents to support their child's development in daily routines and activities outside of home visits

The full report can be found at: <u>http://edn.ne.gov/cms/sites/default/files/pdf/Quality%20home%20visitation%20report%204.22.16.pdf</u>







#### WHAT IS GETTING READY?

Getting Ready is a *child- and parent-focused, strengths-based intervention* aimed at enhancing the school readiness of young children birth to age five who are growing up in adverse socioeconomic conditions. It focuses on *strengthening relationships in children's lives*, including relationships between parents and their young children, their children's caregivers and their educators. Getting Ready aims to support the "curriculum of the home" for young children and families through an individualized and culturally sensitive approach to service delivery in home- and center-based settings.

#### HOW IS THE INTERVENTION IMPLEMENTED?

The Getting Ready<sup>1</sup> intervention is a process of interacting with families that occurs during all exchanges with them (e.g., home visits, conferences, informal interactions). It builds on culturally relevant family and child strengths. It is not a curriculum or a packaged, stand-alone program, but rather an ecologically sound, intentional approach for infusing meaningful parent engagement into all aspects of the natural early childhood environment.

Early childhood professionals (e.g., teachers, home visitors, child care providers) participate in *formal training* that provides them information on how to blend important developmental objectives with effective parent-child interactions. Early childhood educators receive *ongoing coaching* from a master coach to support their use of research-based strategies that promote responsive and effective parent-child interactions. In addition, coaches help teachers learn to engage with families in *targeted, collaborative problem-solving* to set goals and support children's development.

#### WHAT IS THE EVIDENCE OF IMPACT?

A great deal of support from a randomized trial now points to the positive effects of the Getting Ready intervention on children's school readiness and family engagement.<sup>23,8</sup> *Compared to their counterparts in the control condition, over time, preschool children in the Getting Ready treatment group demonstrated improved:* 

- *social-emotional competencies*, including enhanced levels of attachment behavior with adults; increases in self-initiative; reductions in anxiety / withdrawal behaviors; and reduction in activity levels.
- \* *self-regulation*, including declines in overactive behaviors. Importantly, positive affect and verbalizations improved among children whose mothers reported elevated levels of depression.
- Ianguage and early literacy skills, including children's use of language, early reading and writing skills. Expressive language improved among children identified as having a developmental concern.

Additionally, data indicate that the Getting Ready intervention is effective at improving parenting behaviors known to support positive child outcomes. *Compared to their counterparts in the control condition, parents in the Getting Ready treatment group*<sup>4</sup>:

- ★ interacted with their children using a greater degree of warmth and sensitivity.
- $\star$  demonstrated more skills to *support their children's autonomy*.
- $\star$  provided more appropriate supports for their children's learning.
- $\star$  offered their children more *appropriate guidance and directives*.

Finally, data also indicate that the Getting Ready intervention is being *implemented with fidelity* – as evidenced by the observed behaviors of home visitors and teachers in their interactions with families – and is *viewed favorably* by early childhood professionals.<sup>5,6,7</sup>

Two additional federally-funded randomized trials of Getting Ready are currently underway. One is investigating the effects of the intervention for preschool children identified as most at risk at age 3, and the second is exploring intervention effects for infants/toddlers in Early Head Start center-based settings.





#### SELECT GETTING READY PUBLICATIONS

- 1. Sheridan, S. M., Marvin, C. A., Knoche, L. L., & Edwards, C. P. (2008). Getting ready: Promoting school readiness through a relationship-based partnership model. *Early Childhood Services*, 2, 149-172.
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- 3. Sheridan, S. M., Knoche, L. L., Kupzyk, K. A., Edwards, C. P., & Marvin, C. (2011). A randomized trial examining the effects of parent engagement on early language and literacy: The Getting Ready Intervention. *Journal of School Psychology*, *49*, 361-383.
- Knoche, L. L., Edwards, C. P., Sheridan, S. M., Kupzyk, K. A., Marvin, C. A., Cline, K. D., & Clarke, B. L. (2012). Getting Ready: Results of a randomized trial of a relationship-focused intervention on parent engagement in rural Early Head Start. *Infant Mental Health Journal*, 33, 439-458.
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- 7. Brown, J. R., Knoche, L. L., Edwards, C. P., & Sheridan, S. M. (2009). Professional development: A case study of early childhood professionals in the Getting Ready Project. *Early Education and Development*, 20, 482-506.
- 8. Sheridan, S.M., Knoche, L.L., Edwards, C.P., Clarke, B.L., Kim, E.M, & Kupzyk, K.A. (2014). Efficacy of the Getting Ready Intervention and the Role of Parental Depression. *Early Education and Development, 25, 1-24.*

