

Maryland State Department of Education

Division of Early Intervention and Special Education Services

Maryland Part C State Systemic Improvement Plan

Phase III, Year 4 Report

(January 1, 2019 – December 31, 2019)



The goal of the *Moving Maryland Forward: Sharpen the Focus for 2020* remains the same – to narrow the school readiness and achievement gap between children and youth with disabilities and their non-disabled peers to ensure that youth with disabilities are college, career, and community ready when they complete their schooling.

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Maryland State Systemic Improvement Plan

Part C Phase III, Year 4 Report

Introduction

As the lead agency for the Maryland Infants and Toddlers Program (MITP), an interagency, familycentered program supporting our youngest learners with disabilities and their families, the Maryland State Department of Education (MSDE) provides innovative leadership, accountability, technical assistance, and resource management to implement a seamless system of services Birth to Kindergarten. With a laser focus on the Division of Early Intervention and Special Education Services' (DEI/SES) Strategic Plan, Moving Maryland Forward, and in alignment with Results Driven Accountability (RDA), the MITP continues to transform and enhance support to local Infants and Toddlers Programs (LITPs) to both comply with regulatory requirements and to implement evidencebased practices in support of the ultimate goal of narrowing the school readiness gap. The phased work of Maryland's Part C State Systemic Improvement Plan (SSIP) with continuous stakeholder guidance, provides a vehicle to focus on positive social-emotional development, skills, and relationships to prepare our youngest learners for kindergarten. Significant implementation and outcomes progress continued to occur during Phase III. Year 4 as evaluation activities moved forward and were adjusted leading to the refinement of implementation. Creating shared understanding through effective, high-performing teams to make data-informed decisions supporting both infrastructure shifts and personnel development strategies continues to be essential for full implementation of evidence-based practices.

This report outlines Maryland's progress in implementing the SSIP during Phase III, Year 4 including clear descriptions of the coherent improvement strategies aligned to the DEI/SES strategic plan with focus areas of participation and learning, improvements to infrastructure, and implementation of evidence-based practices with fidelity, explanations of how stakeholders have engaged in the SSIP process, data on implementation and outcomes, data quality issues, progress toward achieving intended improvements, and plans for next year. Maryland's Part C SSIP has intensified State/local universal, targeted, and focused collaborative work which is now leading to changes in statewide procedures and practices supporting overall implementation of evidence-based practices. These include:

- significant revisions to the local grant application for the distribution of early intervention funding to local programs to identify infrastructure and personnel development strategies needed for continuous improvement, including the implementation of the Child Outcomes Summary (COS) rating process with fidelity, evidence-based professional learning with coaching, and data-informed child find practices;
- the implementation of a revised Individualized Family Service Plan (IFSP) process and document to support EBPs in the development, implementation and evaluation of IFSPs;
- the development of revised early intervention personnel standards, effective July 1, 2019, to ensure all staff have foundational skills in key principles and recommended practices; and
- universal capacity-building of comprehensive, coordinated local Birth to Kindergarten systems of services through focused scale-up of evidence-based practices supported through discretionary funds (i.e., Early Childhood Local Implementation for Results Grants).

A. Summary of Phase III, Year 4

1. Theory of Action, Logic Model, and State-identified Measurable Result (SiMR)

Year 4 of Maryland's Part C SSIP implementation continued to rely on key partners, internal and external stakeholders, and an external evaluator, continued to strengthen the alignment of the theory of action, the logic model, and the evaluation plan.

Maryland's Theory of Action is:

IF the Maryland Infants and Toddlers Program (MITP) and its partners provide leadership for strategic collaboration and resource management through enhanced teaming structures and provide high quality professional learning and support to Local Implementation Teams through systems and content coaching in:

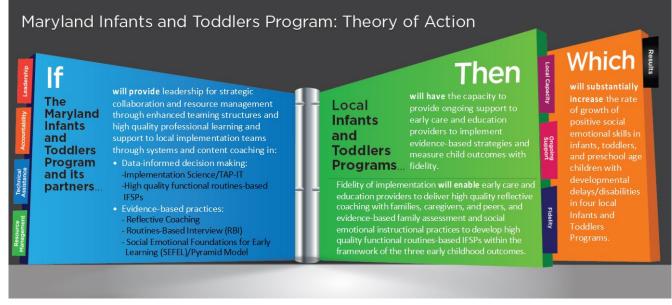
- Data-informed decision-making:
 - Implementation Science/Team, Analyze, Plan, Implement, Track (TAP-IT);
 - Effective, Functional, Routines-Based IFSPs; and
- Evidence-based practices:
 - o Reflective Coaching;
 - o Routines-Based Interview (RBI); and
 - o Pyramid Model (PM).

THEN local Infants and Toddlers Programs will have the capacity to provide ongoing support to early care and education providers to implement evidence-based strategies and measure child outcomes with fidelity. Fidelity of implementation will enable early care and education providers to deliver high quality reflective coaching with families, caregivers, and peers, and evidence-based family assessment and social emotional instructional practices to develop effective, functional, routines-based IFSPs within the framework of the three early childhood outcomes,

WHICH will substantially increase the rate of growth of positive social-emotional skills for infants, toddlers, and preschool age children with developmental delays/disabilities in four local Infants and Toddlers Programs (Figure 1).

Figure 1. Maryland Infants and Toddlers Program: Theory of Action

State Systemic Improvement Plan (SSIP) | Maryland Part C



Maryland's Part C SiMR was developed in consultation with our internal and external stakeholders over a year-long *"leading through convening"* process during Phase I. Additional stakeholder input was gathered during Phase II and continued to be gathered during Phase III, to build a shared vision around evidencebased practices supporting social-emotional development. In Phase III, Year 2 a minor revision was made to the *Maryland Infants and Toddlers Program: Theory of Action* as the MSDE and stakeholders identified reflective coaching as the evidence-based adult learning strategy to support the training and ongoing coaching to implement both the Routines-Based Interview (RBI) and Social Emotional Foundations for Early Learning (SEFEL). In previous versions of the *Theory of Action*, reflective coaching was only tied to the implementation of SEFEL. During Phase III, Year 3 stakeholders agreed to begin using the term SEFEL/Pyramid Model to integrate this framework across education systems (Birth – 21) in alignment with the work of the National Center for Pyramid Model Innovations (NCPMI). Pyramid Model is reflected in both the *MITP Theory of Action* and the *MITP Part C Logic Model*.

In Phase III, Year 2, input and feedback from multiple stakeholder groups resulted in further refinement of the *MITP - Part C SSIP Logic Model* with implementation activities and outputs, as well as short and medium-term outcomes emphasizing both infrastructure improvements and the implementation of evidence-based practices (EBPs). No further revisions to the logic model were made during Phase III, Year 4. The logic model continues to serve as the foundation of the evaluation plan with the resources invested supporting implementation activities and outputs through effective teaming, technical assistance activities, professional learning opportunities, and tools. The impact of these resources and activities are intended to result in:

- a) active participation and learning by all participants (short-term outcomes);
- b) improvements in infrastructure and local implementation of evidence-based practices with fidelity (medium-term outcomes); and ultimately
- c) an increase in the rate of growth of positive social-emotional skills and relationships for young children with disabilities.

The Theory of Action is epitomized through a detailed logic model that demonstrates the flow from inputs

and outputs, and from outputs to outcomes (Figure 2). The long-term result of increasing positive socialemotional skills and relationships is expected to be directly influenced by both infrastructure improvements at the State/local level and implementation of evidence-based practices with fidelity. Foundational, implementation, and impact outcomes can only be realized when key partners and stakeholders are engaged and actively involved in every step of the process.

Figure 2. Maryland Infants and Toddlers Program - Part C SSIP Logic Model with SiMR

The Maryland Infants and Toddlers Program State Systemic Improvement Plan: Logic Model

IMPLEMENTATION					OUTCOMES	
INPUTS		ACTIVITIES	OUTPUTS	SHORT TERM Foundation	MEDIUM TERM Implementation	LONG TERM Impact
Resources we Invest MSDE DSE/EIS Strategic Plan Intra- and inter-agency State and local staff Research on Evidence Based Practices and Implementation Science in EC Partnerships with local lead agencies and external organizations (PPMD, MCIE, IHEs) National, State, and local experts MSDE Resources (data systems, B-K Child Outcome Galeway, Maryland Learning Links, Making Access Happen, SEFEL/IM Website) Online real-time IFSP data system in LADSS COS integrated into IFSP and IEP Tires of General Supervision/ Engagement structure Systems Coaching Braided Funding		Actions we Take Engage in strategic partnerships/Tearning Structures Develop Professional Learning (PLY Training for State and Local Implementation Tearns in: Implementation Science (IS) Tools, Systems Coaching and TAP-IT Conduct needs assessments/ surveys with local programs around EBPs and COS Conduct professional learning and ongoing follow-up content coaching in EBPs (Reflective Coaching, REI, SEFELPM) Develop PL/Training for implementation of RBI, Reflective Coaching/ SEFELIPM, including use of the Child Outcornes Summary (COS) process with fidelity Assemble workgroups for ongoing COSAFSP work Disseminate resources to promote implementation, scale- up, and sustainability	 Products we Generate Effective State Communication Trained MSDE Systems Coaches (B-K Liaisons) Trained Local Systems Coaches skilled in TAP-IT and stage-based EPP implementation Protocol for State/LTP Technical Assistance Online resources to support systems coaching, IS, and TAP- IT Implementation fidelity tools for TAP-IT, systems coaching, EBPs and COS IFSP process/tools to support implementation of EBPs State/Local Annual Professional Learning Institutes 	Participation and Learning MSDE and LITP provide: • High Quality Resources Participants learn: • Mental health services/ agencies (local/state) • Systems Coaching • Data-Informed Decision Making • Reflective Content Coaching • Social Emotional Foundations for Early Learning (SEFEL)/ Pyramid Model (PM) • Routines Based Interview (RB) • Integrating EEPs into functional routines- based IFSPs • COS process Participants Use: • • Available Resources related to EBPs and the COS process	Changes that Occur Infrastructure Improvements MSDE increases strategic communication and collaboration with intra- and inter-agency stakeholders to support SSIP implementation State systems coaches provide programmatic support and technical assistance consistent with the MD Differentiated Framework to local programs to implement EBP with fidelity State and Local implementation teams use an evidence-based data- informed decision making process with fidelity Four (4) LITPs implement EBPs in early intervention SSIP Programs have initiated the practice of using RBIs with fidelity Reflective Systems and Content Coaching is implemented with fidelity Reflective Systems and Content Coaching is implemented with fidelity COS is implemented with fidelity	Results for Childrer The Maryland Infants and Toddlers Program will substantially increase the rate of growth of positive social-emotional skills in infants, toddlers, and preschool age children

January 2019

The State-identified Measurable Result (SiMR) measures the overall impact or long-term results of the Part C SSIP work. The MITP will substantially increase the rate of growth of positive social-emotional skills in infants, toddlers, and preschool age children (Indicator 3A, Summary Statement #1). Table 1 on the next page shows the child outcomes data aggregated and weighted across the four SSIP jurisdictions from baseline (2015/2016) to current (2018/2019). Please note the baseline was readjusted in the Phase III, Year 1 report to account for new changes in data collection methodology of child outcomes.

Table 1. Indicator 3A, Summary Statement #1 Results for Infants, Toddlers, and Preschoolers Across the Four SSIP Local Infants and Toddlers Programs (LITPs)

2015/2016 - Baseline	2016/2017	2017/2018	2018/2019	
47.23%	50.84%	50.59%	49.66%	

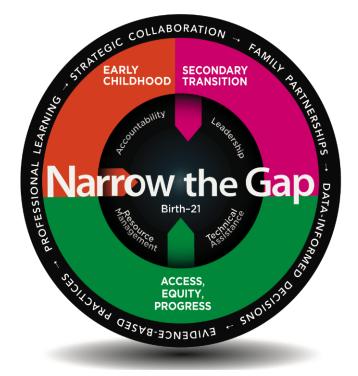
Maryland's child outcome results have decreased slightly in Phase III, Year 4 with a laser focus on the COS rating process completed with fidelity and a revised Individualized Family Support Plan (IFSP) process, including robust child and family assessment, beginning on 10/1/18. Gains in progress take time and these overall results are expected. The State continues to monitor implementation and child outcomes progress throughout the year and anticipates this report and future reports will illustrate a clear picture of SSIP effects.

2. Coherent Improvement Strategies Implemented

Throughout the development and implementation of the SSIP, the MSDE DEI/SES Strategic Plan, *Moving Maryland Forward: Sharpen the Focus for 2020,* has three strategic imperatives driving the work of the Division: (1) Early Childhood; (2) Access, Equity, and Progress; and (3) Secondary Transition. The work of the Part C SSIP aligns with the early childhood imperative to narrow the school readiness gap. The strategic plan calls for the implementation of five key strategies that cross all three imperatives to improve results for children and youth with disabilities and their families:

- Strategic Collaboration
- Family Partnerships
- Data-Informed Decisions
- Evidence-Based Practices
- Professional Learning

While focusing on the implementation activities and strategies in the theory of action, logic model, and evaluation plan, the work of the Part C SSIP is aligned with the strategic plan and early childhood goal: to implement a seamless and comprehensive statewide system of coordinated services within home, community, and early childhood settings for children with disabilities - birth to kindergarten - and their families to narrow the school readiness gap, specifically in the area of social-emotional development and relationships.



The focused work of the Part C SSIP has evolved to reflect and align the strategic plan's key strategies with acknowledgement that each of these improvement strategies must address both personnel development needs AND infrastructure enhancements.

Coherent improvement strategies include:

- <u>Professional Learning</u>: including coaching, technical assistance, resource development, and information dissemination;
- Content coaching and systems coaching;
- <u>Evidence-Based Practices</u> with fidelity: Reflective coaching, Routines-Based Interview, Pyramid Model, Data-informed decision making;
- <u>Strategic Collaboration</u> for <u>Data-Informed Decisions</u> with engaged stakeholders; and
- <u>Family Partnerships</u> integrated into all aspect of the systems change work.

Professional Learning

During Phase III, Year 4 professional learning activities were implemented with the four SSIP LITPs as well as with Maryland's Birth to Kindergarten early intervention, preschool special education leaders, and early childhood stakeholders. The DEI/SES maintained contracts with the University of Maryland School of Social Work (UM-SSW) and the Johns Hopkins University/Center for Technology in Education (JHU-CTE) to support State-level content experts in Reflective Coaching, RBI, and the Pyramid Model. The four SSIP LITPs participated in both ongoing as well as differentiated professional learning and coaching activities based on identified local program implementation needs producing steady gains in knowledge and skills. The additional professional learning offered by the MSDE DEI/SES in 2019, was the Master Coach training, with an in-person two-day training in February 2019 and monthly follow-up coaching to reach fidelity of the practice.

Beginning in 2017, MSDE DEI/SES developed, piloted, and rolled out a new Birth to Kindergarten Child Outcomes Summary (COS) training protocol with a comprehensive website to support integration of early childhood outcomes into the IFSP and IEP process and the COS rating process to fidelity (refer to MD Part C SSIP, Phase III, Year 2 Report pgs. 10-11). Over the course of Phase III, Year 3 and Year 4, local programs have trained early intervention and preschool special education providers and teachers using the revised training protocol. The Maryland Child Outcomes Summary-Competency Check (MD COS-CC) was developed and piloted as the culminating activity at the end of training. This online assessment has 15 knowledge questions and a case study supporting Maryland's COS Core Components for fidelity. During 2018 and 2019, approximately 90% of the staff in the four SSIP LITPs completed and passed the MD COS-CC. The MSDE is requiring all early intervention staff to complete this competency check by the end of SFY 2020. This requirement is now documented within Maryland's Early Intervention and Preschool Special Education (EI/PSE) System Personnel Standards Database and the Early Intervention Personnel Standards requirements are being added to the State's Part C comprehensive monitoring protocols for SFY 2021. Maryland's EI/PSE Personnel Standards now include an annual training requirement, and this year, the Child Outcomes Summary (COS) Process -Age Anchoring Webinar presented by Dr. Naomi Younggren, was the required training to continue a laser focus on completing the COS process with fidelity.

With the rollout of Maryland's revised IFSP process, document, and online tool on October 1, 2018, the 2019 calendar year represents the first full year with all early intervention staff using the revised IFSP process and document. The revised IFSP supports evidence-based child and family assessment practices with present levels of functional development organized by the three early childhood outcomes, leading to functional, routines-based IFSP outcome development and implementation. Continued training of <u>all</u> early intervention staff on IFSP development, implementation and evaluation is now another required component of Maryland's EI/PSE Personnel Standards and must be documented in the database referenced above.

The State continued to engage in a *Regionalization for Results* model to support the implementation of the MSDE DEI/SES strategic plan in early childhood through five regional *Local Implementation Lessons Learned* opportunities in the Spring of 2019. Each Birth to Kindergarten team, including both early intervention and early childhood special/general education leaders, shared their identified focus areas to create systems change and reflect on what has worked, what has not worked, and lessons learned to help refine and sustain systems-building going forward. Three out of the five regional Lessons Learned were attended by at least one of the Part C SSIP programs. Each of SSIP jurisdictions shared their experiences with focused stakeholder engagement through the State Implementation Team (SIT)/Local Implementation Teams (LITs) to explore, install, implement, and begin to scale-up and sustain evidence-based practices with fidelity.

Finally, in November 2019 the MSDE DEI/SES hosted a statewide 3-day Professional Learning Institute for Maryland's early intervention and special education leaders and stakeholder community to <u>Elevate</u> <u>Performance</u> of the DEI/SES Strategic Plan, *Moving Maryland Forward*. The Part C SSIP work was incorporated throughout this conference in Personalized Learning Sessions focusing on social-emotional development, as a part of the State of the State address, and within the content and delivery of the State and Local Early Childhood Strand. The final local session highlighted the collective journey of the four SSIP programs as they have begun to integrate the Pyramid Model in early intervention services.

Systems and Content Coaching

During Phase III, Year 4 the State continued implementation of Systems Coaching through regional Birth to Kindergarten Liaisons/State Systems coaches. This strategy provides a high level of engagement with all four of the Part C SSIP programs who are identified as being in the Focused Tier of Performance Support within the DEI/SES Differentiated Framework (refer to MD Part C SSIP, Phase III, Year 2 Report pgs. 6-7). Systems Coaching continued as the technical assistance (TA) approach employed by the DEI/SES to implement the Tiers of General Supervision and Performance Support with all Local Lead Agencies (LLAs) and Local School Systems (LSSs). All universal, targeted, and focused programmatic support and TA are documented in the DEI/SES TA Log. The focused SSIP technical assistance was once again evaluated through an annual survey to local system coaches for quality, usefulness, and relevance.

The DEI/SES also continued to support State-level content experts/coaches, contracted with UM-SSW and JHU-CTE, to provide regular coaching cycles with local content coaches around the implementation of RBI and SEFEL/PM. During the spring of 2019 quarterly reflective coaching sessions were specifically focused on skill-building around colleague-to-colleague reflective coaching. With the initiation of Master Coach training, the quarterly reflective coaching session were phased out for the latter part of 2019. Regular individualized coaching sessions continued with local coaches and local leaders for each SSIP program based on identified priorities and needs. During Phase III, Year 4 all of the SSIP LITPs set aside the time to make regular, ongoing coaching a priority. The individualized local coaching sessions have been more focused on how to build the capacity of each early intervention provider to effectively address social-emotional needs of children and families and to support the fidelity of implementation across the evidence-based practices.

