

Results Driven Accountability (RDA) Stakeholder Meeting

October 29, 2024

Jessica Anthony, Amy Bunnell, Cole Johnson,
Sue Bainter, Janice Lee, Tina Kilgore



**Nebraska Early
Development Network**

Babies can't wait

Agenda

- RDA and State Systemic Improvement Plan Overview
- Stakeholder Recommendations
- EDN Co-Lead Updates
- Wrap Up



**Nebraska Early
Development Network**

Babies can't wait

The work of RDA shaped a mission.... Routines Based Early Intervention (RBEI)

*To promote the growth and development of infants and toddlers with disabilities, ages birth to three years, by helping **families** build upon activities they do everyday to **meet their own needs and support their child's learning.***

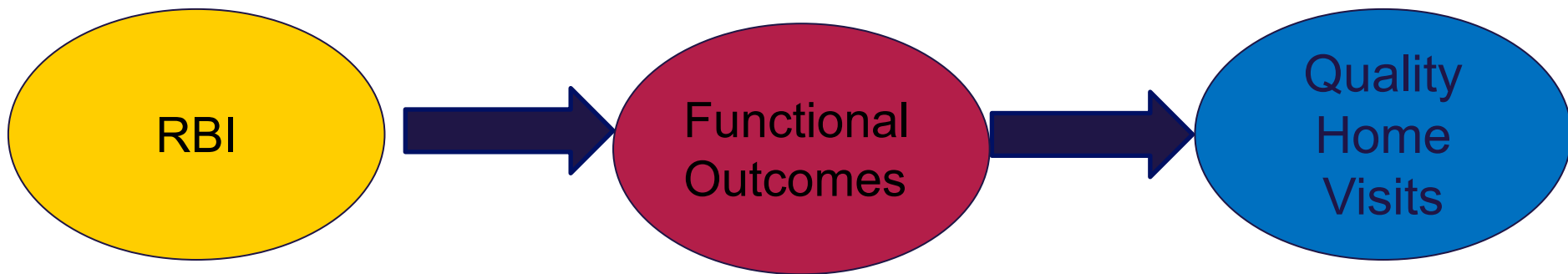


Nebraska Early
Development Network

Babies can't wait

Routines Based Early Intervention (RBEI)

3 Improvement Strategies:



**Nebraska Early
Development Network**

Babies can't wait

Nebraska's Early Intervention Plan

IF the state provides supports and training to the PRT's to

(1)implement authentic child and family assessment (RBI),

(2)write functional and meaningful child and family outcomes,

and (3)implement routines-based home visits,

AND the PRT's implement these strategies with fidelity,

THEN Nebraska's federal child and family outcomes will improve.

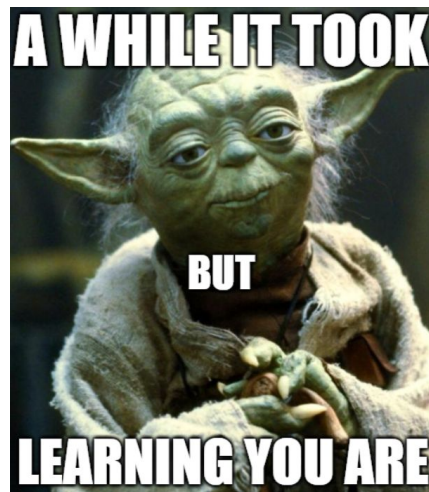


Nebraska Early
Development Network

Babies can't wait

Things We Have Learned

- Evidence-based practices when implemented with fidelity
- Enhanced positive results when used as an overall approach (RBEI)
- By November 2024, all PRTs in Nebraska will have been trained in all 3 practices



Early Intervention Evidence-Based Practices

1. Routines-Based Interview (RBI)
2. Functional IFSP Outcomes
3. Quality Routines-Based Home Visits
(*Getting Ready Approach*)

<https://edn.ne.gov/cms/routines-based-early-intervention>



**Nebraska Early
Development Network**

Babies can't wait

Planning Region Team 6

- **Michele Rayburn, Director of Student Services**
- **Holli Lovegrove, Student Services Supervisor**

Where We Are Now

- PRT Leadership Teams Provide Implementation Supports
- Set PRT Goals via TIP
- Team Self Assessment Identifies Quality EI Components
- PRTs with Organized EI Teams Implement Effectively



Professional Development/ Technical Assistance Supports



**Nebraska Early
Development Network**

Babies can't wait

RBEI Refreshers

- Designed in conjunction with local Planning Region Team to meet individual region's needs
- Facilitated by TA to ensure fidelity
- Encourage use of local data to determine focus
- Use information from any of the 3 evidence-based practices



Nebraska Early
Development Network

Babies can't wait

Using the RBI and Quality Home Visits to Develop a Quality IFSP

Changes IFSP teams are making:

- Draft outcomes directly from RBI
- SC and providers collaborate with families to write IFSPs
- Determine measurement of outcomes at IFSP
- Individualize *what will be done by whom*



Quality Individualized Family Service Plans (IFSPs)

- **Shelby Henderson, Parent**
- **Annie Springer, Services Coordinator**
- **Michelle Kildare, Services Coordinator**



Nebraska Early
Development Network

Babies can't wait

Trends from Outcome Analysis

- Measurement continues to improve. We are seeing fewer measurements written as percentages. Outcome measurement is more “doable” for the family.
- Family outcomes are less passive.
- Improvement in the the use of functional skills w/in the routine.
- Family friendly language is being used. However, the final outcome may not include parent words.

Trends from Outcome Analysis

Including a **specific routine** on the priorities page leads to more **functional outcomes** that can be measured by families in a more **meaningful** way.



**Nebraska Early
Development Network**

Babies can't wait

Trends from Outcome Analysis

“Child” priorities should be written as **child goals** so that actual change in child development is measured.

Priority: *Lizzie will tolerate hair washing.*

Outcome: *Ben and Jane will learn strategies to help Lizzie tolerate hair washing.*

Better: *Lizzie will participate in bathtime by tolerating hair washing. We will know she can do this when she allows Jane to wash her hair (without fussing) 2 times a week for 3 consecutive weeks.*

Different Outcomes = Different Function

Child

- Child is the actor
- Describes improved child participation in an everyday routine
- Something the child needs to do differently
- Focus is on the child's acquisition of new skills by when

Family

- Caregiver is the actor
- Improves family's overall quality of life
- Something the family wants to do differently
- Focus is on what the family will do by when



Nebraska Early
Development Network

Babies can't wait

Sustainability of Routines Based Early Intervention



**Nebraska Early
Development Network**

Babies can't wait

Implementation Stages

Exploration

Collect baseline data.

Identify improvement strategies based on evidence.

Establish RDA stakeholder group.

Installation

Develop training plan/ TA support.

Identify pilot PRTs.

PRT Team Self Assessment.

Form PRT Leadership Teams.

Initial Implementation

Systematically train all PRTs based on readiness for each strategy.

Identify PRT level coaches.

Implement/ track fidelity processes.

Full Implementation/ Sustainability

Ongoing data collection.

Enhance coaching supports.

Develop new trainings based on integration of strategies.

What is Fidelity?

An evidence-based practice that is teachable, doable, and uses clearly defined behavior(s) that providers and services coordinators can demonstrate with children and families.

In a nutshell, **if** the EI professional uses the practice as it was intended, **then** he/she can expect the identified evidence based results.



**Nebraska Early
Development Network**

Babies can't wait

Reaching/Sustaining Practice Fidelity

Practice fidelity is not a single event. It includes multiple complex decisions, actions and corrections over time, leading to sustainability.



Use data to guide decisions - what's working, what's not, and why.



Use a coaching process (observation tools, action plans, etc.) to support practice fidelity.



Regularly share action plan and data.

