RI SSIP EVALUATION WORKSHEET 5: OUTCOMES IN RELATION TO EVALUATION QUESTIONS

Strategies/Activities	Outputs	Outcomes	Evaluation Questions
A1.Build Infrastructure to Implement the Routines Based Interview (McWilliam) as a statewide practice	• Implementation plan to scale up RBI and	Short-term	
 by: (1) Develop an Implementation Plan to incrementally scale up the RBI as a statewide practice (2) Update and distribute RI Policies and Procedures, RI Claim Reimbursement Guidebook for EI Services and other statewide forms to support implementation of the RBI process (3) Train personnel in updated Policies and Procedures, RI Claim Reimbursement Guidebook for EI Services and other statewide forms which support RBI implementation (4) Incorporate Quality Indicators related to Routines Based Home Visiting Intervention into the general supervision system •IFSP Outcomes: (Family Owned, functional, measurable and embedded into a routine •Services Rendered: (reflect coaching, modeling, parent participation) (5) Develop an RBI communication plan A2.Build infrastructure to support implementation of an assessment tool(s) specific to Social Emotional Development (1) Develop an Implementation Plan to implement an assessment tool(s) specifically for Social Emotional Development as a statewide practice (2) Update and distribute RI Policies and Procedures, and statewide forms to support implementation of the tool(s) (3) Train personnel in updated Policies and Procedures, which support the assessment tool(s)implementation 	 SE assessment tool(s) (specify who, what, where, when, etc.) Updated RI Policies and Procedures, RI Claim Reimbursement Guidebook for EI Services IFSP Guidebook and other relevant statewide forms # of and types of trainings # of people attending trainings # Training materials # and types of communication 	 Providers have knowledge of new procedures related to implementing the RBI and SE assessment tool(s) (when to do it, how to document in the IFSP paper work and what codes to use for billing purposes). Providers know the criteria to self-assess IFSP outcomes Providers know the criteria to self-assess documentation of service delivery (Services Rendered Forms) Providers and stakeholders are aware of implementation of the RBI and SE assessment tool(s) in RI 	 A1 (1) Are the numbers of providers being trained to do the RBI consistent with targets specified in the improvement plan? (Obtained through training records, reviewed yearly)(LB) A1 (1) Is the percentage of children whose family had an RBI increasing in the data system? (Obtained through the data system, reviewed yearly CR) A1 (2), A1 (3), A1 (5) Did the participants in each training content area specified in the improvement plan gain knowledge regarding new procedures? (Knowledge and/or satisfaction data obtained through survey instrument, pre-test and post-test for each RBI trainee, reviewed ongoing)(LB) A1 (4) Are IFSP outcomes family owned, functional, measurable and embedded in a routine (Obtained through general supervision yearly self-assessment, reviewed annually CR) A1 (4) Do SRFs document coaching, modeling, interventions in routines and include an agreed upon plan for between visits (Obtained through general supervision SRF Review reviewed yearly. DN) A1(5) Are staff and stakeholders aware of RBI and its implementation in RI (Obtained through records of contacts (ICC, Directors, stakeholders) reviewed quarterly)(LB) A2 (1). Are the numbers of providers being trained to do the SE assessment tool(s) consistent with targets specified in the improvement plan? (Obtained through training records, reviewed yearly)(LB) A2 (1) Is the percentage of children evaluated by the SE assessment tool(s) increasing in the data system? (Obtained through the data system, reviewed yearly CR) A2 (3) Did the participants in each training content area specified gain knowledge regarding new procedures? (Knowledge and/or satisfaction data obtained through survey instrument, pre-test and post-test for each trainee, reviewed ongoing)(LB)