Evidence-Based Practices with Fidelity

As the four LITPs, in collaboration with the State, have worked to install, implement, and scale-up evidence-based practices, fidelity of implementation has started to emerge. Three out of the four SSIP LITPs have reached full implementation, with 50% or more staff trained to fidelity, using the RBI Implementation Checklist.

With the shift during Phase III, Year 2 of reflective coaching as the evidence-based adult interaction style to support any early intervention strategy, each of the four SSIP LITPs focused on reflective coaching at the practitioner level as well as with colleagues this year. All four SSIP programs worked hand-in-hand with Shelden & Rush to improve their reflective coaching practices to fidelity. One LITP is in full implementation of reflective coaching practices and two are in initial implementation and working towards full implementation. The fourth and largest SSIP LITP is in the installation stage of implementation for reflective coaching. This year they focused on staff buy-in and have specific plans to move forward with training an initial cohort of staff to fidelity over the next year. To continue capacity building around reflective coaching practices to fidelity with families and colleagues, 17 out of 18 Master Coaches reached fidelity of the practice. Master Coaches are available to support early intervention staff in each of the four SSIP LITPs with another seven LITPs having Master Coaches to continue capacity building around reflective coaching as the State moves toward scale-up.

With all four LITPs at the initial implementation stage of the Pyramid Model, the SIT did make the decision to utilize the revised Pyramid Model Early Intervention (Part C) BoQ developed by NCPMI,

twice a year, as well as explore implementation of the *Early Interventionist Pyramid Practices Fidelity Instrument (EIPPFI)*. Following the administration of the BoQ in June, the SIT analyzed their critical element indicator data jointly. The SIT made the decision to collectively work on the leadership team critical elements, 1-6, in order to have them partially in place or in place for all four of the SSIP programs by January 2020. This collective work resulted in each of the four LITPs creating a designated Pyramid Model LIT.

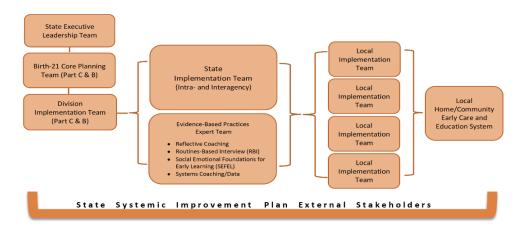


During Phase III, Year 4, the State continued to support an evidence-based data-informed decisionmaking model, TAP-IT (Team, Analyze, Plan, Implement, Track), integrated within a digital portfolio referred to as the TAP-IT DP. This evidence-based tool specifically assists the State Implementation Team (SIT) and the four Local Implementation Teams (LITs) to use data in a practice to policy feedback loop to make needed adjustments when implementing EBPs (Reflective Coaching, RBI, SEFEL/PM), the COS process, and high-quality, functional, routines-based IFSPs. Both the SIT and LITs are now versed in the TAP-IT process, with fidelity of implementation of the TAP-IT process clearly evident through State Implementation Team self-assessment data.

Strategic Collaboration for Data-Informed Decisions with Stakeholders

During Phase III, Year 4 the State continued to leverage strategic collaborations by engaging key early childhood partners and by supporting consistent, involved implementation teams. The Maryland Part C SSIP Teaming Infrastructure (Figure 3) continues to provide robust direction and support through ongoing stakeholder engagement for effective SSIP implementation and evaluation. The SIT continues to be a powerful vehicle to move the work forward with key partners and LITP leaders making adjustments based on data to improve implementation at the local level. LITs met regularly, and consistently included the Birth – K liaison/systems coach, to specifically review data and problem-solve strategies for effective implementation at the practitioner level. Additionally, Pyramid Model (PM) LITs were initiated in all four of the SSIP LITPs, with the largest LITP realizing the need to begin a PM LIT in just one site initially and then, after generating staff readiness and buy-in, move to scaling-up PM LITs in the other sites. With documented strategic collaboration results, the MSDE DEI/SES feels strongly that this teaming infrastructure is the model for the scale-up of local seamless, comprehensive Birth to Kindergarten (B-K) systems.

Figure 3. Maryland Part C SSIP: Implementation Teaming Infrastructure



Maryland Part C State Systemic Improvement Plan (SSIP): Implementation Teaming Infrastructure

Family Partnerships

A specific outgrowth from the intra- and interagency work of the SIT was the initiation of a new collaboration with The Parents' Place of Maryland (PPMD), the statewide Parent Training and Information Center funded by OSEP. PPMD is a key partner on the SIT and through this collaboration the need was identified to intentionally engage families of young children receiving early intervention or preschool special education services in a parent leadership program. During Phase III, Year 3, the MSDE DEI/SES funded PPMD to develop, pilot, and evaluate a new multi-session training program called *Baby LEADers: Beginning the Journey*. Using lessons learned from the pilot, which included a more in-depth application process and follow-up accountability for those parent's trained, the MSDE DEI/SES continued funding for the *Baby LEADers* program during Phase III, Year 4. A cohort of eight parents in the western region of Maryland graduated from the program and ongoing documentation indicates their involvement in leadership activities, mentoring other families, and serving on groups.

3. Evidence-Based Practices Implemented

During Phase III, Year 4, the SIT and four LITs continued to support the initial to full implementation of evidence-based practices (reflective coaching, RBI, and SEFEL/PM). Table 2a, 2b, 2c and 2d displays a brief overview of each of the four SSIP jurisdictions, the three EBPs, the implementation stage of each EBP, and the overall focus of implementation activities during Phase III, Year 4.

Table 2a. Cecil County - Year 4 Key Activities/Implementation of Evidence-Based Practices

Evidence-Based Practice	Implementation Stage	Year 4 Overall Focus of Implementation Activities
Reflective Coaching	Planning for Full Implementation	Cecil County was previously trained by Shelden and Rush and began implementing reflective coaching with parents. This year the county coach completed master coach training and utilized Sheldon and Rush when needed for assistance. Currently using a tool to measure fidelity with staff.
Routines-Based Interview	Planning for Full Implementation	Cecil County has fully implemented RBI, with 90% of IFSP in the county using the RBI in 2019. They have 10 staff members trained to fidelity or in process.
SEFEL/ Pyramid Model	Planning for Full Implementation	Cecil County is using the Benchmarks of Quality and has initiated a social-emotional screening process. The practice is being adopted more widely throughout the county, with almost 50% of providers trained to fidelity.

Table 2b. Frederick County - Year 4 Key Activities/Implementation of Evidence-Based Practices

Evidence-Based Practice	Implementation Stage	Year 4 Overall Focus of Implementation Activities
Reflective Coaching	Initial Implementation	The county now has a Master Coach (recently achieved fidelity) and plans to have Master Coach training for additional staff (12) with Rush and Sheldon in September 2020. Also requested a full time Systems Supervisor Position with the county which will be determined by late April/early May.
Routines-Based Interview	Planning for Full Implementation	The county has made significant infrastructure shifts including staffing changes, changing intake/evaluation/family assessment process, as well as teaming practices to ensure full implementation, with 81% of staff trained to fidelity.
SEFEL/ Pyramid Model	Initial Implementation	Frederick County added ASQ-SE 2 which gets mailed to families prior to the Initial Eligibility Evaluation, working on sharing resources with staff and parents, and added a full-time social work position.

Table 2c. Howard County - Year 4 Key Activities/Implementation of Evidence-Based Practices

Evidence-Based Practice	Implementation Stage	Year 4 Overall Focus of Implementation Activities
Reflective Coaching	Planning for Full Implementation	A systems coach is in place to support colleague-to- colleague coaching around EBPs. The local implementation team continues to meet to determine the ways to disseminate the practice. The county has infused reflective coaching into its professional development training.
Routines-Based Interview	Full Implementation	Howard County has fully implemented RBI and this continues to be an area of strength for the county (91% of IFSPs used an RBI in 2019). They are continuing to focus on fidelity and booster trainings.
SEFEL/ Pyramid Model	Initial Implementation	Howard County has revamped the coaches training, and now have specific coaches that are engaged with a series of resources to help with training other staff. Implemented the ASQ-SE as automatic screening for child find.

Table 2d. Montgomery County - Year 4 Key Activities/Implementation of Evidence-Based Practices

Evidence-Based Practice	Implementation Stage	Year 4 Overall Focus of Implementation Activities
Reflective Coaching	Installation	Beginning training staff with Rush and Shelden in March and working with staff to adjust schedules to accommodate the coaching commitment.
Routines-Based Interview	Planning for Full Implementation	The county has greatly scaled-up this practice in the last year, with almost 200 practitioners trained (many to fidelity). The number of IFSPs using RBI increased significantly in 2019 as the county continues to roll-out training and coaching to support fidelity of implementation.
SEFEL/ Pyramid Model	Initial Implementation	Montgomery County has begun a smaller stepped implementation by having a leadership team at one site to work through the challenges of implementation, with plans to scale-up over time throughout the county.

4. Overview of Evaluation Activities, Measures, and Outcomes

The MSDE DEI/SES, in collaboration with internal and external stakeholders and its partners at AnLar (a Washington, D.C.-based educational consulting firm), UM-SSW, and JHU-CTE, has continued to implement, review, and collect extensive data, and monitor the year's evaluation activities, measures,

and outcomes. The evaluation plan developed in previous year's and shared at the end of this report was developed by the MITP with stakeholder input to ensure that progress toward the SiMR is being achieved. Section C of this report provides an extensive review of the evaluation data findings, including numerous tables and figures which show data collected during the previous two to three years. The evaluation activities continued to focus on refining, disseminating, and implementing content and system coaching practices, implementing EBPs with fidelity, and working on collaboration and teaming.

In alignment with the logic model, the four key focus areas for the SSIP work include: Participation and Learning; Improvements to Infrastructure; Fidelity of Implementation of Evidence-Based Practices (EBPs); and Progress Toward Achievement of the SiMR. Evaluation questions are presented in each of the four areas in tables which describe the measures for both implementation and outcome questions, data sources, data collection procedures and timing, and current data. Where applicable, change from baseline was included in the charts to show progress. Challenges are also presented in each of the four areas as well as practice highlights from the four participating SSIP jurisdictions. Overall, the evaluation findings show sustained success in moving the State towards the continued infrastructure and personnel development improvements necessary to achieve the SiMR.

5. Highlights of Changes to Implementation and Improvement Strategies

The MSDE DEI/SES in collaboration with the SIT continually assess data around implementation and improvement strategies to make adjustments based on intra- and interagency stakeholder feedback. One significant adjustment made over the past two years was the identified need for reflective coaching training provided by Shelden and Rush with six-months of follow-up to support fidelity of the practice. In Phase III, Year 4, to further support colleague-to-colleague coaching as the adult learning strategy to implement any evidence-based practice, the MSDE trained 19 Master Coaches who received six months or more of follow-up coaching in order for participants to demonstrate fidelity. The MSDE team will provide ongoing support to these Master Coaches and will offer Master Coach training in the future to strengthen and further sustain the statewide coaching infrastructure at all levels.

Several changes to implementation strategies were also made around the SEFEL/Pyramid Model during Phase III, Year 4 with each jurisdiction forming a LIT specific to the SEFEL/Pyramid Model implementation, and one jurisdiction realizing the need to form a Pyramid Model LIT one region at a time. Additionally, this year saw further collaboration with the MSDE Division of Early Childhood and partners through the Preschool Development Grant Birth through Five (PDG B-5) to expand SEFEL/Pyramid Model. Initial scale-up of Pyramid Model practices into the preschool special education programs in the four SSIP counties began. This work will continue during Phase III, Year 5 with additional PDG B-5 funding to support continued local Birth to Kindergarten systems building. The focus of this work will be around smooth transitions from Part C to Part B services as well as social emotional development and meaningful participation for all children in natural and inclusive learning environments.

Finally, 2019 was the first full year of implementation of the revised MD IFSP process, document, and online tool requiring an increased emphasis on authentic assessment and the integration of the COS process. Updated reporting capabilities of the online tool now allows the State to compare the type of authentic assessment used to develop an initial IFSP and this will continue to inform State and local considerations for scale-up of authentic assessment practices with fidelity. Expanding this infrastructure development to the preschool component of the IEP also occurred in 2019 with plans for embedding more authentic assessment and integration of the COS process to be implemented July 1, 2020.

B. Progress in Implementing the SSIP

1. Description of the State's SSIP implementation progress

During Phase III, Year 4, progress in implementation aligns with the Activities/Actions We Take and the Outputs/Products We Generate in the Part C MITP Logic Model. Numerous activities and outputs have been completed or continued over the past year, indicating steady implementation progress.

a. Description of Planned Activities with Fidelity - Accomplishments, Milestones, and Timelines

The State has continued to carry out planned activities to effect change in Participation and Learning, Improvements in Infrastructure, and Fidelity of Implementation of Evidence-Based Practices, with the ultimate goal of continuing progress toward the achievement of the SiMR.

Participation and Learning

During Phase III, Year 4 the State continued to contract with UM-SSW and the JHU-CTE for State-level content experts in Reflective Coaching, RBI, and SEFEL/PM. The State-level content experts provided regular (typically monthly) reflective coaching sessions to the locally identified content/system coaches to support RBI and SEFEL/PM implementation. The State-level RBI and SEFEL/PM content experts provided face-to-face EBPs reflective coaching sessions with State/local content coaches and State/local systems coaches in March and May. These sessions were planned and facilitated by the State-level RBI and SEFEL/PM content experts/coaches, with input from the State System Coaches/Birth – K Liaisons, to support the integrated implementation of Reflective Coaching, RBI, and SEFEL/PM through colleague-to-colleague reflective practices.

As the MSDE considered sustainability within the four SSIP programs and scale-up of EBPs to fidelity beyond the SSIP counties, the State phased out the quarterly coaching sessions and began building a new level into the statewide coaching infrastructure through Master Coach Training and Support. In consultation with national experts Dr. M'Lisa Shelden and Dr. Dathan Rush, a Master Coach application process identified prerequisites at the provider and program level, including having previously met coaching fidelity. Although many LITPs have contracted with Shelden and Rush to conduct training, only a few have completed the six-month follow-up coaching to meet coaching fidelity, limiting the number of applicants in the initial Master Coach cohort. A total of 18 Master Coach participants completed two-days of onsite training and the six-month follow-up process, with 17 out of the 18 Master Coaches meeting fidelity.

Professional learning around the RBI continued at the local level in all four SSIP LITPs. This year the emphasis was on colleague-to-colleague coaching to increase the number of providers completing the RBI to fidelity. In the largest SSIP jurisdiction an additional cohort of 33 local RBI coaches have now been trained to fidelity in order to provide the ongoing coaching necessary to support all early intervention providers in reaching fidelity of implementation. During Phase III, Year 4, three SSIP local programs report being in full implementation of the RBI to fidelity, and the fourth is planning for full implementation. Additional training also occurred this year as Dr. Robin McWilliam updated the RBI

Checklist in 2019 and provided new guidance about using a streamlined process of the RBI in preparation for annual reviews. The 2019 RBI Checklist update was the 4th revision since 2008, and was in response to feedback from practitioners, and based on research and use both nationally and internationally. The State-level RBI content expert shared the updated checklist and conducted a mini-training with the SIT, with national, State, and local coaches in all four SSIP jurisdictions, and with the other LITPs who are using the RBI. During the November 2019 Professional Learning Institute, one of the personalized learning sessions focused on the RBI to fidelity and the updated RBI Checklist and guidance were shared.

Professional learning also continued in the four SSIP programs to support the implementation of the Pyramid Model. In April of 2019, five regional ITP Pyramid Model Booster trainings occurred in the largest SSIP jurisdiction with over 300 staff trained. Other locally driven trainings included: ITP Trauma Informed Pyramid Model Training, Pyramid Model for Children with Anxiety, and Preschool Pyramid Model ASQ-SE. The two EBPs reflective coaching sessions and the additional Pyramid Model trainings were evaluated using the Impact of Training and Technical Assistance (IOTTA) with high participant responses (over 80% or above) for credibility, organization, and interest as well as importance and impact.

Additional onboarding activities occurred in all four SSIP jurisdictions, and throughout the State, as the revised EI/PSE Personnel Standards went into place on July 1, 2019. *Maryland's EI/PSE System Personnel Standards Guide* was developed outlining the legal requirements for completing the learning activities for all early intervention providers as well as recommendations for the preschool special education workforce. The new requirements are categorized as: Foundations of Early Intervention; IFSP Development, Implementation, Evaluation; Teaming and Coaching Practices; and Service Coordination. The activities within each category include a variety of online modules, webinars, articles, self-reflection, and in-person training. The EI/PSE Personnel Standards Database requires each local program to enter, track, and maintain the status of providers meeting Personnel Standards. All early intervention staff, even if they had previously met Personnel Standards, are now required to complete the Mission and Key Principles Module, Maryland's IFSP Process and Document Training, and all the components of the COS professional learning (modules, face-to-face training, follow-up activities, and the COS-Competency Check).

Baby LEADers, the new parent leadership training program targeting families of young children with disabilities, ages birth through five, was developed, piloted, and evaluated by The Parents' Place of Maryland in 2018-19 with an initial cohort of five parents, and three parents graduating from the program. After receiving feedback and adjusting both the application process and the program content, four 4-hour training sessions were created and implemented in the western region of Maryland during the fall of 2019 with the Frostburg State University as a collaborative partner. A total of 18 applicants applied to the Baby LEADers program, with a 9-participant cohort graduating from the program. 100% of the parent participants agreed that the learning materials used, and information shared was useful to their lives. One parent said, "You changed my life. You changed my family's life." While the current SSIP evaluation plan does not include specific evaluation measures around this training program, the MSDE, DEI/SES in collaboration with the SIT and the evaluator, would like to consider this for next year. Data is being collected from the western region cohort regarding specific leadership opportunities such as individual assistance, coaching/mentorship, system-level advocacy and engagement, and serving on groups.

The MSDE DEI/SES Professional Learning Institute (PLI) in November 2019 had offerings directly influenced by and in alignment with the Part C SSIP work. Personalized learning sessions around social-emotional relationships and development included:

- Implementation of Developmental Screening in Early Intervention for Program Improvement;
- *RBI with Fidelity;*
- Trauma-Informed Care for Early Childhood;
- Beyond SEFEL/PM Tiers of Support for Social Emotional Development; and
- What Does it Take to Implement a Primary Provider Service Delivery Approach in Early Intervention?

The Local Early Childhood strand specifically incorporated the work of the Part C SSIP with all three sessions focusing on EBPs to fidelity and two out of the three sessions presented by our SSIP programs. All early childhood leaders at the PLI participated in the Local Early Childhood strand and were engaged in the following sessions:

- Implementation of the RBI With a Focus on Young Children with Challenging Behavior;
- Child Outcomes Summary (COS) Process to Fidelity; and
- Four SSIP Jurisdictions' Collective Journey to Integrating the Pyramid Model in Early Intervention Services.