Building a Coaching Infrastructure for RBEI



Promoting Outcomes for
Infants/Toddlers with
Disabilities through
Evidence-Based Practices

cei.unl.edu

Lisa L. Knoche
10.29.24

Advisory Board and Focus Group Information

- We are conducting the Coaching in Early Intervention research study, which focuses on the development and evaluation of a coaching model to provide support to coaches and early intervention personnel providing services to families with infants/toddlers with disabilities.
- The RDA Stakeholder Group is an advisory group for our study. We will be asking you some questions for your input and will be using these to help shape our research.

Advisory Board and Focus Group Information

- Thus, your involvement in this focus group/stakeholder feedback session includes research.
- You do not have to participate in this study.
- If you have questions about your rights as a research subject, you may contact the UNL Institutional Review Board at 402-472-6965.
- Do you have any questions you would like answered now?

Project Team

University of Nebraska-Lincoln: Nebraska Center for Research on Children, Youth, Families and Schools

- Lisa Knoche
- Rachel Schachter
- Gwen Nugent
- Susan Sheridan
- Sue Bainter
- Sommer Fousek
- Sandra Scruggs

Nebraska Early Development Network

- Part C Services for Infants/Toddlers with Disabilities
- Co-led by Nebraska Department of Education and Nebraska Department of Health and Human Services

State/Mentor Coaches

- Janice Lee
- Sheila Brodersen
- Tina Kilgore
- Sue Borchert

Funder

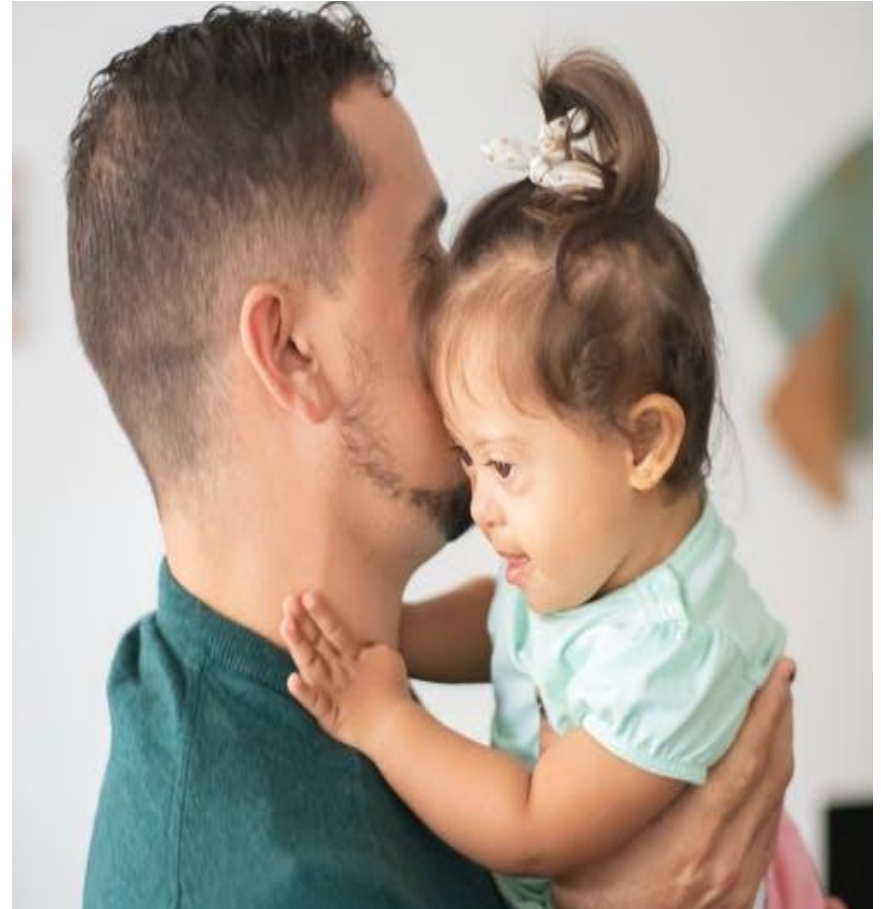
- US Department of Education; Office of Special Education Programs
- Model Demonstration Project

Thanks to
our
partnering
planning
region
teams,
coaches,
administrator
s, providers,
services
coordinators
and families.

Thank
You

Project Objectives

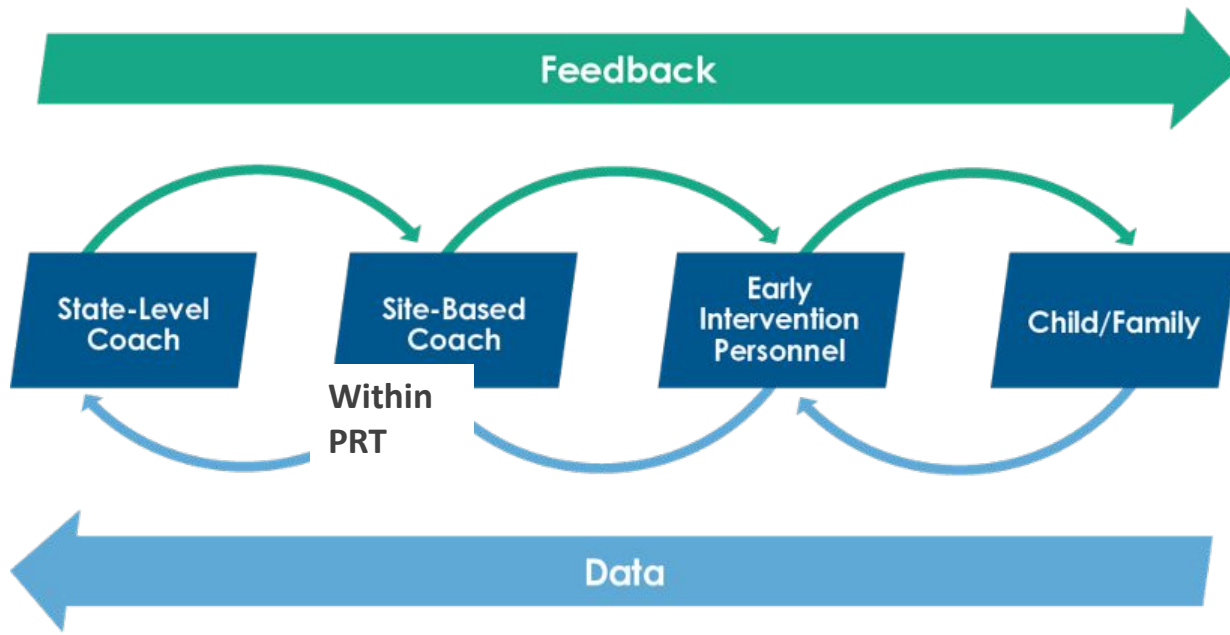
- (1) Support and improve *infant/toddler developmental outcomes*;
- (2) Encourage and promote *use of EBPs* by local EI personnel;
- (3) Improve *knowledge, skills and practices of site-based coaches* regarding coaching practice, data-driven activities and EBPs for site-based coaches;
- (4) Establish *sustainable coaching systems* at the state/local levels.