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		 Intermediate Providers consistently implement new administrative procedures related to RBI and SE assessment tool (when to do it; how to document it in the ISP; how to bill for it) Providers identify SE concerns, and integrate assessment results into IFSP Outcomes. Providers develop IFSP outcomes with families who have participated in the RBI that meet quality standards Provider documentation of home visits meet quality standards 	A1 (2), A1 (3) Are Providers conducting the RBI and at the correct time in the IFSP process; Are they documenting the RBI correctly, are they billing for the RBI and correctly. (% of RBI's % of RBI's billed in accordance with RI Claim Reimbursement, % of records in which RBI documentation is in alignment with policies and procedures; obtained through general supervision annual self-assessment (CR) A1 (4) Are programs demonstrating improvement at developing outcomes that are family owned, functional, measurable and embedded in a routine (Obtained through general supervision self-assessment; reviewed yearly) (CR) A1(4) Are programs demonstrating improvement at documenting coaching, modeling, interventions in routines and an agreed upon plan for between visits (Obtained through general supervision SRF Review, reviewed yearly (DN) A2 (2) A2 (3) Are Providers conducting the SE assessment with fidelity, at the correct time in the IFSP process; Are they documenting the SE assessment correctly, are they billing for the SE assessment correctly. (% of SE assessments billed in accordance with RI Claim Reimbursement, % of records in which SE assessment documentation is in alignment with policies and procedures; obtained through general supervision annual self- assessment (CR) A2 (4) Are Providers identifying SE concerns and developing outcomes based on those concerns? Are SE outcomes increasing? (Obtained through general supervision self-assessment; reviewed yearly) (CR)
		Long-term	



Strategies/Activities	Outputs	Outcomes	Evaluation Questions
		 Providers value the RBI as part of their practice The RBI and SE assessment tool(s) are implemented and all administrative procedures are followed IFSP outcomes are high quality and meet standards Documentation of home visits reflect coaching, modeling, interventions in routines and an agreed upon plan with the family 	 A1 (1), A1 (3). Do providers feel that implementing the RBI results in IFSPs that are more appropriate and effective for families? (Obtained through survey instrument, reviewed periodically) (LB) A1 (1). Have all providers been trained as planned? (Obtained through training records, reviewed quarterly) (LB) A2 (1) Have all providers been trained as planned? (Obtained through training records, reviewed quarterly) (LB)
 B1. Build the knowledge and skills of EI providers to conduct the RBI by: (1) Develop and provide RBI PD and Coaching (2) Providing RBI PD for ancillary team members (3) Providing PD regarding IFSP Outcomes development (4) Providing PD linking RBI to Child Outcomes Summary Process (5) Providing PD for supervisors to support RBI (6) Develop and distribute useful resources 	 # of people attending trainings # and types trainings # and types of resources # and types of trainings 	 Short-term Providers gain knowledge about how to conduct an RBI, how to prioritize family concerns based on the RBI, and how to develop outcomes based on the priorities of the family. Providers gain knowledge about how to conduct the SE assessment(s), how to identify SE concerns, and how to integrate assessment results into IFSP outcomes 	 B1(1-6). Did the participants in the RBI training gain knowledge regarding how to do the RBI, how to prioritize family concerns, and how to develop outcomes based on the families? (Obtained by knowledge and/or satisfaction data obtained through survey instrument, reviewed ongoing) (LB) B1 (5). Do supervisors feel competent in supporting staff to implement RBI? (Obtained through knowledge or satisfaction data through survey instrument) (LB) B1 (1), B1 (2), B1 (3) How many providers are trained to fidelity in RBI within



Strategies/Activities	Outputs	Outcomes	Evaluation Questions
 B2. Build the knowledge and skills of EI providers to conduct the SE assessment by: (1) Develop and provide PD and Coaching (2) Providing PD regarding IFSP Outcomes development (3) Providing PD linking SE assessment to Child Outcomes Summary Process (4) Providing PD for supervisors to support the SE assessment process (6) Develop and distribute useful resources 		Intermediate • Providers implement the RBI, prioritize concerns of the family and develop outcomes based on family concerns with fidelity • Providers educate families about social emotional development and early relational health • Providers implement the SE assessment, identify SE concerns, and integrate assessment results into IFSP Outcomes. • Families have IFSP outcomes that reflect their priorities and meet the needs of their child and family.	 the established timelines? (Obtained through training records, reviewed quarterly) (LB) B1 (5). Do supervisors feel competent in supporting staff to implement RBI? (Obtained through knowledge or satisfaction data through survey instrument) (LB)) B1 (1), B1 (3) Do families report that the IFSP is based on what is important to them? (Obtained through survey/interview (LB) B1 (1), B1 (3) Are families more engaged in EI as evidenced by a decrease in cancellation rates? (Obtained through data system, reviewed yearly) (CR) B1 (4) Are providers documenting information learned from the RBI on the COSF? (Obtained general supervision self-assessment reviewed annually) (LB) B1 (4) Is there a difference in COSF entry ratings of those children whose families had an RBI? (Obtained through data system, reviewed yearly, CR/DN) B2 (2), B2 (2), B2 (3) How many providers are trained in the SE assessment tool within the established timelines? (Obtained through training records, reviewed yearly) (LB) B2 (5) Do supervisors feel competent in supporting staff to implement the SE assessment tool? (Obtained through knowledge or satisfaction data through survey instrument) (LB)) B2 (3) Are Social Emotional and Early Relational Health outcomes being developed with the family? (Obtained through general supervision, yearly B2 (6) Are resources on Social Emotional Development and Early Relational Health given to Families?
		Long-term	