Resource development and dissemination continued during Phase III, Year 4 with high usage of the following websites: Maryland Birth to Kindergarten Child Outcomes Gateway, Making Access Happen, Maryland Infants and Toddlers Social Emotional Foundations for Early Learning, and Maryland Learning Links. Specific professional development resources were released and posted on Maryland Learning Links during Phase III, Year 4 to support scale-up and sustainability of EBPs including:

- *Child Outcomes Summary (COS) Process: Age Anchoring Webinar* This activity-based webinar presented by Dr. Naomi Younggren provides a deep dive into age anchoring: what it is, why it's important, and how it's done. The MSDE DEI/SES has made this webinar the annually required training for this year as part of Maryland's revised EI/PSE Personnel Standards.
- *Routines-Based Interview Fidelity Coach* This seven-part webinar series, by Dr. Naomi Younggren, presents the Routines-Based Interview-Fidelity Coach (RBI-FC), offering providers, teams, and programs tools to define, observe, and assess accurate and consistent implementation of the RBI.
- Overview of Evidence-Based Practices in Early Childhood Intervention This awareness-level webinar presented by Dr. Dathan Rush and Dr. M'Lisa Shelden provides the background and rationale for using a primary service provider approach to teaming, natural learning environment practices, and a coaching interaction style to build the capacity of parents, teachers, and other care providers to promote child learning within the context of everyday routines and activities.

Improvements to Infrastructure

The State continued to engage in strategic collaboration through a robust teaming infrastructure with key partners at the national, State, and local level. Active, regular State-level engagement occurred with the MD Early Childhood Mental Health (ECMH) Steering Committee, the ECMHC National TA team, Home Visiting programs, the Infant Mental Health Association of MD/DC, the SEFEL/PM State Leadership team, and the Division of Early Childhood Preschool Development Grant B-5 implementation. An additional State-level collaboration this year was the Pritzker Children's Initiative (PCI) involving all the local/State public and private agencies supporting infants and toddlers (prenatal

to age 3) in Maryland. The PCI awarded Maryland a 3-year grant to increase services (prenatal to age 3) with a focused lens on access and equity.

During Phase III, Year 4, the State sustained teaming structures with internal and external interagency partners, with LITPs, and with external stakeholder groups. These strategic partnerships continue to provide direction and support for SSIP implementation and evaluation. Strong, sustained collaboration with strategic stakeholders and partners must continue for effective workforce and infrastructure development in order to scale-up evidence-based practices across the State.

Specific examples of strategic collaborations to support infrastructure shifts over the course of Phase III, Year 4 included:

- the rollout of Maryland's revised EI/PSE Personnel Standards requirements and Personnel Standards database for each local Birth to Kindergarten system;
- cross-training of early intervention, social services, and home visiting providers in three regions of the state (which included two SSIP jurisdictions) to support substance exposed newborns and their families;
- partnering with the MSDE Division of Early Childhood around the Preschool Development Grant B-5 to leverage funds to align and scale-up the Part C Pyramid Model work in the four SSIP jurisdictions as young children transition to and are supported in preschool classrooms;
- convening a stakeholder workgroup to revise the *Maryland Online IEP Preschool Component* in alignment with the IFSP to support robust child and family assessment, the COS process to fidelity, and routines-based/standards-based IEP development, implementation, and evaluation;
- partnering with the Maryland Chapter of the American Academy of Pediatrics (MD AAP) to present at the joint meeting of the SICC/LICC and to share the MITP online referral website at the MD AAP annual conference; and
- the rollout of a competitive grant opportunity to support *Birth to Kindergarten Systems-Building for Inclusive Practices* with collaborative implementation through SIT/LITs modeled after the Part C SSIP implementation.

The State-level content experts/coaches in RBI and SEFEL/Pyramid Model conducted regular, individualized coaching cycles with local systems and content coaches in the four SSIP LITPs. The time to engage in ongoing local coaching sessions with State-level content coaches has occurred with more regularity, indicating shifts in infrastructure. Three out of the four SSIP programs have a local systems/content coach devoted to the implementation of EBPs with fidelity at the practitioner level and all three programs are moving towards sustainability through permanent coaching positions. The addition of the Master Coach training, sponsored both by local programs and the DEI/SES, is another avenue to continue building the State/local infrastructure needed to sustain implementation of evidence-based practices.

Throughout this year, the Birth to Kindergarten Liaisons/State Systems Coaches continued to provide focused, on-going coaching and TA to Local Systems Coaches as the four LITPs continued to build their implementation infrastructure supporting all three EBPs (Reflective Coaching, RBI, and Pyramid Model). All coaching and TA were documented in the DEI/SES TA Log by the State Systems Coaches and the TA was evaluated through a survey completed by the Local System Coaches. Both the State Systems Coaches and the Local Systems Coaches participated in monthly SIT meetings either face-to-face or by webinar. The State Systems Coach regularly participated alongside the Local Systems Coache at the LIT monthly meetings to support ongoing implementation efforts at the local program level.

During this year, each of the SSIP jurisdictions created a designated Pyramid Model LIT to specifically address PM implementation successes and challenges. With significant support from the State Systems Coach and the Pyramid Model State content expert, the largest SSIP jurisdictions came to understand their need to begin the rollout of PM with just one of their regional sites. This LITP has now created a designated PM LIT at this regional site and has completed a baseline Early Intervention Pyramid Model BoQ.

The SIT/LIT infrastructure improvements have specifically assisted the Birth to Kindergarten Liaisons/State Systems Coaches to utilize the knowledge and skills learned through the Part C SSIP work to support the scale-up of evidence-based practices in other LITPs and preschool special education programs. Implementation of systems coaching continues to be realized through a regionalized, universal approach to programmatic support and TA delivered through regional Early Childhood Professional Learning Opportunities and/or Professional Learning Institutes, ongoing monthly follow-up coaching, and lessons learned sharing sessions. Additionally, a new mechanism for distribution of discretionary funds has been in place for the past two years to support local implementation of evidence-based practices directly aligned with the Early Childhood strategic imperative in the MSDE DEI/SES Strategic Plan. The Early Childhood-Local Implementation for Results (EC-LIR) grant application utilizes the evidence-based decision-making process, TAP-IT, which places a strong focus on effective Local Implementation Teams to analyze, plan, implement and track the systems change process. State Systems Coaches are responsible for monitoring the programmatic activities and outcomes of the EC-LIR grants as they work side-by-side with local early intervention and preschool special education leaders.

As the State moves toward sustainability and scale-up of EBPs, the infrastructure improvements of a regionalized systems coaching model combined with a well-defined data-informed decision-making model, that includes effective teaming, provide a solid foundation for implementation. The State continues to support the evidence-based data-informed decision-making model, TAP-IT, to assist the SIT and LITs to use data in a practice to policy feedback loop when implementing EBPs (Reflective Coaching, RBI, and SEFEL), the COS process, and high-guality, functional, routines-based IFSPs, so that any needed adjustments can be made. Engaging in the structured approach of the TAP-IT process has supported local/State collaboration within SIT meetings to identify, through root-cause analysis, challenges and action steps to move implementation forward at the program level. This same approach is now being used by Local Systems Coaches, providers, and partners, including families, within their LITs to solution-find around personnel development needs and infrastructure shifts necessary to sustain implementation at the provider level. One positive infrastructure improvement occurred within the SIT this year as this team now has a parent of a young child with disabilities. The PPMD staff person who leads the new Baby LEADers program is now one of two parent members on the SIT. This team member provides regular updates on implementation of the parent leadership program and provides a critical parent voice as the parent of a young child with a disability. One of the recommendations that has emerged through the SIT is to reach out to the trained parent leaders to fill local system-level advocacy opportunities such as joining a Local Interagency Coordinating Council, a Local Early Childhood Advisory Council, or a local Pyramid Model Leadership Team.

Fidelity of Implementation

During Phase III, Year 3 and 4, the SSIP jurisdictions provided additional trainings conducted by Dr. M'Lisa Shelden and Dr. Dathan Rush around the reflective coaching model. Three of the four SSIP programs have also participated in the six-months of follow-up with the completion of coaching logs, but many staff are still working on reflective coaching to fidelity. For this reason, it was decided to phase out the guarterly coaching sessions for local content coaches and build a coaching infrastructure through Master Coaches. Master Coaches are trained to fidelity in reflective coaching through submission of colleague-to colleague coaching logs with 6-months of coaching support. Once meeting fidelity, Master Coaches can then support local early intervention providers to reach fidelity in any of the evidence-based practices including reflective coaching. 17 out of the 18 participants in the Master Coach cohort met fidelity, based on the criteria established by Shelden & Rush, utilizing detailed coaching logs. The newly created Master Coach self-assessment survey indicated that 87% of coaches rated their capacity to implement EBPs at maximum or considerable improvement and 93% of coaches rated their capacity to support colleagues in the implementation of EBPs at either maximum or considerable improvement. Master Coaches are now in all four SSIP jurisdictions and are supporting early intervention providers to meet fidelity in reflective coaching and RBI. Several of the SSIP jurisdictions will be holding Master Coach training during the next year in order to continue building their local coaching infrastructure supporting the implementation of EBPs to fidelity across the board.

During Phase III, Year 4, it is exciting to report that collectively across the four SSIP jurisdictions the RBI is in full implementation, with 65.75% of providers trained to fidelity and 92.25% of providers either in training or trained to fidelity. The overall percentage of staff across all four SSIP LITPs completing RBIs to fidelity doubled from 33% in 2018 to almost 66% in 2019. Three SSIP local programs report they are in full implementation of the RBI to fidelity, with 50-86% of staff trained to fidelity, and the fourth, and largest SSIP local program is planning for full implementation with 46% of staff trained to fidelity. In all four SSIP programs, RBI training and follow-up coaching to reach fidelity is the expectation for all early intervention providers. A new IFSP report has been created to track the implementation of authentic child and family assessment within each local program and statewide, through either the RBI, the Scale for Assessment of Family enjoyment with Routines (SAFER), or by completing the Assessment: Natural Routines/Activities and Environments section of the IFSP. Initial data from this new report indicate that 51% of the IFSPs in SSIP jurisdictions use an RBI for functional child and family assessment, while only 8% in non-SSIP jurisdictions use an RBI as the means to gather this information.

With the revision to the RBI Checklist and guidance in 2019, the SIT began reviewing the previously developed *Guide to RBI Training and Coaching*, Maryland's guidance document outlining the minimum recommended standards for training and ongoing coaching of RBI practices at all levels to support consistent statewide implementation of the RBI to fidelity. The SIT distributed the guide for review in December 2019 and continued at the February 2020 SIT meeting with additional discussion and clarification. The expectation is that the final edits to the *Guide to RBI Training and Coaching* will be reviewed at the April 2020 SIT meeting and then distributed to the field through the RBI State Content Expert within follow-up coaching sessions.

The implementation of the Pyramid Model continued during 2019 with varying levels of progress across the four SSIP programs, as three of the four programs continued implementation of social-emotional screening using the ASQ-SE. Training and ongoing coaching from the State SEFEL/PM Expert/Coach continued throughout Phase III, Year 4 and was specifically tailored to the individual needs of each

LITP. Through Maryland's participation in NCPMI's Targeted TA initiative, the finalized version of the *Pyramid Model Early Intervention (Part C) Benchmarks of Quality 1.0* was made available in early 2019. After spending time reviewing the tool with both the SIT and LITs, the four SSIP programs agreed to complete the BoQ with their LITs and then to compile the data collectively. After completing the analysis of critical elements across all four programs, many elements were either not in place or partially in place. The SIT made the collective decision to focus on the Leadership Team critical elements since the SIT agreed it was necessary to have PM leadership teams in place to facilitate the rollout of other parts of the PM. Performance goals were drafted collaboratively, and specific action steps were documented in the SIT Digital Portfolio.

During face-to-face meetings in October and December the SIT continued to address PM action steps which included: PM LITs setting goals around Leadership Team critical elements; sharing the newly released Early Intervention Pyramid Practices Fidelity Instrument (EIPPFI) and Powerpoint developed by NCPMI; sharing ideas about how the EIPPFI might be incorporated into local program practices (i.e., to support initial implementation of practices such as social-emotional screening, to support home visit observation and record review); and initiating a draft guidance document around PM implementation. In January 2020, each PM LIT completed the BoQ with some noticeable shifts in the number of Leadership Team elements fully or partially in place, as well as other elements of the model. At the February 2020 SIT face-to-face meeting the MSDE DEI/SES shared an initial draft of the *Guide to Pyramid Model Training and Coaching* to provide initial guidance around PM implementation in collaboration with stakeholders. Work will continue to finalize this document and share it with other systems in Maryland who are beginning to integrate PM into early intervention service delivery.

During Phase III, Year 4 the SIT continued to implement the TAP-IT process with fidelity, holding each individual team member accountable for the challenging and ongoing work of systems change. Important, honest conversations based on how to do the work more effectively and efficiently now take place at face-to-face SIT meetings when issues arise. The SIT continued to measure the fidelity of the TAP-IT data-informed decision-making process using the *TAP-IT Fidelity Assessment Tool*. Results were completed at the end of the Pyramid Model TAP-IT cycle in February 2020 and indicated improvements in the areas of Team, Analyze, Plan, and Technology. The overall rating of fidelity was at 99% with Technology being the only area that still needs improvement.

With the October 1, 2018 rollout of the revised IFSP, the data around social-emotional outcomes on IFSPs for any child with a COS entry rating of 3 or lower on Outcome #1 was collected through a new IFSP report. This report was built into the online IFSP system and rolled out to the field in September of 2019. Results from this report for the four SSIP jurisdictions showed that 89% of children who had a COS entry rating of 3 or lower on Outcome #1 had a least one IFSP outcome addressing social-emotional development and/relationships. Non-SSIP jurisdictions showed that 82% if children had outcomes addressing social emotional when there were lower COS scores in Outcome #1. The ability to run this type of report, connecting IFSP outcomes to the broad early childhood outcomes, will allow the State to further analyze implementation progress as the State continues to sustain and scale-up EBPs supporting social-emotional development and relationships.

b. Intended Outputs Accomplished as a Result of the Implementation Activities

A description of SSIP activities and overall progress made towards implementation was discussed in the previous section. Table 3 below describes the logic model implementation outputs with the list of specific accomplishments aligned with the level of accomplishment.

Implementation Output	Accomplishments	Level of Accomplishment
Effective State Communication	 Monthly SIT meetings held with high overall attendance Regular attendance by B-K Liaisons at monthly LIT meetings Regular attendance at meetings with numerous collaborative partners supporting ECMH 	 Not started Started and making adjustments On target & continuing Completed
Systems Coaches Trained	 Four (Birth - K) State Systems Coaches previously trained Eight Local Systems Coaches previously trained and all regularly participate on the SIT 	 Not started Started and making adjustments On target & continuing Completed
Protocol for State/Local Technical Assistance	 Full implementation of the Technical Assistance Log Continued development and implementation of TA Manual 	 Not started Started and making adjustments On target & continuing Completed
Online resources to support systems coaching, Implementation Science, and TAP-IT	 Continued funding and development of the TAP- IT Digital Portfolio and companion site supporting systems coaching, Implementation Science and TAP-IT SIT and 4 LITs have TAP-IT Digital Portfolios in place 	 Not started Started and making adjustments On target & continuing Completed
Fidelity tools administered (TAP-IT, systems coaching, EBPs, COS)	 Fidelity Tools: RBI Implementation Checklist Pyramid Model Early Intervention (Part C) Benchmarks of Quality (BOQ) Early Intervention Pyramid Practices Fidelity Instrument (EIPPFI) Coaching Logs TAP-IT Fidelity Assessment MD COS-Competency Check (COS-CC) 	 Not started Started and making adjustments On target & continuing Completed

Table 3. Implementation Outputs/Accomplishments/Level of Accomplishment – Year 4

Implementation Output	Accomplishments	Level of Accomplishment
IFSP process/tools to support implementation of EBPs	 Evidence of Standards IFSP Outcomes Review tool integrated into the Part C local grant application process and the comprehensive monitoring process IFSP Process and Document Guide developed and disseminated New IFSPs report – COS ratings vs. social- emotional outcomes IFSP Process Performance Indicators developed and disseminated 	 Not started Started and making adjustments On target & continuing Completed
State/Local annual professional learning opportunities	 Five regional Early Childhood Local Implementation Lessons Learned (May 2019) with EC leadership teams (5-10 participants) - attended by all four SSIP jurisdictions Statewide rollout of Maryland's Early Intervention and Preschool Special Education System Personnel Standards Guide and Database (July 1, 2019) Statewide 3-day Professional Learning Institute with EC leadership teams and partners (5-6) – attended by all four SSIP jurisdictions (November 2019) 	 Not started Started and making adjustments On target & continuing Completed

2. Stakeholder Involvement in SSIP Implementation

a. How Stakeholders Have Been Informed

During Phase III, Year 4, informing stakeholders of the ongoing implementation of the Part C SSIP included face-to-face presentations, publications, and website content. The external stakeholder group who continues to get regular, detailed updates regarding the implementation of the Part C SSIP is the State Interagency Coordinating Council (SICC). The SICC initiated an Early Childhood Mental Health taskforce to compliment the SSIP implementation work around social-emotional development and this year facilitated a State-level panel of experts to share State-level efforts around meeting the social-emotional needs of young children and their families. This presentation was the highlight of the joint SICC/Local Interagency Coordinating Council (LICC) meeting held in May 2019 with close to 100 participants. Additionally, at the joint SICC/LICC meeting, the MSDE DEI/SES MITP Director and Preschool Special Education Coordinator provided a general overview of the Part C SSIP and shared lessons learned over the past several years. The Part C SSIP was also on the agenda during the December 2019 and the February 2020 SICC meeting. At the December general meeting, the four SSIP programs repeated the presentation that they gave at the November PLI about their collective journey to integrate the PM into early intervention services. During the February 2020 meeting, the MITP Director provided an overview of the SSIP evaluation plan as well as a summary of all the activities

currently being completed to evaluate the Part C SSIP at all levels of implementation. Additionally, a new target for FFY 2019 was proposed and stakeholder feedback was gathered through a survey to all SICC members as well as Part C SSIP SIT members.

Another avenue for sharing information and involving stakeholders in support of the Part C SSIP is the newly revised Maryland SEFEL Pyramid Model website <u>https://www.mdpyramidmodelsefel.org/</u> and Maryland SEFEL Pyramid Model Newsletter. These resources have been shared not only with the SIT and the SICC but have been sent out to all LITPs and Preschool Special Education Coordinators statewide through their B-K State System Coaches/Liaisons. While Maryland continues to use the term SEFEL Pyramid Model, a video was created for all stakeholders to understand the importance of understanding the Pyramid Model as a tiered framework to support infrastructure shifts, capacity building, and professional learning around social-emotional development and relationships within all tiers.

As mentioned earlier in the report, in November 2019, the MSDE DEI/SES hosted a statewide 3-day Professional Learning Institute for Maryland's early intervention and special education leaders and stakeholder community. The offerings during this Institute were shaped by the Part C SSIP implementation work with specific local presentations on RBI, COS process fidelity, and integrating the Pyramid Model into early intervention services. This Institute provided an exceptional opportunity for early childhood general/special education leaders, community partners, families, and other stakeholders to understand the significance of social-emotional development and relationships for young children with disabilities and their families.

State-level staff participate in multiple cross-system collaborative meetings and advisory groups that allow for the MITP to share updates on the DEI/SES work, including SSIP work, and to make connections that strengthen service delivery and workforce development. Examples of these include the Home Visiting Consortium, the MD State SEFEL/PM Leadership Team, the Early Childhood Mental Health Steering Committee, the Early Childhood Mental Health Consultation (ECMHC) TA Team, the newly established Infant Mental Health Association of MD/DC (IMHA-MD/DC) and the Pritzker Children's Initiative – Prenatal to Age 3 Grant Key Leaders.

b. How Stakeholders Have Had a Voice

The State continues to involve stakeholders at all levels to support the implementation of the SSIP and to guide efforts for scale-up of EBPs statewide. Internal MSDE and DEI/SES teams (refer to MD Part C SSIP, Phase III, Year 2 Report pgs. 29-30) continue to support alignment of the Part C SSIP work with the MSDE DEI/SES strategic plan and with Part B SSIP efforts. As DEI/SES has continued its work with various contractual partners and the Division of Early Childhood, the quarterly meetings, that began last year, have strengthened the implementation of EBPs within the MSDE and across Institutes of Higher Education. The MSDE EBP Collaborative Partners include representatives from the UM-SSW, JHU-CTE, University of Maryland College Park, and the Division of Early Childhood at the MSDE. While the purpose of these meetings is to update the team on relevant work, it also serves as a vehicle for exploration and problem-solving around how to best integrate the work across EBPs, other Divisions within MSDE, and into personnel preparation programs. This collaboration across contractual partners supports not only the Part C SSIP work but the overall work of early childhood special education in the State.