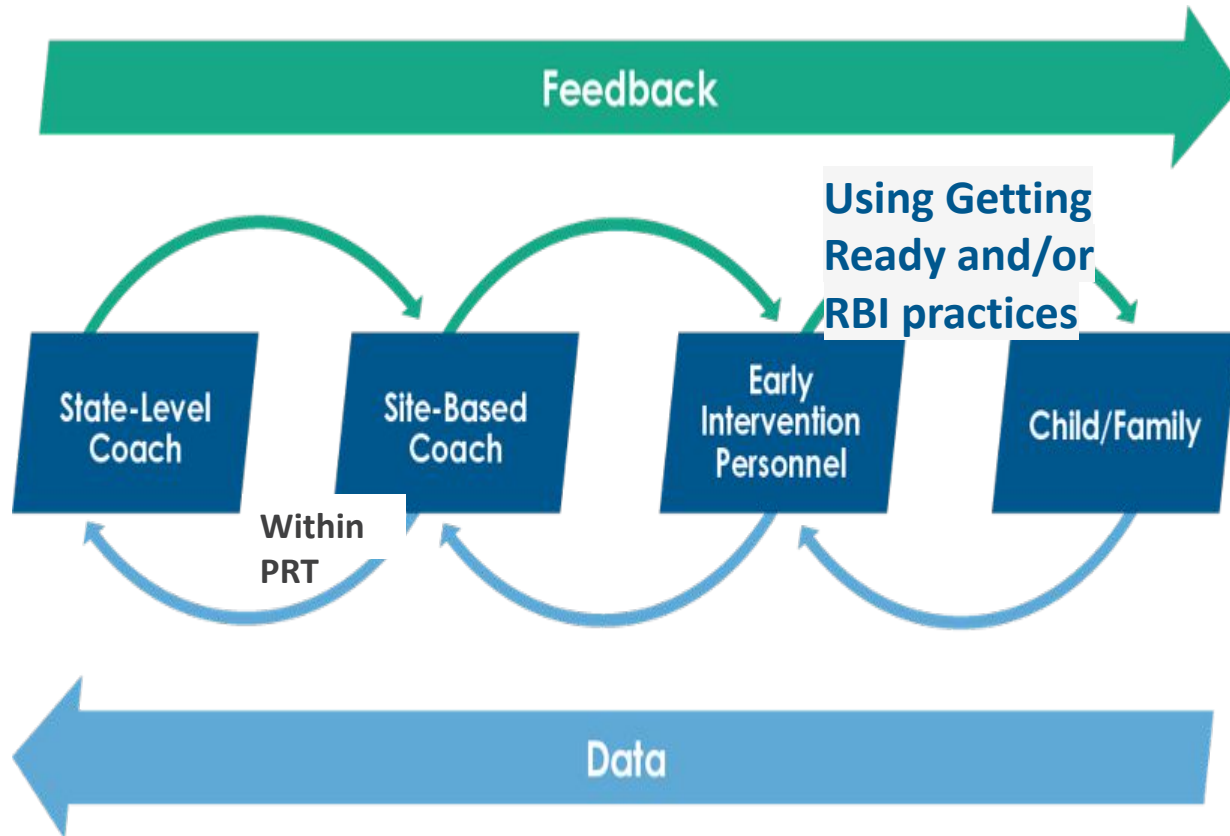


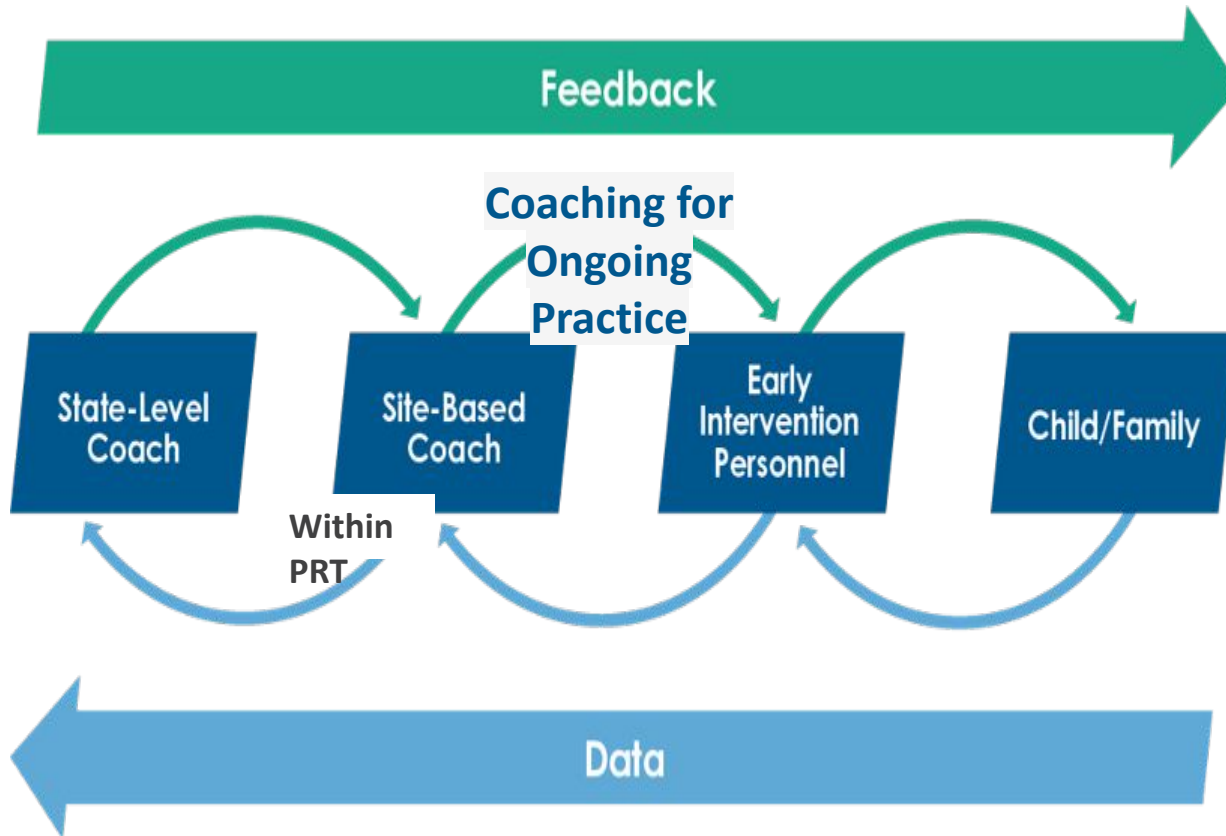
What did we do?

