

Evaluation of Quality Early Intervention Home Visitation in Nebraska: Executive Summary

Purpose and Research Questions

A qualitative study was conducted to better understand family, service coordinator (SC), and Early Intervention (EI) service provider experiences with Nebraska's third Results Driven Accountability strategy—professional development for implementation of the *Getting Ready* framework to influence the quality of EI home visits. High quality home visits have the potential to enable EI service providers and SCs to focus on supporting child and family progress toward achieving Individualized Family Service Plan (IFSP) outcomes through the development of effective plans within home visits and attention to implementation of plans between home visits. There were two research questions:

1. How do family members and EI service providers describe the influences of the *Getting Ready* framework on (a) establishment of the home visit agenda in partnership with the family, (b) identification and practice of strategies within family routines during visits, (c) development of a home visit plan to support parents' use of strategies with their children, (d) use of and fidelity to the strategy steps outlined by the home visit plans in family routines/activities with their children between visits, (e) parent-provider communication between visits, and (f) parent-professional collaborations to monitor child and family progress on IFSP outcomes?
2. How do family members and SCs describe the influences of the *Getting Ready* framework on (a) establishment of the home visit agenda in partnership with the family, (b) development of a home visit plan to support parents' access to desired services and resources, (c) implementation of the home visit plan between visits, (d) parent-provider communication between visits, and (e) parent-professional collaborations to monitor child and family progress on IFSP outcomes?

Twelve EI service providers, seven SCs, and 22 family members from pilot site Planning Region Teams (PRTs) participated in semi-structured interviews about their experiences with EI services utilizing the *Getting Ready* framework of home visiting. In addition, 11 completed, de-identified home visit plans from across these PRTs were analyzed. The sample, chosen as representative of usual home visit plans, included documents completed by EI service providers ($n = 7$) and SCs ($n = 4$).

Key Findings

Theme 1: Engaging families to achieve IFSP outcomes. Participants described robust partnerships between professionals and family members and the presence of the following family-centered, participatory-building practices:

Coaching. Joint problem-solving, offering suggestions, modeling, and providing feedback during home visits.

Practice. Numerous and widespread reports that “practice” occurred within family routines during the home visits.

Home visit action plans. Consistently used. Often included updates on child/family progress, the IFSP outcome of focus for the current visit, a strategy or idea to address the outcome, routines chosen by the family for using the strategy, and a family-professional communication plan. Not all teams used plans with all key components.

Communication between visits. Increased frequency of communication. Variety of methods used: text messaging, phone calls, emails, and Facebook Messenger.

Theme 2: Accountability-- gains and gaps. Prompts within the *Getting Ready* framework have the potential to heighten the accountability of all team members by strengthening the focus on families' priority IFSP outcomes.

Gains in accountability. Families increasingly taking ownership both of the agenda of each home visit and of the collaboratively developed strategies or ideas to achieve IFSP outcomes.

Gaps in accountability. Monitoring and documentation of progress toward IFSP outcomes often conducted informally and infrequently. Families inconsistently partners in the process. Redundant documentation systems (particularly for SCs).

Theme 3: Implementation challenges.

Communication. These included: (a) use of personal cell phones, (b) managing communication with high caseloads, (c) unclear professional boundaries, (d) technology barriers, (e) family preference of communication method not matching the needs of the professional, and (f) communication when interpreter needed.

Diversity of families. Need for additional training to address partnering with families whose first language is not English and caregivers with disabilities or mental health concerns.

Roles of SCs. Some SCs reportedly comfortable utilizing the *Getting Ready* framework to carry out their roles on the teams, while others expressed uncertainty about the utility of *Getting Ready* as applied to the express purposes of services coordination.

Implications for Practice in Nebraska Early Intervention Programs

- 1) Encourage EI providers to strengthen their knowledge of and ability to coach families to use evidence-based interventions and the steps needed to effectively implement these.
- 2) Consider future RDA initiatives focusing on training, tools, and technical assistance for effective monitoring and documentation of progress toward achieving child and family IFSP outcomes within a data-driven decision making process.
- 3) Develop policies and best practices to guide family-professional communication. Explore technological supports for these efforts. Promote PRT inclusion of key components in home visit action plans.
- 4) Clarify the role and expectations of SCs as teams expand the use of the *Getting Ready* framework. Make adjustments or provide follow-up training as warranted.

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