During Phase III, Year 4, the SIT has been extremely involved with decision making about the ongoing implementation of the SSIP. This high-performing team continued to meet consistently over the past year alternating between virtual 1½ hour meetings primarily for SIT/LIT updates, and 3-hour face-to-face working meetings with 90 – 100% attendance. The SIT continued to utilize the TAP-IT data-informed decision-making process to inform State guidance documents, to recognize and make infrastructure shifts, and to share local strategies and resources to support the LITs. As described above in Improvements to Infrastructure and Fidelity of Implementation, the SIT/LIT model provides the ongoing feedback loop to share implementation strategies and problem-solve implementation challenges. Each of the four SSIP jurisdictions continues to have active LITs which meets at least monthly, with a separate local team and/or team time to address Pyramid Model implementation. These teams follow the TAP-IT cycle and document their work in the TAP-IT Digital Portfolio. As mentioned earlier the State Systems Coach routinely attends LIT meetings to better align State-level priorities with local-level processes and ensure a communication loop back to the State-lead Teams.

C. Data on Implementation and Outcomes - AnLar

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

Since 2018, MSDE has partnered with AnLar, LLC, a Washington, D.C.-based educational consulting firm, to conduct the external evaluation for the SSIP. MITP and AnLar continued to review and revise the State SSIP evaluation plan, examine current data collection activities, and discuss opportunities for additional or broader data collection on emerging needs of the SSIP implementation. No major changes were made to the SSIP Logic Model and Evaluation Plan in the current year, as the State felt that the changes made in the previous years to align the two were sufficient. The evaluation questions presented below are organized into implementation evaluation questions (e.g., What happened? How many times did it happen?) and outcome evaluation questions (e.g., What change occurred as a result of SSIP activities?). In the evaluation plan, implementation evaluation questions begin with an I (i.e., I1, I2) while outcome evaluation questions begin with an O (i.e., O1, O2).

a. How evaluation measures align with the theory of action

The MITP evaluation plan was designed and revised in earlier years through a participatory evaluation process in which MITP staff and stakeholders worked with external evaluators to develop and refine the activities and performance measures to monitor effectiveness of implementation. The plan ensures alignment between the outcomes found in the MITP SSIP Theory of Action, the SSIP Logic Model and implementation and outcome evaluation questions in the Evaluation Plan (Attachment A).

b. Data sources for each key measure

c. Description of the baseline data for key measures

d. Data collection procedures and associated timelines

The MITP SSIP Logic Model and Evaluation Plan includes evaluation questions on implementation and short, medium, and long-term outcomes, as well as corresponding performance measures for each. The implementation questions help the State to ensure that activities of the SSIP are being implemented according to the plan, and that data are reflecting progress in implementation. The short-term outcomes are foundational to the effective implementation of the SSIP and are about learning that is taking place. The medium-term outcomes focus on implementation of the knowledge and skills learned as well as infrastructure improvements. Finally, long term outcomes address the overall impact of the SSIP and reflect child level improvements.

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

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

b. Evidence of change to baseline data for key measures

MDSE has identified four key focus areas for our work on the SSIP: Participation and Learning;

Improvements to Infrastructure; Fidelity of Implementation of Evidence-Based Practices (EBPs); and Progress Toward Achievement of the SiMR. Evaluation questions are presented in each of the four areas in tables which describe the measures for the implementation and outcome questions, data sources, data collection procedures and timing, and current data. Where applicable, change from baseline was included in the chart to show progress. Challenges are also presented in each of the four areas as well as practice highlights from participating SSIP programs.

Participation and Learning

This section includes data on evaluation questions related to establishing the foundation necessary for changes in infrastructure and capacity to implement evidence-based practices.

Evaluation Question	Measure of Success	Data Sources	Data Collection Timeline	Baseline/ 2017 Data	2018 Data	2019 Data	Notes/ Comparison
I3. How many PL sessions on EBPs (SEFEL/PM, RBI and reflective coaching) were conducted? • What topics? • How many participants? • What local programs were represented?	# PL sessions by: • Topic • # Participants • # LITPs represented	SIT/LIT Progress Update in Google Documents	Quarterly Summary for Annual Report		10 Trainings in 4 SSIP Sites 219 Total Participants (not unique) Topics: -Trauma- Informed PM - PM Booster Training - ITP/EBP Reflective - Coaching training	9 Trainings in 4 SSIP Sites 482 Total Participants (not unique) Topics: -RBI with fidelity -Trauma- informed care/SEFEL	The State continues to conduct trainings and professional learning with large number of staff
I9. What resources were selected or developed to support EBPs, systems coaching, implementation science & TAP-IT?	Name, type of resources	Child Outcomes Gateway; Making Access Happen; MD SEFEL/ PM website] Maryland Learning Links	Quarterly for Annual Report		Since the start of the SSIP, the SIT, LIT and State Leadership Teams selected/develop ed a total of 12 resources and supports.	Since the start of the SSIP, the SIT, LIT and State Leadership Teams selected/ developed a total of 21 resources and supports.	The State continues to utilize and develop tools to assist with implementation and expansion.
O1. To what extent were professional learning and resources of high quality, useful, and relevant for participants	X% of participants who rate PL high quality	End-of-PL Survey (for state level content training) – Impact of Training and Technical Assistance (IOTTA)	At the end of each professiona I learning session.	State-Led PL: Baseline established in 2018	State-Led PL: Average rating overall: 8.6 Trainer credibility average rating: 9.0 Organized and coherent rating: 8.7 Held their	Combined PL Training: Average rating overall: 8.5 Trainer credibility average rating: 9.0 Organized and coherent	Data show that overall ratings are consistently high.

Evaluation Question	Measure of Success	Data Sources	Data Collection Timeline	Baseline/ 2017 Data	2018 Data	2019 Data	Notes/ Comparison
				Contractor- Led PL: Average rating of high quality 96%.	interest/attention rating: 8.1 Contractor-Led PL: Average rating overall: 8.8 Trainer credibility average rating: 9.1 Organized and coherent rating: 9.0 Held their interest/attention rating: 8.4	rating: 8.9 Held their interest/attent ion rating: 7.9	
O2. To what extent did State and LITP Systems/Conte nt Coaches increase their knowledge of:							
Mental health services/ agencies (local/state)	% of participants who report increased knowledge of mental health services	Mental Health Services Survey	Annually	Helped families access mental health services frequently or very often: 18.1% Indicated they knew a moderate amount or a lot about early childhood MH services: 52.1%	Helped families access mental health services frequently or very often: 20.1% Indicated they knew a moderate amount or a lot about early childhood MH services: 57.3%	Helped families access mental health services frequently or very often: 16.1% Indicated they knew a moderate amount or a lot about early childhood MH services: 53.4%	4% decrease in helping families access MH services 5% decrease in knowledge about MH services Definition changed on the survey in 2019. Drop is an area for further exploration.
Reflective Content Coaching SEFEL/PM Routines Based Interview (RBI)	X% of systems coaches increase their knowledge. X% of El Providers increase their knowledge of	Impact of Training and Technical Assistance (IOTTA)	End of PL Survey	Mastery/ Competence Rating Average Pre: 6.4 Post: 7.6 Increase: 1.2	Mastery/ Competence Rating Average Pre: 5.6 Post: 7.3 Increase: 1.7	Mastery/ Competence Rating Average Pre: 6.1 Post: 7.5 Increase: 1.4	Mastery/ Competence has been consistently rated higher post vs. pre coaching and training since 2017.

Evaluation Question	Measure of Success	Data Sources	Data Collection Timeline	Baseline/ 2017 Data	2018 Data	2019 Data	Notes/ Comparison
	RBI and Reflective Coaching/ SEFEL/PM						
IFSP	X% of systems coaches increase their knowledge. X% of El Providers increase their knowledge of RBI and Reflective Coaching/ SEFEL/PM	Impact of Training and Technical Assistance (IOTTA)	End of PL Survey		Mastery/ Competence Rating Average Pre: 5.1 Post: 6.7 Increase: 1.6	No IFSP- specific PL sessions were held in 2019	Mastery/ Competence was rated higher post vs. pre training in 2018.
O3. How often did participants access the related online resources?	# of hits on related online resources	B-K Child Outcome Gateway; Making Access Happen; SEFEL/ PM website; Maryland Learning Links	2x per Year (June, Dec.)	B-K Child Outcomes Gateway: 339 users Making Access Happen: 1103 SEFEL/PM Online Modules Accessed: 588 users	B-K Child Outcomes Gateway: 2256 users Making Access Happen: 1709 SEFEL/PM Online Modules Accessed: 627 users Maryland Learning Links: B-K: 3050 unique pageviews COS: 1002 unique pageviews	B-K Child Outcomes Gateway: 1749 users Making Access Happen: 1763 SEFEL/PM Online Modules Accessed: 346 users Maryland Learning Links: B-K: 2778 unique pageviews COS: 1510 unique pageviews	B-K Child Outcomes Gateway: 565% increase in 2018 22.4% decrease in 2019 Making Access Happen: 55% increase in 2018 3.1% increase in 2019 SEFEL/PM Online Modules: 6.6% increase in 2018 45% decrease in 2019 Resources continue to be accessed and utilized at a high rate

Key Successes in Improvements to Participation and Learning

The implementation and outcomes questions in this section are all related to measuring changes and impact in participation and learning. The questions were designed to allow the SIT and LITs to track progress in professional learning, new resources that were developed, and how often online resources were accessed.

13. How many PL sessions on EBPs (SEFEL/PM, RBI and reflective coaching) were conducted? What topics? How many participants? What local programs were represented?

In the current year, there were a total of 9 professional learning sessions conducted in the four SSIP jurisdictions. These PL sessions included a variety of topics related to implementation of the chosen EBPs, including: Using the ASQ-SE to Support SEFEL/PM Implementation in Preschool, Trauma-Informed SEFEL/PM, Overview of Part C SEFEL/PM, and Anxiety and the SEFEL/PM for Birth to Five. A total of 482 participants attended the trainings listed throughout the year, which included a variety of audiences from the birth to five system. PL sessions will continue in the upcoming year with a continued focus on SEFEL/Pyramid Model training and boosters, as well as additional roll-out of RBI trainings for new staff.

Additional professional learning sessions, directly related to evidence-based practices supporting social-emotional development, were conducted at the DEI/SES Statewide Professional Learning Institute in November 2019. These sessions had 115 early childhood participants, including 21 participants from the four SSIP programs. The following topics were presented and is an indication of how scale-up of evidence-based practices has started within Maryland's Birth to Kindergarten programs:

- Implementation of Developmental Screening in Early Intervention for Program Improvement
- RBI with Fidelity
- Implementation of the Routines-Based Interview With a Focus on Young Children with Challenging Behavior
- Trauma-Informed Care for Early Childhood
- Four SSIP Jurisdictions' Collective Journey to Integrating the Pyramid Model in Early Intervention Services
- Beyond SEFEL Tiers of Support for Social Emotional Development
- What Does it Take to Implement a Primary Provider Service Delivery Approach in Early Intervention?

19. What resources were selected or developed to support EBPs, systems coaching, implementation science & TAP-IT?

The State has selected and/or developed numerous resources since the start of the SSIP. These documents are being used and are reviewed annually for any changes or updates based on SSIP implementation progress.

The resources selected to date include:

- The Observation Checklist for High-Quality Professional Development Training used to help with high-quality training activities and to provide ongoing feedback and coaching to trainers
- EBP-specific fidelity checklists used to track progress towards capacity building through reflection, observation, and coaching
 - Coaching logs used to measure fidelity of reflective coaching as defined by Shelden & Rush
 - Updated *Routines-Based Interview Checklist with Ecomap* (R.A. McWilliam & Cami M. Stevenson, 2019) - used to measure fidelity for "certification" and to guide selfreflection and coaching sessions.

- RBI-Fidelity Coach (RBI-FC) used for further reflection and refinement of RBI implementation.
- Pyramid Model Early Intervention (Part C) Benchmarks of Quality (BoQ) Form/Data Entry Spreadsheet, v. 1.0 – used to guide infrastructure supports for implementation of the Pyramid Model program-wide.
- Look-Think-Act: Pyramid Model Early Intervention (Part C) Benchmarks of Quality
- Early Intervention Pyramid Practices Fidelity Instrument (EIPPFI) Field Test Edition 1.0 - developed by NCPMI - to assess through observation and self-reflection the implementation of Pyramid Model practices by early interventionists in the coaching of family caregivers.
- MD SEFEL/Pyramid Model Newsletter (2019 Year in Review) created to share information about progress on the SSIP with staff, stakeholders and partners.
- TAP-IT UNITED Protocol used to build high performing implementation teams.
- TAP-IT Fidelity Assessment– used to assess team's data-driven decision-making process.

The resources developed by the State and/or the SIT to date include:

- DRAFT Guide to Pyramid Model Training and Coaching
- Updated MD Guide to Routines-Based Interview (RBI) Training and Coaching practice guide developed by the State and SIT team to help guide RBI practices in the state. Additional guidance provided for using the RBI for annual reviews.
- Maryland IFSP Process Performance Indicators guidance to support the extent to which IFSPs are both compliant and reflect best practices for young children with disabilities and their families.
- Inclusion Indicators in Maryland: State, Local Program, and Environment Indicators of High-Quality Inclusion for Young Children
- From Roots to Results: Integration of Evidence-Based Practices and the Tools to Support a Comprehensive Birth to Kindergarten System
- Maryland B-K Assessment Data Landscapes resource to support exploration of relationships between assessment practices and data sets (Child Outcomes Summary (COS), Early Learning Assessment (ELA), Kindergarten Readiness Assessment (KRA))
- Maryland's Early Intervention and Preschool Special Education System Personnel Standards Guide - a component of Maryland's Comprehensive System of Personnel Development to ensure a highly qualified workforce
- Division of Early Intervention and Special Education Services Technical Assistance Bulletin 16-02 COS (updated 2019) - State guidance to support staff with understanding and implementing Child Outcomes Summary (COS) rating process. Updated to include the four core components (functional child and family assessment, age-anchoring, COS Rating Prep Tool, and Decision Tree) for fidelity.
- MD Individualized Family Service Plan (IFSP) Process & Document Guide outlines the revised IFSP process.
- MD Birth-Kindergarten Child Outcomes Gateway (website) repository of resources supporting improved child outcomes.
- MD COS Competency Check assesses knowledge of COS process following training.
- MD COS Fidelity Checklist program self-assessment to monitor implementation of COS Core Components.

O1. To what extent were professional learning and resources of high quality, useful, and relevant for participants?

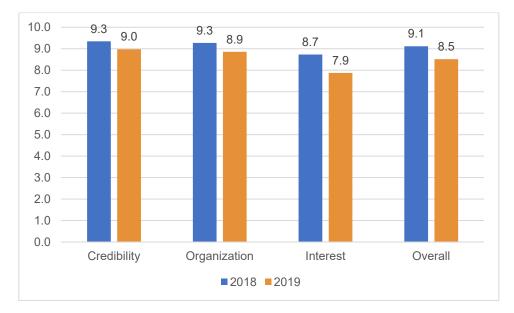
Part C Early Intervention providers received trainings throughout the year conducted by state trainers and contracted-trainers (UMSSW and JHU/CTE). Data were collected during specific trainings on knowledge gained, and the quality, usefulness and relevance of the trainings using the Impact of Training and Technical Assistance (IOTTA). Data from the IOTTA are reported on a scale of 1 to 10, with 10 being the highest. The IOTTA was implemented several years ago and is used for both state-led and contractor-led trainings so that MITP would have a standardized way of looking at feedback from trainings that could be compared across trainings, topics, trainers, and sites. The data presented below are separated into IOTTA's collected during trainings throughout the four SSIP jurisdictions in both 2018 and 2019. The IOTTA's were collected during a variety of trainings which were led by MITP contractors, state staff or both.

This evaluation survey was distributed to participants by UMDSSW at several SEFEL/PM trainings throughout the year:

- January 2019: Howard County Preschool Pyramid Model ASQ-E
- February 2019: Howard County ITP Trauma-Informed SEFEL/Pyramid Model
- March 2019: Howard County ITP Trauma Informed Anxiety Training
- March 2019: Howard Preschool Trauma-Informed Anxiety
- March 2019: SEFEL/Pyramid/RBI EBP Reflective Coaching
- April 2019: Montgomery ITP Pyramid Model Booster
- May 2019: SEFEL/Pyramid/RBI EBP Reflective Coaching
- October 2019: Howard SEFEL/Pyramid Model for Children with Anxiety

IOTTAs were collected from 184 participants total in 2018 and 482 participants in 2019, the data from which are combined below in Figure 4. Participants consistently rated the credibility of the trainer highest with an average of 9.3 and 9.0 for 2018 and 2019, respectively, followed by organization (9.3 and 8.9) and interest (8.7 and 7.9). Although there was a slight drop in the average ratings from 2018 to 2019, overall the average ratings of 9.1 (2018) and 8.5 (2019) are very high and reflects the effort made by MITP to deliver high-quality trainings to participants.

Figure 4: Professional Learning Feedback from IOTTA Responses 2018 (n=184) and 2019 (n=482)



These data are reviewed after each training session to determine areas of strength of each training and also to target where there may be additional information needed. IOTTA data will continue to be collected in 2020 for all planned trainings and coaching sessions. MITP would like to ensure that these data are collected in a consistent and ongoing way to make certain that trainings and TA provided are having the intended impact, and that continues to show an increase in knowledge associated with professional learning.

O2. To what extent did State and LITP Systems/Content Coaches increase their knowledge of:

SEFEL/Pyramid Model

The IOTTA (described above), in addition to collecting the information described above, also collects information on participants' mastery and competence of training content. Participants are asked to respond to two questions, the first asks about the level of mastery or competence with the information, tools, and or skills described in the training goals, and the second asks about the level of mastery or competence of a scale of 1 to 10 with 1 being Complete Beginner and 10 is Fully Expert.

Figure 5 shows the average participant rating for level of mastery or competence at both pre and post SEFEL/Pyramid-related trainings for the most recent three years (2017, 2018, and 2019).

- On average participants rated their pre-training mastery/competence to be 6.4, 5.6 and 6.1 in 2017, 2018 and 2019 (range 5.4-7.2) and post-training the average ratings were 7.6 in 2017 and 7.3 in 2018 and 7.5 in 2019 (range 6.2-8.2).
- Overall there have been consistent average rating increases of 1.2, 1.7 and 1.4 over the three years in mastery/competence from pre to post training.

Although these are self-ratings, the participants are being asked to reflect on how the training has impacted skill and knowledge immediately following the training and given tools to take back with them to their work. The results were reviewed by the EBP Expert Team for Reflective Coaching, RBI, and SEFEL, as well as the coaching and TA team at UMDSSW. While the level of mastery before and after the training showed growth in both years, the level of mastery is still in the intermediate range, indicating

for continued follow-up coaching and support from the State content coaches.