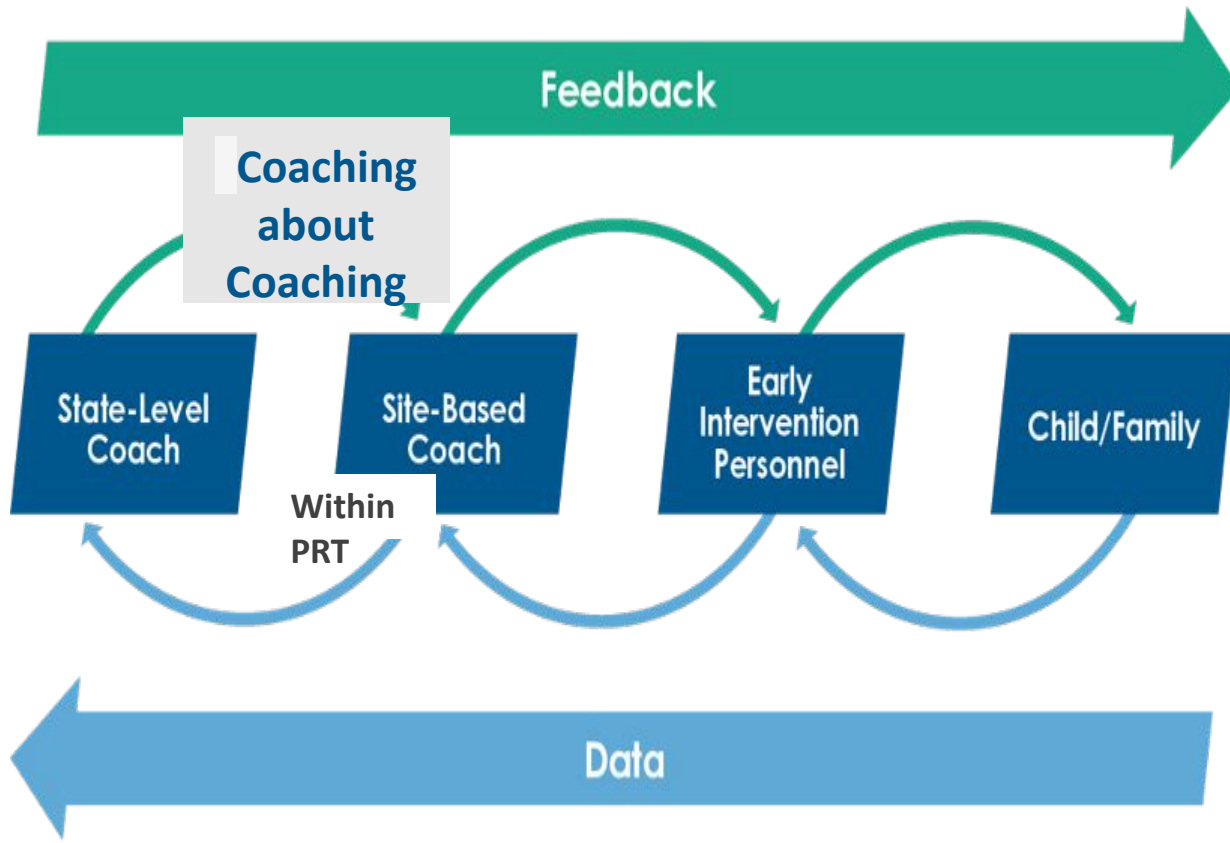


- Coaching in Early Intervention (CEI) built on the strengths of the state system.
- CEI created **system of support, through coaching**, for use of Getting Ready and RBI strategies with fidelity by providers and services coordinators, including approval coaches.





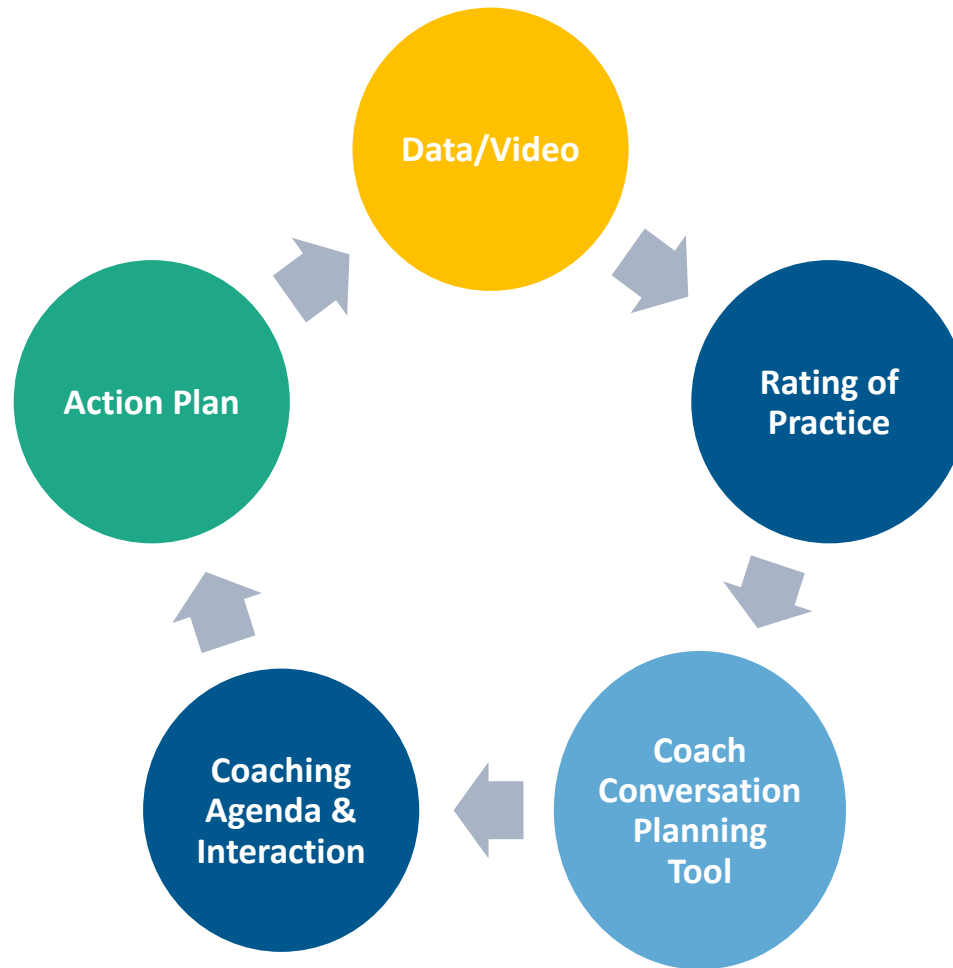




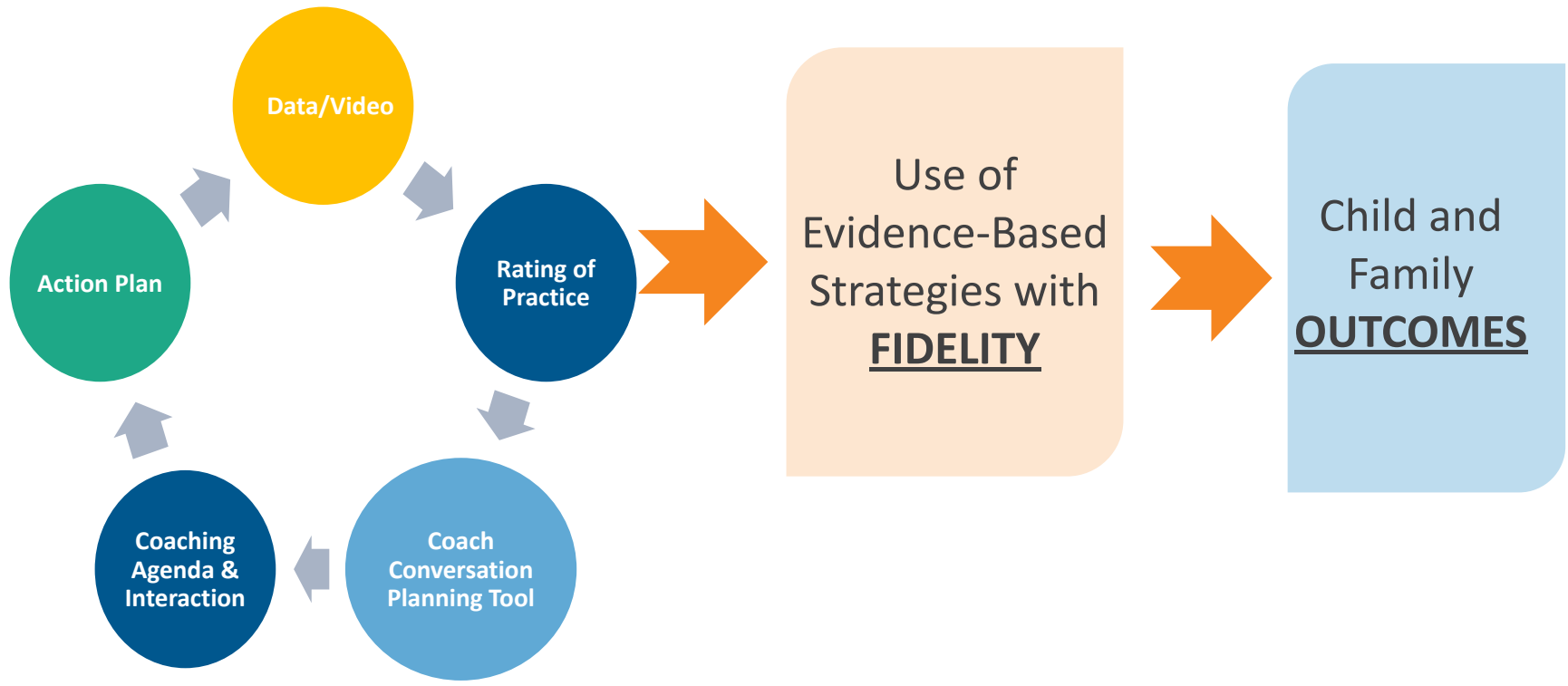
Who was involved?