Strategies/Activities	Outputs	Outcomes	Evaluation Questions
		 Family routines are easier and more successful for the family All providers routinely utilize the RBI with fidelity and with fidelity with all families Parents have an understanding of their child's social emotional development and early relational health All providers routinely utilize SE assessment tool(s) 	B1, B3 Do families report that daily routines are is easier and more successful for the family? (Obtained through survey/interview) LB
Strategies/Activities	Outputs	Outcomes	Evaluation Questions
 C 1. Build knowledge and skills of EI Providers in an evidence based service delivery model by: (1) Providing PD related to coaching, modeling, routines based intervention (2) Providing PD for supervisors to support RBEI (3) Develop and distribute useful resources C.2. Build knowledge and skills of EI Providers in supporting children's SE skills (1) Develop an implementation plan regarding: 	 # of people attending trainings # and types trainings # and types of useful resources 	 Short-term Providers gain knowledge about coaching, modeling and routines based intervention in home visits to achieve outcomes Providers gain foundational knowledge of SE development Providers gain knowledge of Infant Early Childhood Mental Health (IECMH) Principles and Reflective Practices in EI, to address SE needs 	 C1 (1), C1 (2), C1 (3). C2 (1), C2 (2), C2 (3). Did the participants in each of the training sessions on SE development and evidence based practices gain knowledge regarding coaching, modeling and routines based intervention and reflective practice in home visits to achieve outcomes? (Knowledge and/or satisfaction data obtained through survey instrument, reviewed quarterly after training) (LB)
 the provision of a foundational level of knowledge of SE development for all providers a Community of Practice in Infant Mental Health focusing on Infant Early Childhood Mental Health (IECMH) Principles and Reflective Supervision and 		Intermediate	C (2) Do survey instruments of participants show progress in knowledge and skills (using self-reports) in core IMH principles (Conducted regularly throughout project)(PM.)



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Consultation Practices in EI, including a plan for sustainability. (2) Providing PD for supervisors and providers (3) Develop and distributer related resources		 with Providers Providers utilize reflective practice with families Providers implement coaching, modeling, routines based interventions and reflective practice in home visits to achieve outcomes Providers identify social emotional concerns and coach families regarding these 	C1 (1), C1 (2,) C1 (3), C2(1),C2(2) (C2(3)Are providers consistently using coaching, modeling, routines based interventions and reflective practice. (Obtained through general supervision review of SRFs reviewed yearly (DN)) C1 (1), C1 (2) Is there evidence that families are implementing strategies between visits? (Do SRFs describe an agreed upon plan with the family and is there evidence of how that plan worked? (Obtained through general supervision review of SRFs reviewed yearly) (DN) B2(1) C2 (2)Is there evidence that providers are conducting SE assessments and Early Relational Health Screening ? (Welligent reports tabulated quarterly)
	ļ	Long-term	
		 Families increase their competence and confidence to enhance their child's development (including SE development) Children demonstrate increased skills in all outcomes including developing improved social emotional skills 	C1 (1). Do families feel more confident and competent in their skills to enhance their child's development? (Obtained through yearly RIPIN family survey, reviewed yearly (DM/CR)) C1 (1). Do child outcomes data for children whose families participated in RBI show greater progress than those children whose families have not participated in RBI? (Obtained through data system, reviewed yearly) (CR/DN)