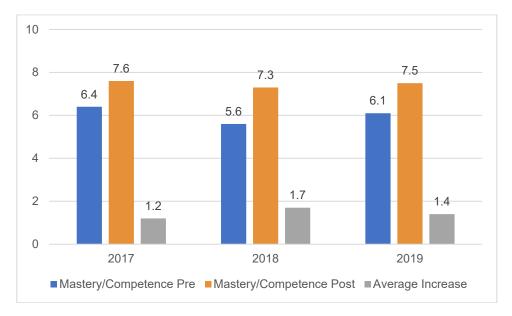


Figure 5: Participant Rating of Mastery/Competence Pre-Post Trainings 2017 (n=288), 2018 (n=288), 2019 (n=482)

O3. How often did participants access the related online resources?

MITP has created numerous online learning modules, tools, resources, and fidelity measures as a part of the SSIP. In order to track whether these modules, tools and resources are being accessed/utilized the State has collected data on how often online sites are accessed. There are four main sites that are tracked:

- Maryland Birth-Kindergarten Child Outcomes Gateway this website contains resources and information for practitioners, trainers, and leaders around Early Childhood Outcomes.
- Making Access Happen this toolkit, a repository of supports, learning modules, and resources is designed to provide a personalized, interactive learning experience for practitioners, providers and families in the support of evidence-based practices in inclusive early childhood settings.
- SEFEL/Pyramid Model MITP/Part C modules online modules/courses focus on training program staff working primarily with families in the home setting to increase capacity in supporting social emotional needs. There are 3 modules to the training each with a different focus; 1) Social Emotional Development, Universal Practices, and Family Partnerships, 2) Targeted Social Strategies, and 3) Intensive Interventions.
- Maryland Learning Links a joint partnership between the Maryland State Department of Education and Johns Hopkins University/Center for Technology in Education, this website provides resources and information to practitioners and teachers on a variety of early childhood and education topics. There are two main sections of the website that are tracked for access purposes: Birth-Kindergarten and COS.

Data on accessing online resources have been collected for 2017, 2018, and 2019 and are reported below (Table 4). There was an increase in the number of users accessing each of the websites, with MD B-K Child Outcomes Gateway showing the greatest increase at 565% in 2018 compared to 2017. This is attributed to 2018 being the first full year of the website being operational and the State

requirement to retrain all birth-kindergarten staff on the revised COS process, including the online COS Competency check. In 2019 there was a decline with 1749 users accessing the MD B-K Child Outcomes Gateway, 507 fewer users than in 2018. The Making Access Happen website showed an increase across all three years with 1763 users accessing the site in 2019. The MD Infants and Toddlers SE Foundations for Early Learning website ebbed and flowed with user access increasing from 2017 to 2018 and then decreasing from 2018 to 2019. During the first two years, the Birth to Kindergarten sections of Maryland Learning Links had a decrease in the number of unique pageviews from 3050 to 2778. The number of unique pageviews for COS pages increased by 50% from 2018 to 2019. In the upcoming year as the State continues to scale-up and expand the interventions to more sites in MD, these online resources will be key to consistent practices, messaging and branding. Data on online access will continue to be collected and reported on in future years.

Website	2017	2018	2019	2018-2019 Change
MD B-K Child Outcomes Gateway	339 Users	2256 Users	1749 Users	-22.4%
Making Access Happen	1103 Users	1709 Users	1763 Users	3.1%
SEFEL/PM MITP/Part C Learning Modules	588 Users	627 Users	346 Users	-44.8%
Maryland Learning Links	No Data	B-K: 3050 Unique pageviews	B-K: 2778 Unique pageviews	-8.9%
		COS: 1002 Unique pageviews	COS: 1510 Unique pageviews	50.69%

Table 4: Access to Online Resources 2019

Challenges to Improving Participation and Learning

As described in previous reports, the historical SEFEL training in Maryland was inconsistent with the Pyramid Model in its totality as trainings never addressed the program infrastructure components. This is likely why so many programs who have reported as implementing SEFEL/Pyramid Model have not seen the expected results. While there is better understanding, at least within the four SSIP counties, of the necessary infrastructure components to implement the Pyramid Model and how the *Early Intervention BoQ* supports building that infrastructure, keeping programs focused on this work remains a challenge. Raising awareness of this outside the SIT is an even greater challenge as program leaders always want to jump right into training staff. Then when provider-level fidelity tools, such as the *Early Intervention Pyramid Practices Fidelity Instrument (EIPPFI)*, are introduced, programs are further challenged and discouraged due to extreme time constraints on top of not fully understanding what implementation to fidelity looks like. Understanding of the Pyramid Model as a framework for service delivery and how the use of the BoQ and the EIPPFI support full implementation takes time and many conversations and experiences to develop. Trainers and coaches need to understand all levels and components of the model to support programs in building capacity.

Improvements to Infrastructure

An important foundational piece of the SSIP is to create and strengthen the infrastructure of the MITP. Several process and outcomes evaluation questions address improvements to infrastructure and are detailed below, including processes and structures in place for implementing professional development and leadership practices that will support the achievement of the SiMR.

Evaluation Question	Measure of Success	Data Sources	Data Collection Timeline	2017 Data	2018 Data	2019 Data	Notes/ Comparison
I1. How many State Implementation Team meetings were held?	# of meetings	SIT/LIT Progress Update Tracking Sheets	Annually		7 face-to-face SIT meetings 5 webinar meetings	6 face-to- face SIT meetings 4 webinar meetings	The SIT is consistently meeting as in previous years
I6. How many systems coaches were trained and in place?	#/Title of trained ITP Systems Coaches	Meeting notes, attendance in Google Documents	Annually		12 total (2 from each site, 4 MITP staff) initially trained in 2016-17	12 total (2 from each site, 4 MITP staff) initially trained in 2016-17	All sites have at least 2 trained local system coaches supported by a State systems coach
I7. How many/what type of coaching was provided and to whom?	# Coaching activities by: Type Topic Duration	SIT/LIT Progress Updates; State Content Coaching Log	Quarterly Summary		Reflective Coaching May 2018: 54 Reflective Coaching August 2018: 48 Reflective Coaching November: 60	Reflective Coaching March 2019: 45 Reflective Coaching May 2019: 22 See report for other coaching activities	Statewide Reflective Coaching sessions are well attended and coaching has continued in the four SSIP sites
O4. To what extent did MITP engage in strategic collaboration and communication with inter- agency and intra-agency stakeholders?	X% of State staff indicate communication and coordination was effective. #/type of jointly planned PD sessions	 Agendas Artifacts/ Products Meeting Minutes TAP-IT Digital Portfolio in LADSS LITP Interviews Meeting notes/attendan ce in Google Documents 	Quarterly Review and Summary	TAP-IT Cycle 1 HOT Rating (2017): 3/12 = 25%	TAP-IT Cycle 2 HOT Rating (2018): 8/12 = 75% TAP-IT Cycle 3 HOT Rating (2018): 11/12 = 92% See list of inter-agency collaborations in narrative	TAP-IT Cycle 2 HOT Rating (2019): 11/12 = 92% See list of inter- agency collaboratio ns in narrative	The SIT has demonstrated increasing collaboration and communication throughout each of the three cycles (increase from 25% in 2017 to 93% in 2019)
O5. To what extent did State systems coaches provide programmatic	X% coaches providing high quality systems coaching	Systems Coaching/Clien t Survey	Annually in January		63% rating for: Overall Quality and Usefulness	100% rating for: Overall Quality	Data indicate that support has been consistent and highly rated.

Evaluation Question	Measure of Success	Data Sources	Data Collection Timeline	2017 Data	2018 Data	2019 Data	Notes/ Comparison
support and technical assistance to LITP consistent with the MD Differentiated Framework?					86% rating for Relevancy	80% rating for Usefulness and Relevancy	
O7. To what extent did State content coaches provide programmatic support and technical assistance to LITPs?	X% State coaches providing high quality content coaching	Coaching Feedback Questionnaire	Annually in June		Quality: 54% Usefulness: 28% Relevancy: 20% Satisfaction: 24% Capacity: Fidelity: 32% Supporting Colleagues: 20% Supporting SE Outcomes: 17%	Quality: 61% Usefulness: 48% Relevancy: 55% Satisfaction : 42% Capacity: Fidelity: 48% Supporting Colleagues: 42% Supporting SE Outcomes: 45%	Data show increasing satisfaction with the coaching provided to the LITPs over time.

Key Successes in Improvements to Infrastructure

In the past year, MITP has made a number of improvements to State infrastructure that have supported local infrastructure within the four SSIP counties. State content and reflective/EBP coaches have developed regular coaching and training cycles with the sites, including collecting data to use for feedback and reflection. The State has also worked closely with the LITs to respond to requests for additional technical assistance resources for infrastructure development including new staffing positions. As in previous years, emphasis has continued on maintaining and developing new strategic partnerships and collaborations as evidenced by the numerous partnerships highlighted by the local counties.

17. How many/what type of coaching was provided and to whom?

MITP contracts with the University of Maryland School of Social Work (UMD) to facilitate virtual and inperson SEFEL Pyramid Model coaching sessions for local coaches and to support the outcomes and fidelity of the SEFEL Pyramid Model. RBI coaching is provided to through a contract with JHU-CTE to support fidelity of the RBI process and adherence to the Maryland Guide to RBI Training and Coaching.

In 2019, the MITP worked closely with its partners above in the four SSIP jurisdictions to continue to deliver ongoing coaching to local coaches and leaders.

• Cecil County continued to have monthly SEFEL/PM coaching sessions to focus on leadership and systems coaching; they discussed the needs of families and how SEFEL/PM would help

meet those needs. Cecil County worked our times throughout the year with the State RBI coach to review current progress, including data, and to review the updated fidelity checklist and discuss completion at AR.

- Frederick County continued monthly coaching sessions with the SEFEL/PM State Coach to discuss the BOQ and the implementation of universal screening. This year, Frederick began including Part B in the monthly coaching calls as they continue to expand the use of the practice. JHU-CTE supported the site with RBI coaching over twelve contacts, including face-to-face meetings, on a variety of topics including a full staff training, monthly emails with systems coach for guidance with implementation, and training on fidelity of the RBI.
- Howard County received two coaching sessions from the statewide RBI coach to help with review of the new checklist, discussion of the use of AR, and how to incorporate it into preschool Kindergarten program.
- Montgomery County continued to have bi-monthly two-hour SEFEL/PM coaching sessions for each of the five regional teams (and including the ITP leadership), which focused on continued implementation of practices. Montgomery also began coaching for Pre-K as they add partners to their county work in SEFEL/PM. The County also ramped up implementation of the RBI in 2019, as reflected in fifteen coaching contacts throughout the year, including a county-wide week-long training institute on RBI content with practice and coaching provided by JHU-CTE with focus on developing local interviewers and coaches.

Local coaches and leaders in the four jurisdictions also met two times in 2019 for statewide Reflective Coaching Sessions, facilitated by UMD and JHU-CTE. The content of these sessions varied but included topics such as: the five characteristics of coaching and the four types of coaching questions, coaching practices rating scale review, identifying solutions to challenges around colleague to colleague reflective coaching, and sharing of local promising practices and successes. These statewide reflective coaching sessions were attended by 45 (March) and 22 (May) coaches over the two sessions.

The State, in conjunction with partners, also continued to conduct SEFEL/PM reflective coaching and technical assistance with the four SSIP jurisdictions throughout the year. A total of six sessions were conducted with Cecil County, ten sessions with Frederick County, and six sessions with Montgomery County. Topics of coaching included discussions of problem-solving, goal-setting, reflective conversation, performance feedback, modeling, role-playing, peer-coaching, problem-solving, and providing materials and resources. MITP will continue to work with the local jurisdictions to provide coaching in implementing SEFEL/PM and ensuring that SEFEL/PM practices are implemented with fidelity.

O4. To what extent did MITP engage in strategic collaboration and communication with interagency and intra-agency stakeholders?

The MITP tracks both inter- and intra-agency strategic collaboration and communication as a mediumterm outcome to determine if the efforts to expand partnerships as a part of the SSIP are effective and to determine areas for continued expansion.

Inter-agency Collaboration

As described earlier in the report, MITP has spent the initial years of the SSIP strengthening and reaching out to key collaborative partners in a strategic way to build a coordinated and comprehensive

system. At each monthly SIT meeting, the jurisdictions reported out on strategic collaborations with partners during the month. Some examples of the types of partnership and collaboration activities that occurred in the previous year include:

- MITP
 - State SEFEL/Pyramid Model Leadership Team completed the Statewide Benchmarks of Quality, set goals, and made progress throughout the year (monthly meetings)
 - Collaboration around the Preschool Development Birth-Five (PDG B-5) Grant with the MSDE Division of Early Childhood (DEC) to work with UMD for to expand PM in preschool for SSIP counties) (quarterly meetings)
 - Met with SSIP counties Preschool Special Education Coordinators to discuss SEFEL/Pyramid Model implementation through PDG B-5 grant, awarded grant funding to support implementation
 - Substance-Exposed Newborns (SEN) cross-sector training occurred across the state with staff from local Infants and Toddlers Program (ITP), Maternal, Infant, Early Childhood Home Visiting (MIECHV), and Department of Social Services (DSS) cohorts
 - Continued with national technical assistance for Early Childhood Mental Health Consultation (ECMHC) to revise state standards (monthly meetings)
 - Part of statewide collaboration around the Prenatal to Age Three Pritzker Grant, which Maryland has been awarded.
 - Attended MD Chapter of the American Academy of Pediatrics annual meeting to discuss MITP services and online referral system
 - Cross-sector panel presentation held on early childhood social-emotional development and well-being, which included state-level presentation on Part C SSIP work at SICC meeting
 - Ongoing TA with the National Center for Pyramid Model Innovations (NCPMI) (monthly meetings)
 - Continued participation and co-facilitation of the Early Childhood Mental Health Steering Committee to coordinate cross-system services (monthly meetings)
 - Continued participation in the Infant Mental Health Association of Maryland/DC to support cross-system workforce development (monthly meetings)
 - 2nd year funding of Parents Place of Maryland to offer Baby Leaders to parents with children in early intervention and/or preschool special education
 - Held a webinar for Family Support personnel on authentic assessment and the RBI
- Cecil County
 - Attended multiple SEN training presentations
 - Assisted with onboarding for Health Starts (Health Department)
 - o Collaborations with the Judy Center and local Early Childhood Advisory Council (ECAC)
 - Attended Maryland School for the Deaf (MSD) and Brantwood Family Services Open Houses held in late spring/ early summer
 - ECAC training held with Dr. Chasnoff on Building a Community System of Care with a substance use focus
 - o Local Management Board Meeting held for Young Crime Victim Trauma Initiative
- Frederick County
 - Staff representatives attended Safe Babies Court and participated in CPP training and Guided Interactions for Family Time (GIFT) training

- Infants and Toddlers collaborated with Maternal Child Health program in the Health Department to provide Parent Cafes
- Cross-agency SEN training attended by service coordinators, providers, and program directors
- Ongoing collaboration with Frederick County Public Schools and brainstorming ideas for collaboration on the next grant cycle
- Cultural Proficiency Training provided for staff
- Childcare workgroup provided training for Childcare Choices (training daycare providers on what do at FITP, the coaching model and how to collaborate with staff in the centers)
- Ongoing collaboration with Part B/Child Find around establishing a new process for transition
- Howard County
 - ITP and RECC were represented at the Discovery Fair held by the local Office of Children and Families
 - Early Intervention Presentations shared at Howard County School System Special Education and Healthy Families program
 - Participated in Healthy Families Spring Event
 - o Collaborative meetings held with the director and ECAC
 - Met with local parent engagement groups to develop grab bags to distribute during various countywide events to support birth to three and three to five years olds
 - Through a library partnership, screenings were provided during certain library classes
- Montgomery County
 - Outreach Committee worked on formal outreach to pediatricians- in person and materials; Met with Prince George's County pediatric outreach team to share information
 - $_{\odot}$ $\,$ Met with Holy Cross NICU to formalize and expand the referral process
 - Attended the first meeting of Montgomery County Home Visiting Consortium to better align home visiting services in the county
 - ECS team met with new county executive regarding the new \$7 million EC initiative
 - Participated in the Access and Affordability Subcommittee to advise the executive about access and affordability of childcare and special needs services in the county

Intra-agency Collaboration

In order to answer the question of whether the SIT is a highly functioning team, an instrument to measure group functioning, developed by JHU-CTE, was introduced in 2017. This tool, known as the HOT rating, asks the team to rate themselves in twelve different standards/Highly Performing Team principles on a three-point scale: "Team Consistently Demonstrates"; "Team Usually Demonstrates"; or "Team Somewhat or Does Not Demonstrate". The twelve standards/principles are related to listening, completing activities on time, contributing to productivity, respect, organization and preparation, willingness to help, positive interdependence, individual accountability, performance monitoring, engagement and momentum, collaborative confidence, and technology optimization.

The SIT used the HOT rating for Cycle 1 in 2017, twice more in 2018 for Cycle 2 and Cycle 3, and then again in 2019 for Cycle 1 (after completing Cycle 2 in 2018). The table below shows the results of the ratings over the four cycles. Data indicate that the SIT has rated more of the twelve items "Team Consistently Demonstrates" at each of the cycles, going from 25% in Cycle 1, to 75% in Cycle 2, to 93%

in Cycle 3 and Cycle 1 (2019). These are very encouraging data as they show that the team dynamic around collaboration has been growing steadily over the course of the SSIP, with the team now consistently demonstrating almost all rated items. The SIT plans on continuing to use the HOT rating in the upcoming year to make sure that the gains in communication and collaboration demonstrated by the SIT over time are sustained.

	Team Consistently Demonstrates (% of total)	Team Usually Demonstrates (% of total)	Team Somewhat or Does Not Demonstrate (% of total)
Cycle 1 (2017)	25%	42%	33%
Cycle 2 (2018)	75%	25%	0%
Cycle 3 (2018)	93%	7%	0%
Cycle 1 (2019)	93%	7%	0%

Table 5: Communication and Coordination of the SIT by HOT Rating 2017 - 2019

O5. To what extent did State systems coaches provide programmatic support and technical assistance to LITP consistent with the MD Differentiated Framework?

As mentioned earlier, MSDE provides technical assistance (TA) and systems coaching support to local programs. MSDE tracks each instance of TA requested and provided to the four SSIP jurisdictions throughout the year for topics such as federal indicators, focused coaching around the SSIP evidencebased practices, and general SSIP TA. The TA can be initiated by the local programs or by DEI/SES. Table 6 below shows the number of instances of TA provided to each of the four counties and in total during 2019. The large number of contacts suggest that the State continues to provide coaching and technical support at a high rate to the SSIP jurisdictions.

Table 6: Technical Assistance Provided by County

County	Instance of TA
Cecil	20
Frederick	74
Howard	34
Montgomery	34
Multiple	57
Total	219

Beginning in January 2018, the MITP distributed the MITP SSIP Survey to <u>local systems coaches</u> to gather data on their perceptions of the quality of system coaching supports from the state systems coaches. The survey asked for local coaches to reflect on the support they received from the state systems coaches over the past year. Items on the survey addressed frequency and types of TA/Coaching accessed as well as the quality, relevance, and usefulness of the TA/Coaching. The state received a total of four responses in 2017, eight in 2018 and nine responses in 2019, with all four counties represented each year. The survey asked respondents to rate the overall quality, usefulness, and relevancy of the TA provided during the previous twelve months. Responses (Figure 6) show that local coaches have increasingly reported the coaching quality to be excellent (100% in 2019), very useful (80% in 2019), and very relevant (80% in 2019).