- State Coaches: 4
- PRTs: 12
 - Approval/Site Coaches: 19
 - EI Professionals: 51
 - Families: 76

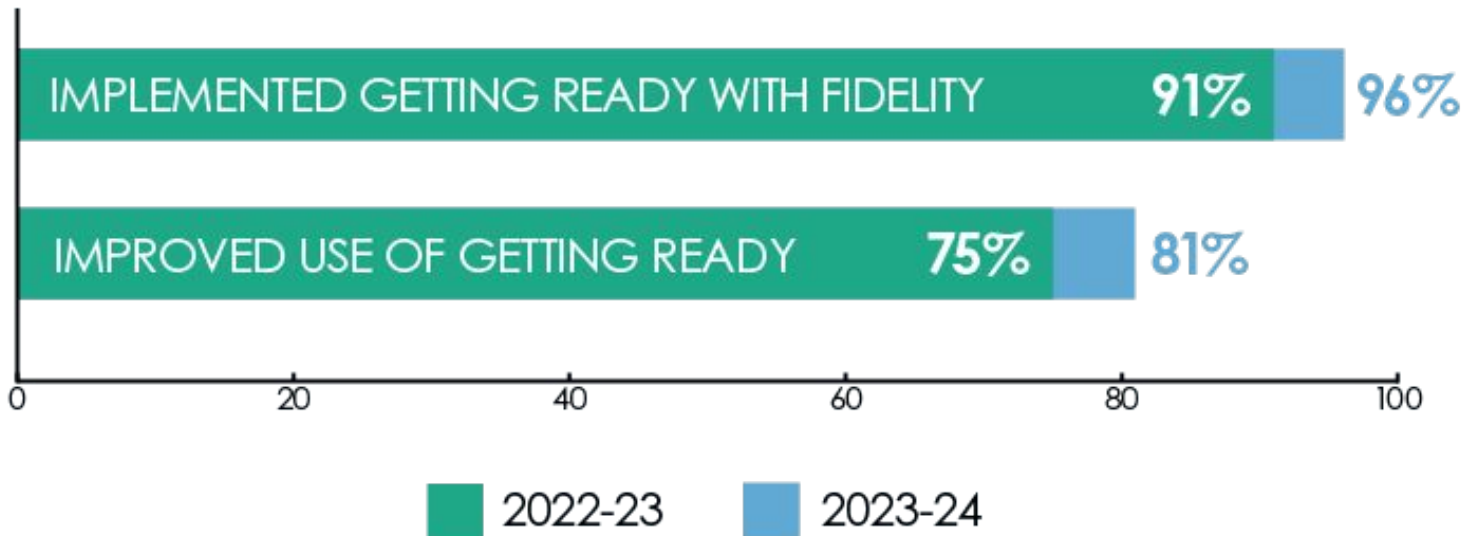
Coaching: A Continuous Improvement Cycle



Continuous Improvement Cycle

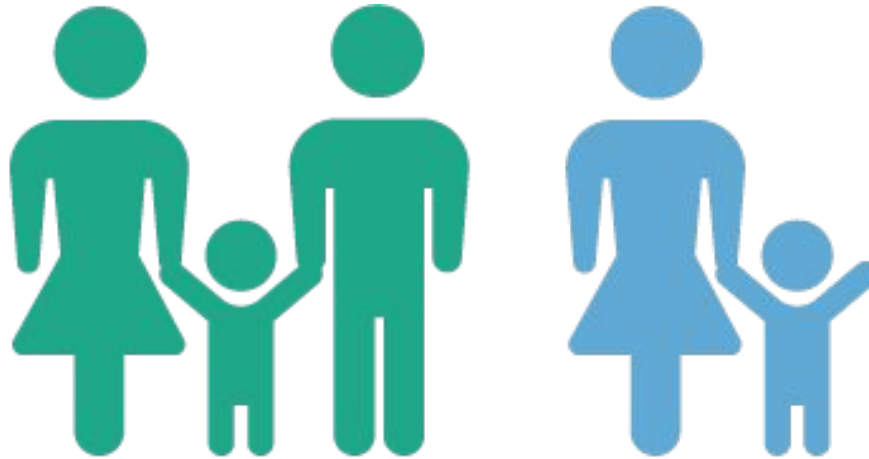


Of providers and service coordinators who received CEI coaching:





100%



Of families were satisfied with early intervention personnel efforts.

Two vertical bars on the left side of the slide: a dark blue bar on the left and a teal bar on the right.

***Coaching is critical to achieving
outcomes.***

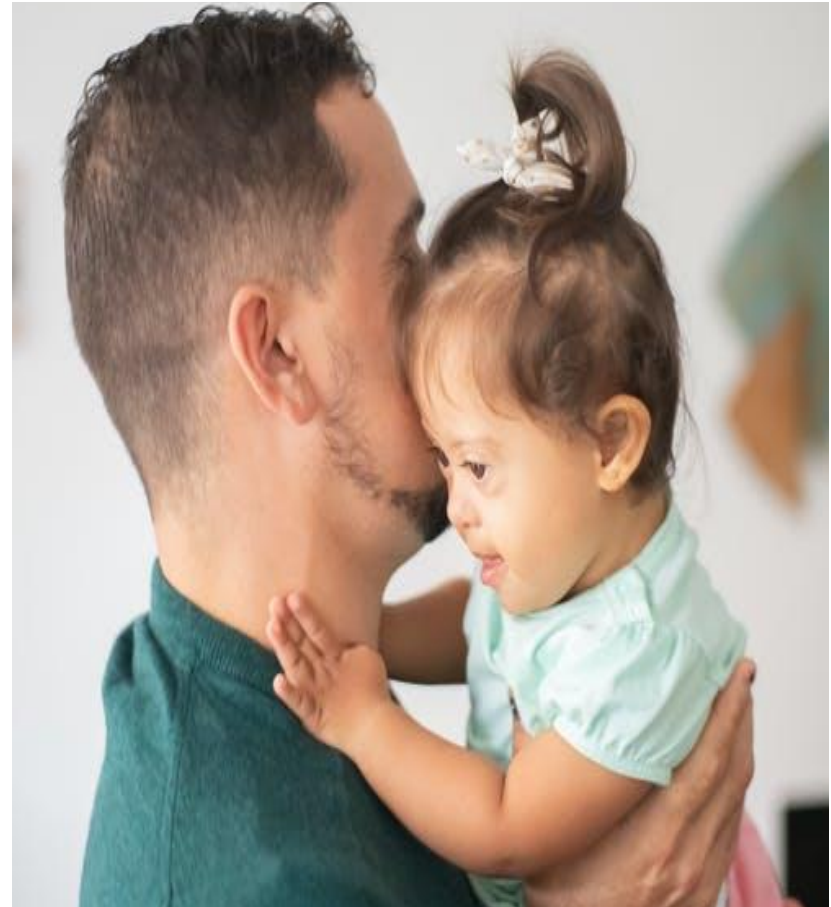
Input



- How could you elevate coaching of EIs/SCs in PRTs? What would be initial steps?
- What resources or supports do you need?
- What concerns do you have about use of coaching in PRTs?