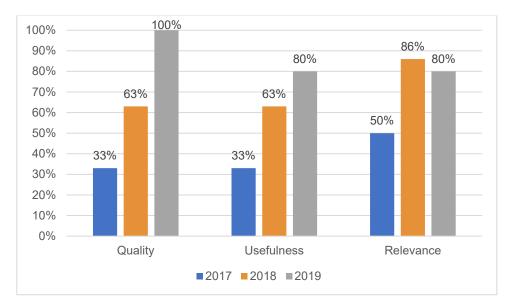


Figure 6: Local System Coach Perceptions of State System Coaching Supports 2017 (n=6), 2018 (n=8), and 2019 (n=5)

The survey will continue to be distributed each January to track satisfaction with the State support around coaching. MITP will continue to work with the evaluators and LITPs to determine the best way to use this data going forward for continued improvement of coaching, technical assistance, and supports.

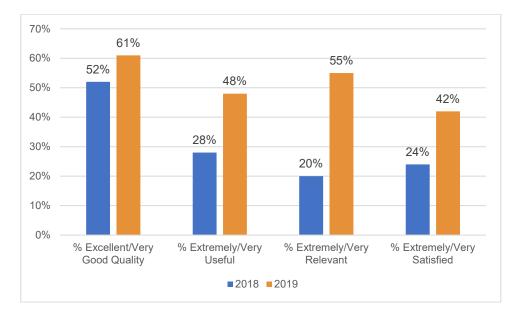
Practice Highlight

Howard County reached full implementation for Part C Reflective Coaching evidence-based practices. The county is looking to expand the Reflective Coaching practices to Part B so it represents a true birth to kindergarten practice. There are currently two mentor coaches for Part B that provided training and the county is in the process of training 12 additional staff for reflective coaching. These efforts may potentially be combined across the Part B and Part C programs.

O7. To what extent did State content coaches provide programmatic support and technical assistance to LITPs?

As reported in previous year SSIP reports, quarterly EBP Reflective Coaching Sessions occurred for the first several years of implementation. These Coaching Sessions were co-facilitated by the State Routines Based Interview (RBI) expert (JHU-CTE) and the State SEFEL/PM expert (UMD) to support the jurisdictions' integrated implementation of RBI, SEFEL/PM, and Reflective Coaching and to support improved colleague-to-colleague coaching. These sessions ended in May 2019, after it was decided that each of the four SSIP implementation counties would benefit from a more individualized approach to coaching support. In order to make certain that the effectiveness of coaching support could be evaluated without these coaching sessions, MITP and AnLar distributed the Coaching Feedback Questionnaire to local level content coaches. The questionnaire asked them to reflect on the coaching approaches utilized and to indicate knowledge gains and continued needs. While the 2017 response rate was too low to report meaningful information, data are presented for 2018 and 2019 below.

Responses to the 2019 survey (Figure 7) were received from 29 EBP coaches in the four SSIP jurisdictions (all represented), 48.3% who were a local SEFEL/PM coach, 44.8% a local RBI coach, and 6.9% were both a local RBI and SEFEL/PM coach. The survey asked the coaches to rate the overall quality, usefulness, relevancy, and overall satisfaction of the content coaching provided, as well as to rate their improvement in capacity in several areas (building local infrastructure, implementing EBPs with fidelity, supporting colleagues to implement EBPs, supporting SE outcomes for young children with disabilities and their families).

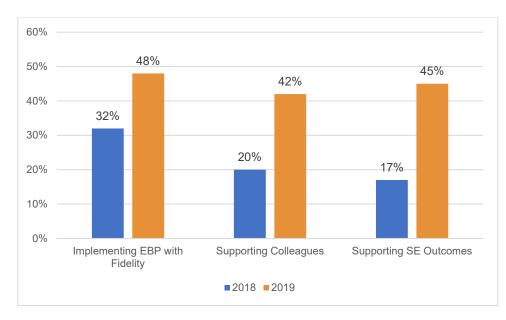




The data show that content coaches rated all four areas of support higher in 2019 compared to 2018, with the quality receiving the highest percentage of excellent/very good responses (61%). These results demonstrate improved response from MITP to the coaching needs of the local sites and demonstrate that the local coaches perceive the coaching on EBPs to be of high quality, useful, and relevant. As in previous years during interviews with the leadership and coaches of each of the SSIP jurisdictions, the expertise and knowledge of the trainers was a consistent praise.

MITP did note that satisfaction was the lowest rated item of the four, with 42% of respondents saying they were extremely or very satisfied with the coaching they had received. As a part of the survey, respondents were given the opportunity to provide written feedback and the state is looking at this information to determine ways to improve coaching in the upcoming year. Several written suggestions from participants included a request for additional cross-county collaboration, which may have been lessened due to the ending of the Quarterly Reflective Coaching Sessions in May.

Figure 8: Local content coaches rating maximum or considerable improvement in capacity 2018 (*n*=25) *and 2019* (*n*=29)



The above data (Figure 8) demonstrate considerable increases from 2018 to 2019 in the percentage of respondents indicating that coaching has helped them to improve their capacity to implement the practices with fidelity. In 2018, 17% indicated that they had maximum or considerable improvement in supporting SE outcomes, compared to almost triple that amount in 2019 (45%). Considering that the local content coaches are primarily responsible for dissemination of SE practices, the self-rating of improved capacity to support families is remarkable and in line with the progress MD has observed. As the State continues to support the local jurisdictions with resources and training around full implementation, the expectation is that coaches will continue to report increased capacity. An area for potential targeting in the future may be to look at the coaching specifically around SEFEL/Pyramid Model, as the results of the survey indicated trends to lower satisfaction with this coaching compared to RBI. Looking at the stages of implementation for the four counties (Table 2, Section A) it is clear that many are still in the implementation phase and therefore, working through the challenges of this practice. The state will continue to explore the differences in the counties to determine areas for targeted impact.

Challenges to Improvements in Infrastructure

As in previous years, an ongoing challenge to improving infrastructure has been staff turnover at the local sites. Several of the counties reported that RBI and/or SEFEL/PM coaches have left their local infants and toddlers programs, necessitating additional trainings and onboarding of new staff. MITP has continued to work to improve the program and provider capacity to implement evidence-based practices and coach colleagues. The revision and roll-out of the new Personnel Standards, effective July 1, 2019 and required for all early intervention personnel, provides a mechanism for statewide consistent onboarding of new staff, in foundational evidence-based practices, including teaming and coaching. Additionally, the MITP offered the first round of Master Coach training and follow-up support in an effort to build local capacity in coaching any natural learning environment practice. The goal is to create and sustain infrastructure at all levels to support implementation of reflective coaching practices, regardless of the EBP (e.g. RBI or SEFEL/PM) with fidelity.

Fidelity of Implementation of Evidence-Based Practices

The State has adopted and developed a series of fidelity tools and measures which are now being implemented to various degrees in the four SSIP counties. The State is emphasizing fidelity measures with the local teams in 2019 as the programs move deeper into the stages of implementation and the number of trained coaches to fidelity will need to grow. In addition, MITP recognizes that the eventual scale up of the EBPs will require a well-planned methodology for training and fidelity assessments for maximum statewide impact. This section shares the results of the fidelity measures collected in 2019, with many serving as baseline data for comparison in future reports.

Evaluation Question	Measure of Success	Data Sources	Data Collection Timeline	2017 Data	2018 Data	2019 Data	Notes/ Comparison
I4. How many/what type of fidelity tools were administered?	#, type of EBP of fidelity tools administered	SIT/LIT Progress Update in Google Documents	Quarterly Summary for Annual Report		See list in SSIP report	See list in SSIP report	The State continues to roll- out and use several instruments to measure fidelity
I10. How many IFSPs were reviewed?	# IFSP reviewed with IFSP Outcomes Review for Evidence of Standards Tool	IFSP Outcomes Review for Evidence of Standards Tool	Annually	Standards Tool 2014/2015 Baseline: Cecil: 1/8 (12.5%) Frederick: 1/8 (12.5%) Howard: 1/8 (12.5%) Montgomery: 1/8 (12.5%)	Standards Tool 2017/2018: Cecil: 8/8 (100%) Frederick: 1/6 (16.7%) Howard: 5/8 (62.5%) Montgomery: 8/8 (100%) IFSP Linkages and SE Review Tool: Cecil 11 Frederick 10 Howard 10 Montgomery 10	Using the online data system: 1227 IFSPs reviewed	The State was able to move from sampling to looking at all IFSPs in CY 2019. This 2019 data will serve as baseline data going forward.
O6: To what extent did State and LITP implementation teams use an evidence-based data-informed decision making process with fidelity?	X% implementation teams using the TAP- IT process for data-informed decision making	TAP-IT Fidelity Assessment in Digital Portfolio in LADSS	3x per year	TAP-IT Cycle 2 (March 2018): Team: 30/33 Analyze: 19/21 Plan: 17/21 Implement: 15/15 Track: 6/9 Technology: 12/15	TAP-IT Cycle 2 (March 2019): Team: 32/33 Analyze: 20/21 Plan: 20/21 Implement: 15/15 Track: 9/9 Technology: 12/15	TAP-IT Cycle 3 (February 2020): Team: 33/33 Analyze: 21/21 Plan: 21/21 Implement: 15/15 Track: 9/9 Technology: 14/15	The SIT is demonstrating increased data- based decision making over time.
O9. To what extent did local ITP RBI/SEFEL/PM coaches provide high quality content coaching?	X% coaches providing high quality content coaching	Coaching Practices Rating Scale	3x per year (Feb., May, Nov.)		Three Highest Rated Items: #2: 4.5 #1. 4.0 #10.3.9 (see below)	Capacity: Implementing: 87% considerable/ maximum improvement Supporting	A new survey was used in 2019 to collect this data and will serve as baseline going forward.

Evaluation Question	Measure of Success	Data Sources	Data Collection Timeline	2017 Data	2018 Data	2019 Data	Notes/ Comparison
						colleagues: 94% considerable /maximum improvement	
						Supporting SE outcomes: 56% considerable /maximum improvement	
O10.To what extent did participants in the four LITPs implement EBPs with fidelity?	% of LITP providers implement EBPs with fidelity						
RBI		RBI Implementation Checklist	Twice, annually	17.0% Trained to Fidelity	32.6% Trained to Fidelity	65.8% trained to Fidelity	102% Increase in the number of trained RBI coaches in the four SSIP sites from 2018 to 2019
SEFEL/PM		SEFEL/PM Benchmarks of Quality	Twice, annually		Range: 13% - 88% at partial or yes	Range: 37%- 100% at partial or yes	The State continues to show increased fidelity using the Benchmarks of Quality
COS	95%	Maryland Child Outcomes Summary Competency Check	Annually starting in 2018		97%	89%	Results remain high although lower due to mostly new staff taking the CC.
O11. To what extent do IFSPs include social emotional specific outcomes and services	% IFSPs with social emotional specific outcomes and services	IFSP Social- Emotional Review Tool	Sample: #/jurisdiction reported Annually	Sample 1: 95% with SE outcomes 5% with SE services Sample 2: 63% with SE outcomes, 9% with services	Sample 1: 96% with SE outcomes, 4% with SE services, Sample 2: 96% with SE outcomes, 12% with SE services	89% of IFSPs reviewed included at least one SE outcome for children rated 1-3 at entrance for the four SSIP counties (82% for non-SSIP counties)	Now using the statewide data system so sampling is no longer needed. 2019 data will serve as baseline data going forward.
O12. To what degree are families engaged in the IFSP process evidenced by functional, routines-based IFSP outcomes?	% of families reporting they help their child develop and learn	ITP Family Survey	Annually (Results Available in January)	MD: 98% Cecil: 97% Howard: 98% Franklin: 98% Montgomery: 97%	MD: 98% Cecil: 98% Howard: 98% Franklin: 98% Montgomery: 98%	MD: 98% Cecil: 98% Howard: 98% Franklin: 98% Montgomery: 98%	Results have been consistently high (>97%)

Key Successes in Fidelity of Implementation of EBPs

Many of the early years of the SSIP has been working to develop and install the evidence-based practices identified by stakeholders (RBI, SEFEL/PM, Reflective Coaching). Beginning in 2018 and onward the emphasis is on implementing the EBPs with fidelity in order to make certain that there is consistent positive impact throughout the state. Data are being collected on fidelity whenever possible, and this section outlines the way MITP is beginning to establish baseline fidelity measures to look for improvement over time.

14. How many/what type of fidelity tools were administered?

Once the EBPs were selected through the SSIP stakeholder and data analysis process, MITP began to focus on the use of reflection and fidelity tools/measures. To date the following tools are being used in the state at varying degrees of implementation:

- EBP Implementation: TAP-IT Fidelity Assessment, TAP-IT UNITED Protocol
- Coaching: Coaching Logs
- RBI: Updated RBI Checklist (formerly RBI Implementation Checklist)
- SEFEL/PM: Pyramid Model Early Intervention (Part C) Benchmarks of Quality, Early Intervention Pyramid Practices Fidelity Instrument (EIPPFI) Field Test Edition 1.0.
- IFSP Process Performance Indicators
- COS: MD COS Competency Check

I10. How many IFSPs were reviewed?

In last year's SSIP report, data were shared on reviews of the quality of IFSP outcomes using the Functional, Routines-Based IFSP Outcomes Review for Evidence of Standards tool. This tool was created by the state to use when conducting manual reviews of IFSPs to look for compliance with standards. Due to the state's updated comprehensive data system, MITP can now conduct reviews of IFSPs using reports programmed into the system. Therefore, this year data are reported for the first time on all of IFSPs in the four jurisdictions, rather than a small sample as in previous years. In 2019 the State looked at all IFSPs that contained an entry social-emotional rating of 1-3 and then how many outcomes (Range: 0-12) then addressed SE development. In 2019, a total of 1143 IFSPs were reviewed to determine what percentage of IFSPs contained outcomes addressing low COS entry scores in the area of social emotional development. The results of the review can be found in **011** below. Also contained below are a comparison of the SSIP sites with the rest of the state.

O6: To what extent did State and LITP implementation teams use an evidence-based datainformed decision making process with fidelity?

In March of 2018, the SSIP State Implementation Team conducted the initial TAP-IT Fidelity Assessment based on reflection of their team's progress-to-date. The fidelity assessment provides an indication of the extent to which the data-informed decision-making process (TAP-IT) is being implemented. The assessment addressed each component of the process: Team, Analyze, Plan, Implement, and Track, as well as their use of technology in that process. The intention is that the SIT will complete the fidelity assessment after each cycle in their process to review where they may need to improve and/or change their processes and practices related to data-informed decision making

as they support SSIP implementation. The process includes agreeing to and assigning rating of In Place (3), Partially in Place (2), Emerging (1), or Not Evident (0) for each item within the components of the assessment. The results from the March 2018 and 2019 TAP-IT Cycle fidelity assessments are included below. Data show that the SIT has made considerable progress on their data-informed decision-making process, with almost all components In Place.

Component	March 2018 Total Score/Total Possible Score	March 2019 Total Score/Total Possible Score	February 2020 Total Score/Total Possible Score
<u>T</u> EAM	30/33	32/33	33/33
<u>A</u> NALYZE	19/21	20/21	21/21
<u>P</u> LAN	17/21	20/21	21/21
IMPLEMENT	15/15	15/15	15/15
<u>T</u> RACK	6/9	9/9	9/9
Technology	12/15	12/15	14/15

Table 7: TAP-IT Fidelity Assessment 2018-2020

Beginning in March 2018 and continuing through February 2019, the SIT began implementing TAP-IT Cycle 2 based on the progress observed in Cycle 1 and the rationale that the State was ready to move forward to the next cycle. In general, each TAP-IT cycle has occurred over a year's time, and the SIT worked on Cycle 2 during 2018 and into 2019 with completion in early 2019. In February of 2020, the SIT completed Cycle 3 of the TAP-IT Fidelity Assessment. From Cycle 2 to Cycle 3, the SIT reported an increase in practices that are in place for several components including TEAM, ANALYZE, PLAN and Technology.

The LITPs have also begun to implement the TAP-IP Fidelity Assessment in their local implementation work during 2018/2019. A limited amount of data is available for reporting however local entities continue to track this information to determine progress and impact data-based decision making. The MITP continues to work with the LITPs to ensure data collection is consistent.

O9. To what extent did local ITP RBI/SEFEL/PM coaches provide high quality content coaching?

In 2018 data was collected on the impact of content coaching supports at the local level and how those supports translate into improved practices for children and families. MITP utilized a Coaching Practices Rating Scale (CPRS) which serves as a self-assessment for local content coaches, and also administers a Coaching Feedback Questionnaire to local coaches to gain feedback on the quality, usefulness, relevance and improving capacity based on coaching training and technical assistance.

In 2019, with the initial cohort of Master Coaches completing training and six months of follow-up coaching to support fidelity, the state switched from using the Coaching Practices Rating Scale to administering a Master Coach Survey. The Master Coach Survey is a self-report tool completed by Master Coaches to reflect on their own capacity to coach colleagues and support their ability to implement EBPs and promote social-emotional outcomes for families and children with disabilities. The

baseline data from the survey indicates 93% of master coaches rated their capacity had maximum or considerable improvement in supporting colleagues to implement Evidence-based Practices. Additionally, 87.6% of the coaches rated their capacity had maximum or considerable improvement in implementing Evidence-based Practices with fidelity.

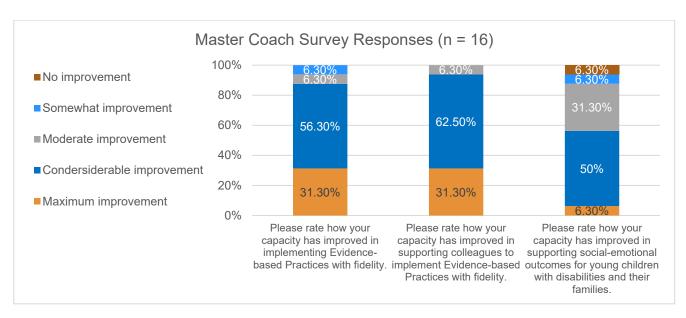


Figure 9: Master Coach Survey Responses (n=16)

Master Coach training and coach activities included direct support from Shelden and Rush, coaching calls, face to face training, webinar support and printed resource materials.

O10.To what extent did participants in the four LITPs implement EBPs with fidelity?

Reflective Coaching

With the roll-out of Master Coach training and follow-up coaching in 2019, 17 out of the 18 participants met fidelity as a Master Coach, based on the criteria established by Shelden and Rush, utilizing detailed coaching logs. All four of the SSIP programs have placed a stronger lens on the fidelity of reflective coaching practices with one out of four SSIP programs reporting they have reached full implementation of coaching to fidelity, two are working towards full implementation, and the fourth SSIP programs is in installation phase of reflective coaching practices to fidelity. Out of the 17 Master Coaches who met fidelity, four of the Master Coaches will specifically support three of the SSIP programs to continue building capacity for full and ongoing implementation of reflective coaching practices to fidelity. The SSIP jurisdiction who is currently in full implementation of reflective coaching practices to fidelity has already had a Master Coach supporting implementation for over a year.

Routines-Based Interview

Each staff person who was trained in RBI by the nationally trained State RBI Content Trainer/Coach or by a Maryland State-approved RBI Trainer/Coach passed a knowledge assessment with 90% accuracy and completed the *RBI Implementation Checklist* with at least 90% accuracy. While each of the four SSIP jurisdictions are in different stages with RBI implementation, the State saw an increase from 17.0%

to 32.6% of providers across the SSIP jurisdictions having been trained to fidelity, a 91.7% increase in 2018. In 2019, the State saw an increase from 32.6% to 65.75% of providers across the SSIP jurisdictions having been trained to fidelity. This annual trending increase can be credited to the work of the local programs to implement the practice universally and to access the training and supports provided by MITP and JHU-CTE. The table below summarizes the number of EI providers in each of the counties who are in training or have been trained to fidelity in 2019. Three of the four counties have 100% of their providers in training or trained to fidelity in RBI. Howard County has the highest percentage of staff trained to fidelity at 86%, while Montgomery County has the most trainers (125) who have passed the fidelity check. The State is extremely encouraged by these results, which demonstrate that the SSIP is having the intended impact of disseminating evidence-based practices with fidelity.

Data as of December 31st, 2019									
	Cecil	Frederick	Howard	Montgomery	Tota				
Total El Providers	14	36	43	271	364				
# In Training	7	7	6	62	82				
# Trained to Fidelity	7	29	37	125	198				
% in Training	50%	19.00%	14.00%	23.00%	26.50%				
% Trained to Fidelity	50.00%	81.00%	86%	46.00%	65.75%				
% in Training or Trained to Fidelity	100.00%	100.00%	100.00%	69.00%	92.25%				

Table 8: SSIP Sites Staff Trained in RBI to Fidelity*

*Data as of December 2019

SEFEL/Pyramid Model

Since 2017, MD has been using a standardized tool to address performance related to implementation of SEFEL/PM components at the program level, the *SEFEL/PM Benchmarks of Quality (BoQ)*. This tool is completed at two time points each year by the four counties to look for progress in implementation. In April 2019, the National Center for Pyramid Model Innovations (NCPMI) released a new revised BoQ to reflect recent changes in guidance and practices for the Pyramid Model. NCPMI describes the use of the BoQ "by a collaborative State Leadership Team (SLT) to assess progress and plan future actions so that selected Pyramid Model evidence-based practices are available for providers and families statewide. The Benchmarks are grounded in implementation science, which bridges the gap between Pyramid Model practices and the actual high-fidelity implementation of that practice. Implementation has several stages beginning with assessing needs and exploring which practices to implement."

The *BoQ* includes rating options of 0 (not in place), 1 (partially in place), or 2 (in place) across a set of 30 indicators in several areas. The SIT chose to use the elements of the BoQ that centered on the leadership teams in each county to create collective performance goals. The critical sub-elements of the BoQ that the teams rated include Leadership Team, Staff Readiness and Buy-In, Family Engagement, Building Staff Capacity, Providing Interventions to Children with Persistent Challenging Behavior, and Monitoring Implementation and Outcomes.

During 2019 the BoQs were given twice for each SSIP County – during the summer of 2019 (June-August) and during the winter of 2019/20 (December 2019-January of 2020). Individual BoQ reports were given to each jurisdiction to provide the results and feedback which can then be used by

the teams to determine areas for targeted improvement. The summary data in Figure 10 below shows the percentage of the four sites that are reported to be at "partially in place" or "in place" for each of the benchmarks within the components of the BoQ. There were improvements observed in five of the six components, with the largest jump coming in Family Engagement (50% at Time 1 to 75% at Time 2). The teams consistently rated high the benchmarks for the Leadership Team (80%/100%) and for Building Staff Capacity (90%/95%).



Figure 10: Percentage of SSIP Sites Rating Partially In Place or In Place by Benchmarks of Quality Component

The results of the BoQ indicate that consistent progress is being made across the jurisdictions. The SIT did note that Providing Interventions to Children with Persistent Challenging Behaviors, while showing improvement from Time 1 to Time 2, is consistently rated as having the fewest elements in place. These results are not surprising considering the SSIP counties are in various stages of implementing EBPs related to social emotional interventions and practices. The data also show that teams did not report making progress on indicators in the area of Monitoring Implementation and Outcomes, with 61% of elements in place or partially in place at both time points. The State plans to explore the individual county results for this indicator and all the indicators to determine focus areas within the State for targeted TA. The State will continue to use the BoQ at two points in 2020 to track progress for each of the counties, with particular focus on the areas that were rated lowest in the 2019/2020 BoQs.

Practice Highlight

Howard County uses the RBI checklist to monitor fidelity for the Routines-Based Interviews at the provider level. IFSPs reviewed following the implementation of RBI indicate that outcomes were more functional. The RBI training and coaching strengthened practitioners' capacity to identify functional outcomes more appropriate for the child and their family.

Child Outcomes Summary

The MD COS Competency Check (MD COS-CC) began being administered to all four SSIP jurisdictions during November 2017 and has continued through the current SSIP reporting years. A total of 329 practitioners in 2018 and 102 in 2019 completed the COS-CC. The results (Table 9 below) demonstrate a continued high mastery of these concepts. However, the State did note a drop in the most recent reporting year which most likely was due to new staff and those who had not previously passed the competency check. Upon discussions with the Leadership Team, it appears that they onboarded a number of new staff in 2019 and the results reflect the work done to take and retake the check while staff were being trained.

Practice Highlight

Frederick County data shows an improvement in the COS Process reflecting a positive trend toward reaching the state target. The county has exceeded the goal of increasing their APR indicator 3a summary statement 1 data. The LIT is focusing on age anchoring by developing self-paced training materials for providers to access. Additionally, the fidelity standards were revised so the focus on assessment summary is more manageable.

Table 9: % Meeting Competency for the Maryland COS Competency Check (MD COS-CC) by SSIP Site 2018 (329) and 2019 (n=102)

County	2018	2019
Cecil	100	95
Frederick	90	82
Howard	98	83
Montgomery	97	89
Total	97	89

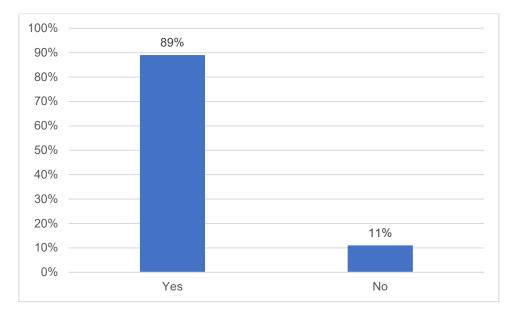
The State will continue to collect this data on an annual basis going forward as a way of making certain that new providers understand the competencies required to determine COS ratings. The MD COS-CC can also be used as an annual or regular professional development resource with existing staff and providers as a way to ensure that practices remain consistent and that staff are reminded of them often. The ultimate goal of MITP is to have every practitioner pass both competencies (100% competency) and complete the process with fidelity. The State also developed the Maryland COS Process Fidelity Checklist in response to local leaders requesting a tool to monitor fidelity of the four core components, which is being implemented currently. Future reporting will look at the total number of staff who have passed the competency check.

O11. To what extent do IFSPs include social emotional specific linkages, assessment tools, and outcomes?

Beginning in 2017, the MITP developed and implemented an IFSP review tool to help identify the number of IFSP outcomes specific to social-emotional development and then whether social work, psychology, or family counseling/training services were included. This review tool was first used by

MITP staff in December 2017, and then by LITP leaders from each of the four SSIP jurisdictions in December 2018/January 2019. Reviews consisted of looking at two sets of samples of IFSPs, with the first set randomly chosen from the total number of IFSPs developed during the year where the child was made eligible with delays in social-emotional development. The second set of sample IFSPs looked at initial IFSPs developed during the year with COS entry ratings on Outcome #1 of a 3 or below (no age-expected skills for social-emotional development and relationships).

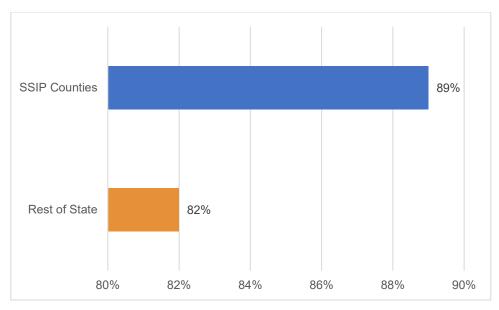
However, in 2019 it became possible for MITP to review all IFSPs using the state's comprehensive data system, replacing the need for manual reviews of a sample of IFSPs. Data from a total of 1143 IFSPs developed in 2019 were reviewed by the State to look for social-emotional outcomes related to low COS entry ratings. The State chose all IFSPs where the child was rated 1-3 at entry in the COS social-emotional outcomes area to review, looking to see if there were any outcomes related to SE development to address the low COS entry rating. Figure 11 below shows the results of the analysis, where 89% of IFSPs contained at least one outcome related to SE development. A deeper dive into the data showed that of the IFSPs that included at least one SE outcomes, 65% included 2 or more outcomes (Range: 1 - 13).





In order to determine if the trends observed in the four SSIP counties were different than the rest of the State, data were compared between the SSIP counties and those remaining MD counties that had not yet begun to implement most of the SSIP practices. Using the data system, the State reviewed 2955 IFSPs for the non-SSIP counties from 2019 to look for SE outcomes for children with low COS SE entry ratings. Figure 12 shows that the SSIP counties included SE Outcomes more often than the non-SSIP counties (89% vs. 82%). The State is very encouraged by these results, as it would seem to indicate that the targeted education, awareness, resources, interventions, coaching, and technical assistance around improving social-emotional outcomes is being reflected in the data. The MITP will perform this same analysis in 2020 to determine if improvements continue to be made in including SE outcomes in IFSPs for children who are not demonstrating any age-expected skills and behaviors in social emotional development and relationships (Outcome 1).





O12. To what degree are families engaged in the IFSP process evidenced by functional, routines-based IFSP outcomes?

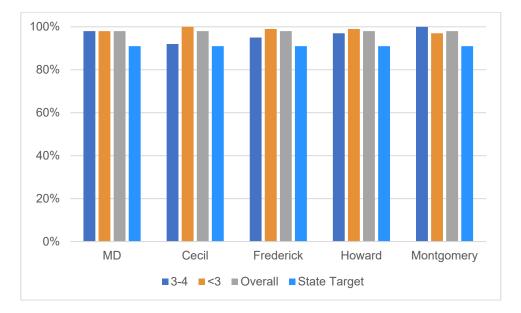
RBI

In order to determine if the RBI evidence-based assessment tool was more likely to be used in the SSIP counties vs. the rest of the State, MITP conducted an analysis of initial IFSP data from the State comprehensive data system. Data from a total of 12,869 initial IFSPs conducted from October 2018 through December 2019 were reviewed to determine if an RBI was used in the assessment process. Overall, 23% of initial IFSPs used RBI as the evidence-based child and family assessment, and 77% of all RBIs completed in the State were in the four SSIP counties (90% in Cecil, 91% in Howard, 59% in Frederick, and 37% in Montgomery). The State also found that 51% of IFSPs in the four SSIP counties had included an RBI vs. 8% of IFSPs in the non-SSIP counties. MITP found these results very encouraging. It appears the SSIP focus on routines-based evidence-based assessment practices in the four counties is reflected in the data where two out of every four children are assessed using the RBI. It also appears the recent focus of the SIT to begin expanding routines-based assessments beyond the SSIP sites is being reflected in the data, indicating that this practice is being adopted statewide. These data also speak to the level of family engagement in the IFSP process, as an increase in the use of RBI signals that parents are being included in the process at an early stage and are engaged in their child's outcomes. Increased use of the RBI and engagement of families is therefore leading to an increase in functional, routines-based IFSP outcomes.

Family Survey

As the SSIP sites continue to scale-up their use of evidence-based practices with fidelity, the impact of increased knowledge, skills, and resources should be demonstrated through increased participation and engagement of families in the Early Intervention process. MITP each year is monitoring the Early Intervention Services Family Survey of the Maryland Infants and Toddlers Program in the targeted sites as well as throughout the state. The figure below shows that the percentage of families who have

children under age 3 or children 3-4 years old on extended IFSPs reporting they help their child develop and learn in 2019. The data are consistently high for the State and each of the four counties (97% or greater). As MD moves forward to measure the impact of the SSIP on families, it may be necessary to look at additional ways of gaining feedback due to the extremely high ratings families give to the program. The State began in the previous year to work with the evaluators to determine if additional data collection measures can be instituted with families to determine if the SSIP is having the intended impact in family engagement in the IFSP process, including potentially interviews and focus groups. This will continue to be explore in 2020 as the State looks to expand the SSIP work.





Challenges Implementing EBPs to Fidelity

The biggest challenge with implementing EBPs to fidelity is specific to the SEFEL/Pyramid Model, which was the State and Local Implementation Teams' primary focus in 2019. Specifically, a new Part C Benchmarks of Quality (BoQ) was disseminated by the NCPMI just after the SIT and LITs completed an initial rating of the previous version of the Benchmarks of Quality. Although the discussions that took place to complete the original BoQ were invaluable to the global understanding of the SEFEL/PM as a framework and contributed to some major infrastructure components added at the State and local levels in a relatively short time, such as universal SE screening in 3 of the 4 counties, the original baseline data was not easily applied to the new BoQ to track progress due to a reorganization and addition of programmatic indicators. It takes a great deal of time for local implementation teams to go through the BoQ, understand the intent of the indicators, and develop the local policies and procedures to effectively build their infrastructure to support full implementation with fidelity. For example, although 3 of the 4 counties began using SE screeners with all children and families, the full infrastructure pieces to support that practice are still being developed. This includes ensuring there are known processes and procedures for providers to know what to do if a screener indicates a need for further assessment or a higher level of intervention. Without the assurances of knowing that no matter what the screening results are, there is a process and personnel in place to support the team, including the child and family, in appropriate ways at all levels, providers are less likely to conduct screenings out of fear of not knowing what to do with the results. Building the necessary supports at every level of the

pyramid is long, system-changing work that will remain a priority for the SIT and LITs.

An example of one piece of the infrastructure necessary to implement universal screening is the need for all program providers to be knowledgeable about their local early childhood mental health services and to know when and how to help families access appropriate services.

Early Childhood Mental Health (ECMH) Services Survey

An early childhood mental health services survey is sent to all SSIP early intervention providers once a year to determine their knowledge and referral to ECMH services for the families and children they serve. A total of 163 providers completed the survey in 2019. The 2019 response rate is a decrease from 2017 and 2018 which included 200 responses.

- Figure 14 below shows that in 2017, 18.1% of providers surveyed reported that they helped families access ECMH services frequently or very often. In 2018, 20.1% of providers indicated they helped families frequently or very often, which was equivalent to a 2.0% increase. In 2019, 16% of providers surveyed reported helping families access ECMH service, which reflected a 4.0% decrease..
- In 2017 52.1% of providers indicated they knew a moderate or a lot about ECMH services. In 2018, 57.3% said they knew a moderate or a lot, which was equivalent to a 5.2% increase. In 2019, 53.4% of providers indicated they knew a moderate amount or a lot about ECMH, which reflected a 3.9% decrease.

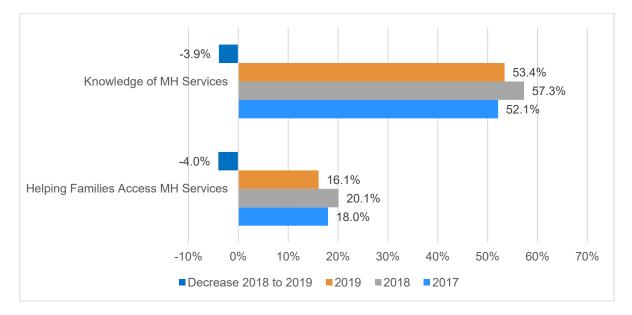


Figure 14: Provider Early Childhood Mental Health Knowledge 2017 & 2018 (n = 200) and 2019 (n = 163)

The recent year's results reflected a drop in the percentage of respondents and a decrease in knowledge of MH services and helping families access MH services, at about 4% decrease for each. One possible explanation for the decrease could be a change in the wording of the question in 2019 to include the definition of MH services. It is possible that the narrowing of the definition led to more accurate responses from the respondents as the types of MH services were more limited. The MITP

also recognizes that as LITs continue to work through the BoQ they will develop these necessary infrastructure pieces to support implementation.

As the State continues to roll-out resources and tools to providers around accessing early childhood mental health services, the State is also planning a deeper dive into this data. The SIT and LITs will try to identify specific mental health resources at each of the three PM tiers and work to develop additional partnerships to access more mental health resources. For example, as the Cecil County LIT established a process for implementing universal social emotional and environmental screenings (both are part of Pyramid Model practices), it became evident that providers were uncomfortable completing the screenings because they feared they would not have answers or next steps to offer families. Therefore, they developed a book of local resources for providers to offer to families in the event there were issues identified through the screening questionnaires.

Evaluation Question	Measure of Success	Data Sources	Data Collection Timeline	2017 Data	2018 Data	2019 Data	Notes/ Comparison
O13. What was the change over time for infants, toddlers, and preschool aged children, meeting positive social- emotional skill standards?	% infants, toddlers, and preschool aged children substantially make progress in social- emotional development	Child Outcomes Summary	Annually	2015/2016 Baseline: 47.23%	2016/2017 Actual: 50.84% 2017/2018 Actual: 50.59%	2017/201 8 Actual: 50.59% 2018/2019 Actual: 49.66%	Data have remained steady from 2016/2017 to 2018/2019.

Progress Toward Achievement of SIMR

Key Successes in Progress Toward Achieving the SiMR

O13. [SiMR] What was the change over time for infants, toddlers, and preschool aged children, meeting positive social-emotional skill standards?

Maryland has chosen as its SiMR the Part C Indicator 3A, Summary Statement #1, the percentage of infants, toddlers, and preschool-aged children who substantially make progress in social-emotional development. Data are monitored throughout the year with an aggregate report prepared in January which summarizes both the state results and the results for the four SSIP sites. The chart below shows the change in 3A, Summary Statement #1 from baseline (2015/2016) to current (2018/2019). Please note that the baseline was re-adjusted in the Phase III, Year 1 report to account for new changes in methodology in data collection of child outcomes. The data below show that after an initial increase in 2016/2017, the indicator results have remained steady for two years (between 49.7% and 50.8%). MITP had initially hoped to see a gradual increase in 3A SS1 by this point for the SSIP counties, however these data are not disappointing in light of the numerous gains made in the short and medium-term outcomes demonstrated above. Considering the length of time new interventions require to be adopted and implemented with fidelity, and for those interventions to then have the time to begin to make an impact on

children and families, the changes in the SiMIR may take several more years. For 2019, the four SSIP counties nearly met the 18-19 State target which had been previously set in 2016 (Actual: 49.66% vs. Target: 50.23%, Difference: 0.57%).

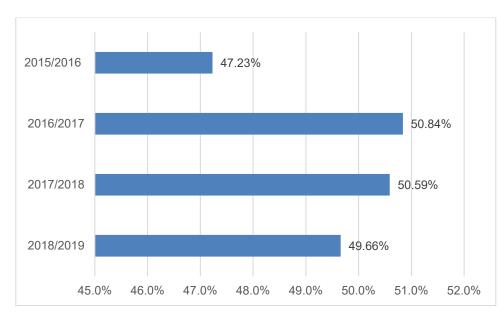


Figure 15: Change in 3A, Summary Statement #1 from 2015/2016 to 2018/2019 for the Four Targeted SSIP Sites

Challenges to Achieving the SiMR

The State feels confident with the implementation progress observed to date that the four LITPs demonstrate results that are at or on track to meeting the SiMR.