Project Objectives

- (1) Support and improve *infant/toddler developmental outcomes*;
- (2) Encourage and promote *use of EBPs* by local EI personnel;
- (3) Improve *knowledge, skills and practices of site-based coaches* regarding coaching practice, data-driven activities and EBPs for site-based coaches;
- (4) Establish *sustainable coaching systems* at the state/local levels.



Thank You

For additional information:
Lisa Knoche lknoche2@unl.edu

<https://cei.unl.edu/>



Coaching in Early Intervention is funded by the U.S. Department of Education's Office of Special Education Programs through grant number H326M200017.

The contents of this presentation were developed under a grant from the Department of Education. However, those contents do not necessarily represent the policy of the Department of Education, and you should not assume endorsement of the Federal Government.



Where We Are Headed?

Sustainability

RBEI Coach training:

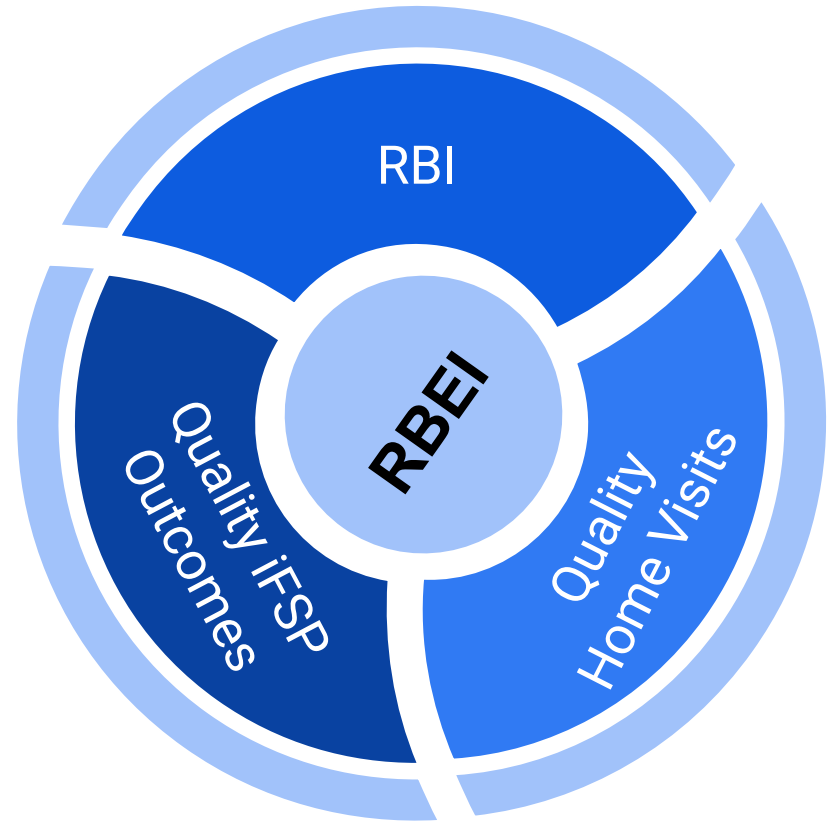
- Evidence-based coaching practices
- Growth vs checking off the boxes
- Promote specific action plan/steps

*Inter-relatedness of
Evidence Based
Practices



Looking across strategies

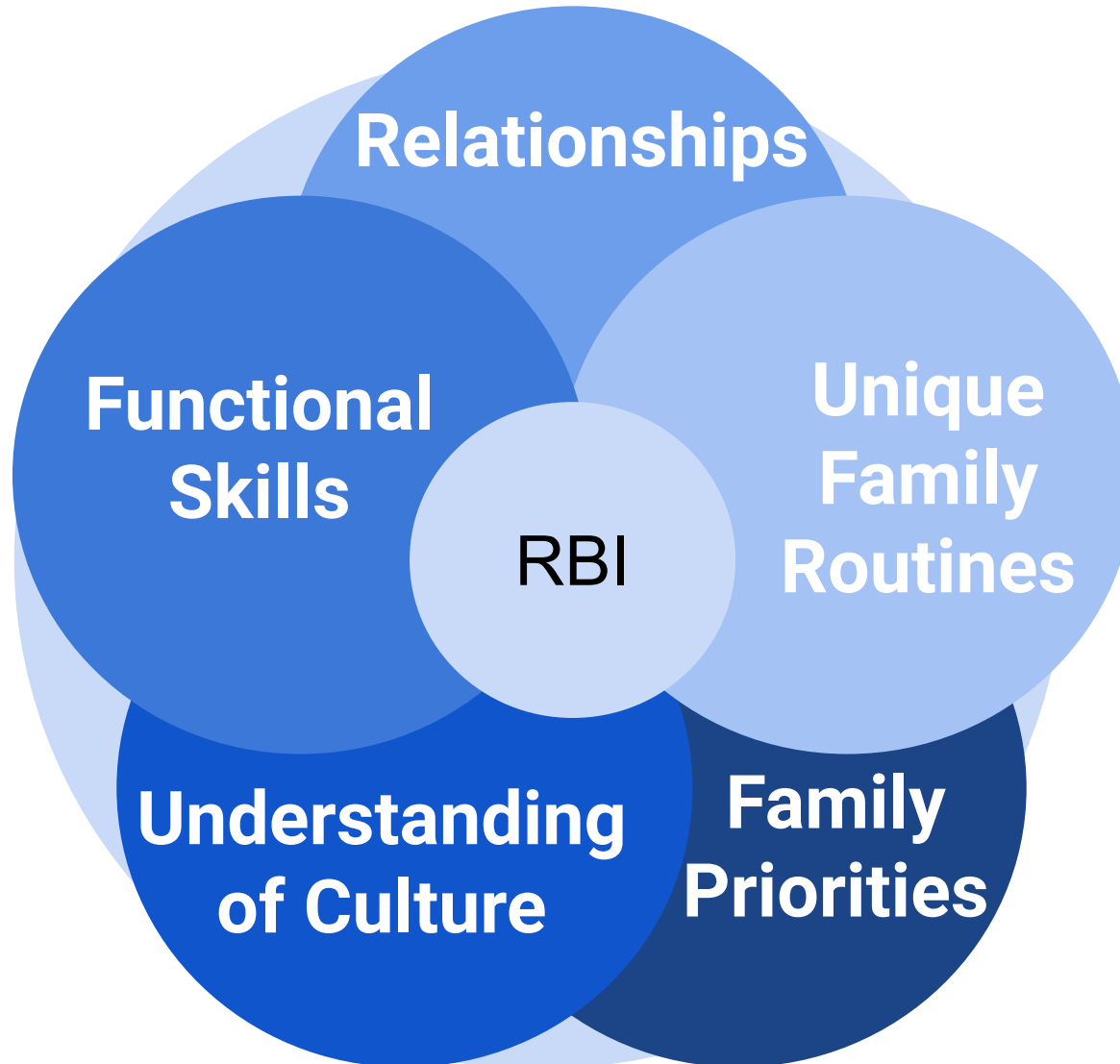
*They are no longer
3 independent strategies
they are
One Process!*



Nebraska Early
Development Network

Babies can't wait

Quality RBI's Promote:



Quality IFSP Outcomes promote:

Home Visits

Routines-based home visits
vs
contrived activities activities

Child will participate in after daycare time by greeting his family.

Outcomes

Do the math...
Measurements that
families can track
vs
percentages

We will know he can do this when he sees two family members and says their name, each evening for for 1 full week.

Function

What will be done by whom that guides a role for the **family** during home visits
vs
medical therapy in the home

- Family will:
- *give wait time and reinforce child's efforts
- Childcare will:
- *work with SLP to develop a picture book of family members
- SLP will:
- *do a visit during after daycare
 - *Have family practice using signs or pictures



Nebraska Early
Development Network

Babies can't wait

Quality routines-based home visits promote:

Outcomes

IFSP outcomes that get met vs outcomes that are simply duplicated

Assessment

A need to use an RBI to prep for the annual IFSP vs return to domain-specific outcomes

Partners

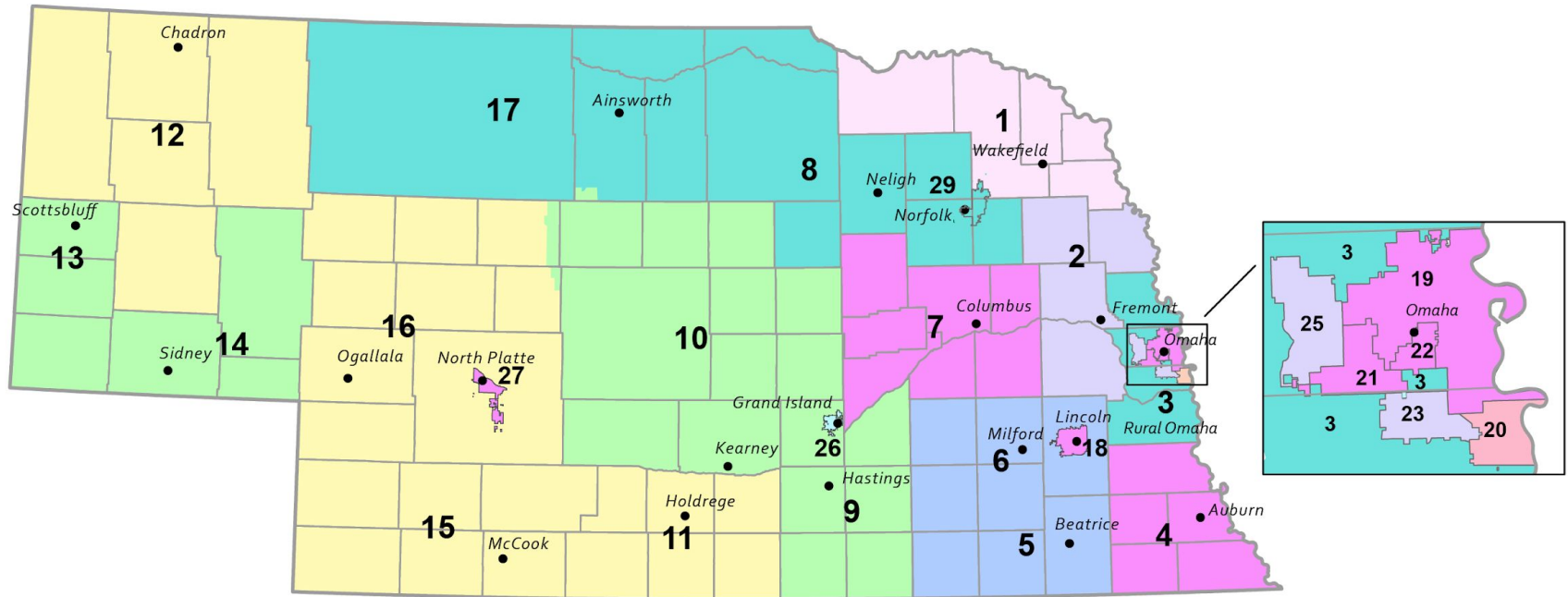
Co-determination of strategies vs a list of strategies that don't fit the family



Nebraska Early
Development Network

Babies can't wait

Routines Based Early Intervention Technical Assistance



Sami Bradley
sami.m.bradley@gmail.com

Jeanne Fielder
jeanniefelder21@gmail.com

Carissa Simonsen
carissa.coach.simonsen@gmail.com

Andrea Nelson
ajn_07@yahoo.com

Mindy Moyer
mindykmoeyer@gmail.com

Shelia Brodersen
coachsheilabrodersen@gmail.com

Jessie James
frankenfoozal@gmail.com

Janice Lee & Tina Kilgore
janicelee.1705@gmail.com
tkilgoreot@gmail.com

Recommendations from PRTs/Stakeholders 2023

- RBI Overview
- Team Self-Assessment
- Coach Training
- RBEI to GOLD Training



**Nebraska Early
Development Network**

Babies can't wait

Child and Family Outcomes



**Nebraska Early
Development Network**

Babies can't wait

Family Outcomes

States are federally required to report annually on the percent of families participating in early intervention who report that they:

- 1) know their rights;
- 2) effectively communicate their children's needs; and
- 3) help their children develop and learn.

Data collected via Family survey distributed by EDN services coordinators to every family participating in EDN.

We had an 84% response rate for the 2024 family survey.

Family Survey Follow-up

Did You Know?

84%

of families receiving early intervention services from Nebraska's Early Development Network (EDN), completed the 2024 annual family survey.

Here's what they had to say:

96%

of families know their rights

95%

of families effectively communicate their needs

96%

of families help their child(ren) develop and learn



To learn more about

Nebraska's Early Development Network (EDN) and the Part C Family Survey please visit, <https://edn.ne.gov/cms/public-reporting-0>

If you have concerns about an infant or toddler's development, please contact EDN at:

Nebraska Child Find
<https://edn.ne.gov/cms/>

Toll Free Phone
888-806-6287



RBEI Practices Survey Questions

Questions were specifically developed to measure family perceptions of the three improvement strategies - RBI, Functional IFSP Outcomes and Routines-Based Home Visits. They are not part of the federally required family survey data.

RBEI Practices Survey Questions

1. When my child started early intervention, my team asked me about my child's and family's usual daily activities and routines.

Results: 97% agree

1. During most home visits, I "practice" a chosen strategy/intervention within a daily routine.

Results: 95% agree

RBEI Practices Survey Questions

3. I can communicate with my early intervention service provider(s) between home visits if I have a question.

Results: 97% agree

4. I make decisions and plans with my early intervention provider during most home visits.

Results: 97% agree

Co-Lead Updates



**Nebraska Early
Development Network**

Babies can't wait

OSEP Determination/Results

NE Part C

- Compliance and Child Outcome Data used to calculate Determinations
- Compliance Indicators = **100%**:
 - Timely Services (Indicator C1) **98.57%**
 - IFSP's in 45 days (Indicator C7) **87.14%**
 - Transition (Indicator C8)
 - 8A (Transition plan 90 days prior) **94.55%**
 - 8B (Transition Notification to District) **100%**
 - 8C (Transition Conference 90 days prior) **92.73%**

OSEP Determination/Results NE Part C

- Early Childhood Outcomes (Indicator C3)
 - 3A. Positive social-emotional skills
 - Substantial growth: **58.8%/56.08%**
 - Age expectations: **50.84%/42.56%**
 - 3B. Knowledge and skills
 - Substantial growth: **58.08%/52.78%**
 - Age expectations: **41.10%/33.96%**
 - 3C. Use of appropriate behavior to meet needs
 - Substantial growth: **57.39%/53.13%**
 - Age expectations: **50.74%/46.45%**

OSEP Determination/Results

NE Part C

- Early Childhood Outcomes (Indicator C3)
 - Data Completeness (1 out of 2 points)
 - Data Anomalies (2 out of 2 points)
 - Comparison to Other States (1 out of 2 points)
 - Comparison to FFY 2022 Data for Nebraska (0 out of 2 points)

Earned 4 out of 8 possible points = **50%**

OSEP Determination/Results NE Part C

- Compliance Indicators (1, 7 and 8)
Earned 13 out of 14 possible points = 92.86%

Results Score/Compliance Score:

$$50\%/92.86\% = 71.43\%$$

OSEP Determination/Results NE Part C

Nebraska = 71.43%

Needs Assistance

OSEP Determination Ratings:

Meets Requirements= 80%-100%

| 2023-2024 Child Outcomes: Part C Infant-Toddler Exiters | | # of Children with Entry/Exit Data | State Targets FFY 2022 | State Performance |
|---|---------------------|---|-----------------------------------|------------------------------|
| Outcome A Positive social- emotional skills and relationships | Summary Statement 1 | 1,387 | 59.30% | 57.68% |
| | Summary Statement 2 | 1,387 | 51.34% | 43.19% |
| Outcome B Acquisition and use of knowledge and skills | Summary Statement 1 | 1,387 | 58.58% | 54.41% |
| | Summary Statement 2 | 1,387 | 41.60% | 36.05% |
| Outcome C Use of appropriate behaviors to meet needs | Summary Statement 1 | 1,387 | 57.89% | 54.00% |
| | Summary Statement 2 | 1,387 | 51.24% | 44.48% |

Part C Child Outcomes Discussion

- **Frequency/Intensity of EI services?**
- **Child Find Data impacts?**
- **Settings/Locations of EI services?**



**Nebraska Early
Development Network**

Babies can't wait

Frequency/Intensity Data

6 visits in 6 mo.

30-45 min per visit

4-5 visits actually occur

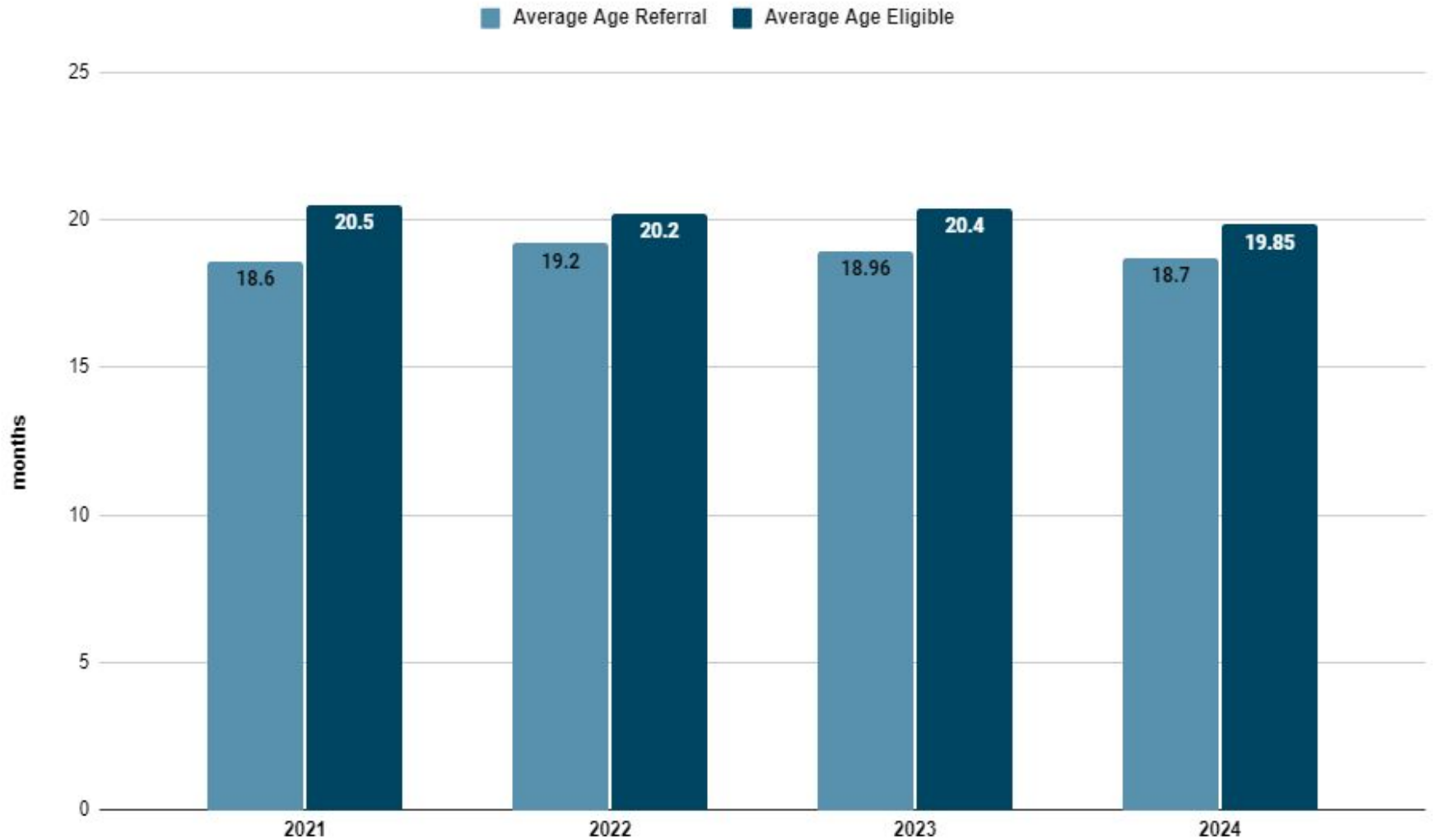


**Nebraska Early
Development Network**

Babies can't wait

Child Find Data

Age of Referral (months)



Settings/Location Data

1 visit per month happening in a child care/other natural environment (not the home)



**Nebraska Early
Development Network**

Babies can't wait

Impact on EI Child Outcomes

Typical/Average EDN experience:

20 months old

12-14 EI visits

30-45 min session

1/3 of these visits are in child care (no parents)

12.3 months - average for time in EDN

Given this, would we reasonably expect PRTs to meet targets? Why? Why not?



**Nebraska Early
Development Network**

Babies can't wait

Differentiated Monitoring and Support DMS 2.0

- Under RDA, The Federal Office of Special Education Programs (OSEP) made a shift from monitoring based solely on compliance to monitoring and support focused on both compliance and improving results for children with disabilities. OSEP differentiates its approach for each State based on the State's unique strengths, progress, challenges, and needs.
- Nebraska's DMS visit was held October 21-24, 2024.

NEBRASKA DMS 2.0

OFFICE OF SPECIAL
EDUCATION

JAN

Discuss website analysis
with Team / Indicator

FEB

DMS 2.0 Convening
Develop Timeline
Website Review
Mock Interviews
Protocol Review
Reserve Rooms for OSEP
Interview/Debriefing

MAR

Fiscal Protocol
OSEP DMS 2.0: Data and
SPP/APR Protocol
OSEP DMS 2.0: Due Process
Protocol Development
Team - General
Supervision Overview

APR

OSEP DMS 2.0: Integrated
Monitoring System Protocol
OSEP DMS 2.0: State
Complaint Protocol,
Mediation Protocol
General Supervision
Discovery; Overview - Mock
Interviews

MAY

OSEP DMS 2.0: SigDispro
Protocol
Finishing Touches- Protocol
Gap Analysis
SEAC Preparation
Mock Interviews
PHASE 1: Pre-site Document
Request.

JUNE

Narrative of OSE's general
supervision system - "Tell our
Story" ppt
Creation/Revisions from Gap
Analysis
Mock Interviews

JULY

Community Partners
Document
Creation/Revisions from
Gap Analysis
Mock Interviews

AUG

Finalize On-Site
preparations
Creation/Revisions from
Gap Analysis
Mock Interviews - During
team meeting

SEPT

Finalize Document Revision
Plan
Protocol Site
Mock Interviews

OCT

October 21-25, 2024
OSEP On-Site

NOV

DMS 2.0 FollowUp and CAP
Development

DMS 2.0



Wrap Up and Next Steps

- Questions/Feedback



**Nebraska Early
Development Network**

Babies can't wait

Thank You!

Jessica Anthony - jessica.anthony@nebraska.gov

Amy Bunnell - amy.bunnell@nebraska.gov

Cole Johnson - cole.johnson@nebraska.gov



**Nebraska Early
Development Network**

Babies can't wait