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

In general, MITP has not made any significant changes to the implementation and improvement strategies identified in previous years' reports. However, LITs are using data to help refine processes for the unique needs of each site. For example:

- The LITs have begun to form teams in each county specifically around implementing the SEFEL/Pyramid Model, with one of the counties forming a team for one region at a time. These smaller implementation teams will help with developing and expanding coaching plans for practitioners and specific ways to incorporate the EIPPFI into the work.
- The SSIP counties are working with preschool and kindergarten staff to help with expanding RBI and SEFEL/Pyramid practices to children ages 3 and older. This collaboration at the local level helps to increase communication during transitions and ensure that practices being used at the local level are consistent and aligned.

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

The SIT uses TAP-IT, an iterative data-informed decision-making process, to intentionally inform next steps in the SSIP implementation. Next steps for implementation based on data include:

• Continued implementation of EIPPFI and coaching in Pyramid Model practices;

- Continued use of the revised BoQ by Pyramid Model LITs to guide implementation;
- Exploration of additional evidence-based practices specific to social-emotional development;
- Continued statewide RBI scale-up;
- Continuation of Master Coach training by local programs and the State;
- Exploration of evaluation measures for the parent leadership program BabyLeaders; and
- Creation of IFSP reports around authentic child and family assessment for access by all LITPs.

The SIT will continue to work with the LITs in the upcoming year to refine their implementation strategies based on the data in this report and the data that are collected and shared throughout the year.

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

Implementation data suggest the SSIP is on the right path, therefore, there are no suggested changes to evaluation outcomes or the SiMR at this time.

3. Stakeholder Involvement in the SSIP evaluation

a. How stakeholders have been informed of the 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, including local program staff, state agency staff, family representatives, institutes of higher education, parent support agencies, and EBP experts, continue to be involved in every aspect of SSIP implementation and evaluation with short, medium- and long-term outcomes, measures of success, data sources, timelines, and data collection procedures. In previous years the MITP worked in collaboration with external evaluators and intra- and interagency stakeholders to continue aligning the evaluation plan with the logic model. The key external stakeholders, Maryland's State Interagency Coordinating Council (SICC), continued to be informed and involved in the ongoing evaluation and had a voice in decisionmaking regarding the ongoing evaluation of the SSIP in several ways. In May 2019 the MITP leadership team presented to the joint SICC/LICC on the SSIP overall, as well as progress in implementation and evaluation to date. The Council was given an opportunity to ask questions and to review the most recent report submitted to OSEP. The four SSIP jurisdictions were also invited to present in November 2019 at the MSDE Professional Learning Institute. Representatives from the LITs from each of the counties presented on incorporating the Pyramid Model into Early Intervention Services. They discussed the use of data-informed decision-making using TAP-IT, as well as how fidelity is measured with the BoQ. The intent of the session was to educate and involve additional stakeholders in the outcomes of the SSIP as it continues to expand and roll-out statewide in the coming year.

The evaluation of the SSIP is guided by the SIT/LIT teams, the EBP Expert Teams, and several DEI/SES teams. The most salient feedback around specific evaluation measures of success, data sources, and timelines has come from creating communication protocols to support policy-practice feedback loops within the SIT and the LITs. Concentrated work to create high-performing teams has allowed regular, honest, transparent discussions around implementation and child-level outcomes. The TAP-IT Digital Portfolio has structured the work of the SIT/LITs by enhancing data-informed decision-making cycles to

meet action steps and implementation goals. Improvement cycles based on review and analysis of data is now built into the process and will continue to support the stakeholder voice and involvement in decision-making around the ongoing evaluation of the SSIP.

Both SICC members and the SSIP SIT members provided stakeholder feedback on the new proposed target for FFY 2019. Stakeholder responses indicated agreement with a slight increase in the Part C SSIP target for FFY 2019. During the upcoming year, external and internal stakeholders will continue to be informed about and have a voice in the ongoing evaluation of the SSIP. Additional collaborative work with all partners and stakeholders around what full implementation and true integration of reflective coaching, RBI, and SEFEL/PM really looks like in a comprehensive B-K service delivery model will have a direct impact on evaluation efforts and future decision-making.

D. Data Quality Issues

1. Data Limitations Affecting Progress in Implementing the SSIP and Achieving the SiMR

The MITP worked with the external evaluators at AnLar to review the evaluation questions, data collection tools, data collection and analysis plans, and continuous quality assurance mechanisms used by the SIT, LITPs, and State leadership teams. The goal of the review was to recognize areas of data quality concerns, and how they were being addressed through the multiple feedback loops built into the TAP-IT cycles and SSIP implementation plans. The review demonstrated that the State has been very successful at utilizing and incorporating feedback from the SIT and LITs, and data quality limitations that were discovered are being addressed as outlined below.

- a. Concern/Limitations About Quality or Quantity of Data
- b. Implications for Assessing Progress or Results
- c. Plans for Improving Data Quality

In previous year reports there were data quality concerns around the procedures for administering the various surveys, fidelity tools and checklists. In response to these concerns, the MITP continued to develop several companion guidance documents during the year (including for IFSPs, SEFEL and RBI) as well as implementing coaching and training with internal and external coaches in the four SSIP counties and throughout the State to make sure there is greater consistency with administration and data collection. There are several more resources in process, many of which are being led or co-developed by the local sites in order to make them adaptable to their unique staffing and population needs.

The State continued to address the need for a greater understanding of reflective coaching across all evidence-based practices and implemented Master Coach training to help with consistent delivery of practices. A revised fidelity tool *Pyramid Model Early Intervention Part C BoQ* was introduced this year and drove the SIT collective decision to create Pyramid Model LITs to help standardize the way the practice is disseminated and how provider level fidelity data are collected in future years.

In previous years the MITP used a paper review tool to look at IFSP social-emotional outcomes and linkages, which was found to have inconsistent data collection and the results were often hard to interpret. This year for the first time, the State was able to use data from the IFSP data system to look at children with delayed social emotional development (based on COS ratings) and whether there were outcomes in the IFSP related to social emotional development. Looking at data for the entire State, rather than a small sample in years past, showed that nearly 89% of IFSPs addressed SE outcomes when the child was identified as having a SE delay. This new data from a reliable data source helps to demonstrate that the work conducted in the local programs is having an impact on children and families.

Another area used by MITP to address data quality is the collaborative work of the evaluation teams and the SIT. This past year the external evaluators began meeting regularly with the SIT and the local evaluators to discuss how data are being used for process improvement. The plan is to continue to monitor the SSIP data at regular intervals during the SIT meetings, with discussion of what the data mean and how challenges can be addressed. The external evaluators are also working with the SIT and B-21 Core Planning Team to identify areas of new data collection to help with gaps in current data collection. Two areas of focus in the upcoming year will be to examine ways to engage families in the measurement process beyond the yearly family survey and the collection of data on mental health linkages and supports. As the evidence-based practices are implemented and rolled-out in the State, it is clear that family engagement has increased, however that data are not readily available to support what is being observed on the ground. The State will work with the evaluators to determine how parent and family satisfaction and engagement can better be measured and reported in future reports. The MITP will also work to develop a more detailed survey to collect information from providers about the mental health supports and resources that would benefit them most.

E. Progress Toward Achieving Intended Improvements

1. Assessment of Progress Toward Achieving Intended Improvements

The MSDE DEI/SES is clearly able to assess progress toward achieving intended improvements through infrastructure development and change, evidence-based practices implemented with fidelity, and progress of key measures/evaluation questions.

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

The DEI/SES B-K Liaisons continue to employ a Systems Coaching approach as the primary mechanism for providing support to the local level. Relationships across and between all levels of the SSIP teaming structures have continued to grow stronger through regular meetings and communication, joint training, and continuous formative assessment and adjustments of plans and practices. These relationships provide the foundation to engage in difficult conversations with a shared problem-solving lens that works towards moving closer to the common goal. The SIT continues to become more confident and competent in the TAP-IT process, including utilization of the Digital Portfolio to inform decisions about goals and action steps. The MSDE is convinced that these teaming structures and practices, combined with Systems Coaching, has been instrumental in making progress towards the SSIP-related evidence-based practices and will continue to build skills and capacity in these areas at the State and local level to support current implementation and sustainability as well as future statewide scale-up. Lessons learned regarding the SSIP teaming infrastructure, stage-based implementation, and data-informed decision-making have influenced how the MSDE early childhood work moves forward and will be applied to other priority focus areas. For example, the MSDE has identified improving and increasing high quality inclusive opportunities for young children as a major focus. A State and Local Leadership Teams will be identified and use the three sets of Indicators of High Quality Inclusion as the basis for data-informed decision-making, much the same way the SIT and LITs operate and utilize the Pyramid Model Benchmarks of Quality.

The primary focus of the SIT TAP-IT cycles in Year 4 was on implementation of the Pyramid Model. As discussed in previous reports, there are many people across various early childhood programs and sectors that have been trained or providing training on SEFEL in Maryland for many years. As the SIT has become more knowledgeable in the Pyramid Model, it has become increasingly clearer that training and implementation across the State has historically been limited to training classroom teachers, and never addressed the *Benchmarks of Quality* or the system components that truly make up the Pyramid Model in its entirety. The MSDE began messaging the importance of programs completing the BoQ at the beginning of their exploration and planning for implementation, in Year 3. In Year 4, the MSDE created the *Guide to Pyramid Model Training and Coaching* and shared it with the SIT prior to statewide distribution. The Guide is a companion document to the *Guide to RBI Training and Coaching* that outlines the State's expectations and minimum recommendations for training and supporting personnel in Pyramid Model practices. The document clearly delineates completion of the BoQ by local leadership teams prior to any staff training being planned or scheduled. This is expected to raise awareness of the significance of the infrastructure components of the Pyramid Model to support successful provider practices.

As reported in Year 3, the roll-out of the revised MD IFSP process, document, and online tool on October 1, 2018, was a major infrastructure shift at the State and local levels. The revised IFSP requires an increased emphasis on authentic assessment, as opposed to evaluation for eligibility. Although response to the process and document changes continue to be positive and programs and providers generally understand the rationale and best practice, the reality of needing to shift personnel and infrastructure resources remains challenging. Updated reporting capabilities of the online IFSP tool allows the State to compare the type of authentic assessment used to develop initial IFSPs by county. Across the State in 2019, of the 12,869 initial IFSPs, 23% were developed with an RBI, 26% utilized the SAFER, and the remaining 51% completed the Natural Routines and Activities section of the IFSP. Conversely, in the four SSIP counties, 51% of the initial IFSPs were developed through the RBI process, 23% used the SAFER, and 24% completed the Natural Routines and Activities section of the IFSP. This data illustrates the focused efforts in the SSIP counties to build capacity in both personnel and infrastructure components to implement the RBI with fidelity. The MSDE will share these new data and reporting capabilities with local jurisdictions in 2020 to inform considerations for scale up of authentic assessment practices with fidelity.

The DEI/SES B-K Liaisons continue to support local leaders in thinking about and planning for incremental shifts in infrastructure. The MITP remains convinced that this change in the development, implementation, and evaluation of the IFSP process will result in more robust authentic assessment activities, leading to increases in participation-based intervention and ultimately, improved child outcomes. The meaningful integration of the COS process, to include the required use of the Decision Tree within the online IFSP, is also expected to increase fidelity across providers and programs and yield more accurate COS data, although these results may not begin to be measured until the children entering the MITP with new IFSPs after October 1, 2018, have exited the program. In the meantime, the SIT and LITs began looking at entry level COS ratings in 2019 to see if that data might indicate evidence of practice shifts. In general, entry ratings were lower than in previous years, which is consistent with increased fidelity to the process and more accurate ratings.

The MSDE has continued building Birth to Kindergarten infrastructure around authentic assessment in Year 4, through the plans to revise the preschool component of the IEP. An IEP workgroup was convened with representation from 11 counties with the charge to align the preschool IEP to the revised IFSP and bridge the two processes and documents. Due to constraints of the online IEP data system, revision recommendations were limited to the preschool Present Levels of Academic and Functional Performance. Similar to the IFSP, increased emphasis is being placed on authentic assessment, summarizing assessment information organized by the three early childhood outcome areas, and integrating the Decision Tree into the online tool to support fidelity of the COS process. These revisions to the preschool IEP are in development and will be implemented effective July 1, 2020.

Another significant shift in infrastructure that began in Year 3 was the change to Maryland's Comprehensive System of Personnel Development. The revised *Maryland Early Childhood Intervention and Education Personnel Standards* was rolled-out on July 1, 2019. The *Maryland Early Childhood Intervention and Education Personnel Standards Guide* outlines the legal requirements, grounds the revised standards in early childhood recommended practices, and identifies the requirements for completing the learning activities for all early intervention providers as well recommendations for the preschool special education workforce. The new requirements are categorized as: Foundations of Early

Intervention; IFSP Development, Implementation, Evaluation; Teaming and Coaching Practices; and Service Coordination. The activities within each category include a variety of online modules, webinars, articles, self-reflection, and in-person training. A database has been developed that allows local programs to enter, track, and maintain the status of providers meeting Personnel Standards. Again, the intent is that the early childhood workforce across Maryland will be more consistently trained and firmly grounded in the foundational principles and practices of early intervention. Local programs will be required to use data from the database to report on the status of the percentage of staff completing Personnel Standards in the application for funds and to plan their local personnel development activities and strategies.

Also in the Year 3 report, the MSDE outlined the plan to train and support the initial cohort of Master Coaches in an effort to continue building the capacity and infrastructure around reflective coaching. Nineteen local providers were identified to participate in the first year of Master Coach training and support, that began with a 2-day in-person training with Dr. Dathan Rush, in February 2019. Smaller subgroups of six each then continued with monthly coaching webinar meetings facilitated by Dr. Rush and Dr. Shelden to support building coaching capacity and reaching fidelity as measured through coaching logs. Although the MSDE planned to offer Master Coach training and follow-up coaching again in 2020, the plan has been modified to give local jurisdictions another year to complete county-level training to establish the foundation of practices and expectations that a Master Coach can then build on and support. Therefore, another cadre of Master Coaches will be identified in 2021. The MSDE team will bring Master Coaches from across the State at least annually and will continue to plan with Shelden and Rush for how to provide meaningful ongoing support. Continuing to offer this level of training and support is expected to strengthen and further sustain the statewide coaching infrastructure at all levels.

The MITP has continued in Year 4, to further reinforce the message of the importance of addressing leadership and organization (infrastructure) components for successful implementation of evidencebased practices and not focusing solely on staff competency. This remains a key theme in all discussions, professional learning opportunities, and grant activities. The infrastructure components on the fidelity tools specific to the EBPs are continually referenced during all stages of implementation. All passthrough and discretionary grants from the MSDE DEI/SES include the requirement to address both infrastructure and personnel development components throughout the development, implementation, and evaluation of grant activities.

Finally, the MSDE continues to build intra- and inter-agency collaboration. In 2019, the MITP joined statewide efforts to establish, enhance and expand high-quality programs and services for all expectant families and those with young children across Maryland through the Pritzker Children's Initiative Prenatal to Age Three State Grant. MSDE staff participated in the Program/Services Work Group and is included on the roster of key leaders throughout the state to develop the grant proposal. In early 2020, Maryland was awarded the grant to focus on systems and infrastructure development to ensure a sustainable prenatal-to-age-three (PN-3) continuum of care and support the programmatic and service goals. The MITP will remain an active partner in these efforts throughout the course of the grant period (3-5 years) and beyond.

Previous examples of interactions with intra- and inter-agency partners working in true collaboration around workforce and infrastructure development have continued in Year 4. This includes the regionalized Substance Exposed Newborn (SEN) trainings coordinated through the University of Maryland, which trains local staff from the Infants and Toddlers Program, Maternal, Infant, and Early Child Home Visiting (MIECHV) programs, and Department of Social Services (DSS) to collaboratively support families dealing with substance issues.

The State SEFEL/PM Leadership Team, comprised of participants and representation from many sectors and programs across the state, has used the Pyramid Model *State Benchmarks of Quality* to identify goals and action steps to guide the direction of the team throughout 2019. This has allowed and will continue to promote statewide infrastructure to be developed more systematically and intentionally, resulting in the model being implemented with higher fidelity and not focusing exclusively on staff training. DEI/SES staff continue to be members of both the SIT and State SEFEL/PM Leadership Team and will continue to share lessons learned across both teams and merge efforts.

The collaboration with the MSDE Division of Early Childhood and partners through the Preschool Development Grant Birth Through Five (PDG-B-5) also continues. As described in the Year 3 report, the DEI/SES is partnering with the University of Maryland School of Social Work to continue building on the Part C SSIP work by scaling up the Pyramid Model into the preschool special education programs in the four SSIP counties. The four local Preschool Special Education Coordinators were invited to a SIT meeting in early 2019 for local SSIP ITP directors, UM-SSW staff, and MSDE to share lessons learned about PM implementation in the early intervention programs to inform planning and implementation in preschool. Grant funding allowed the UM-SSW to provide support to the local preschool implementation teams to complete the Program-Wide Benchmarks of Quality and begin planning for implementation, including staff development. The four local programs also received a small amount of grant funding to support their efforts and was used primarily to purchase social emotional screening tools and to pay for training to use the tools. This work will continue over the next three years and is expected to contribute to a comprehensive B-K system that supports smooth transitions from Part C to Part B services and supports the social emotional development and meaningful participation for all children in natural and inclusive learning environments. It reflects true collaboration on multiple levels and across systems and funding sources in accordance with the intent of the grant award. The DEI/SES will continue to participate and engage with other PDG B-5 partners to align all grant efforts.

b. Evidence that SSIP's evidence-based practices are being carried out with fidelity and having the desired effects

As described in the *SSIP Phase III, Year 3 Report,* the State and local programs identified the need to first look at fidelity of systemic structures to support implementation of the EBPs before being able to address provider-level fidelity measures. During Year 3, the SIT and LITs completed the program-level *Benchmarks of Quality,* identified a goal to increase Tier 1 indicators, and made significant increases (250%) towards that goal. The primary indicator that was put into place in three of the four counties, was to implement universal social-emotional screening. Shortly after identifying the goal, the National Center for Pyramid Model Innovations (NCPMI) released the revised *Early Intervention Benchmarks of Quality.* The SIT and LITs reviewed and completed the new set of indicators, while simultaneously working towards the goals set with the previous BoQ. The SIT formally adopted and utilized the *Early Intervention Benchmarks of Quality* (BoQ) throughout Year 4 as the basis of the TAP-IT Cycle to continue the intentional focus on building the infrastructure of the Pyramid Model. The focus on the six leadership team critical elements resulted in each of the four LITPs creating a distinct Pyramid Model Leadership Team, in addition to or as a subgroup of their LIT. These teams continue to make progress

towards putting policies and procedures in place to support the implementation of universal social emotional screening.

Also during Year 4, the NCPMI shared the field test version of the *Early Interventionist Pyramid Practitioner Fidelity Instrument (EIPPFI)*. As participants in the national Part C technical assistance offered to State Part C programs, the MITP staff were able to offer feedback and seek clarification on the tool and share it with the SIT team. The tool is very comprehensive and at first glance can be overwhelming, therefore the initial action step identified by the SIT, at the October meeting, was for program directors to share it with their LITs and just allow everyone to become familiar with it. At the next SIT meeting, directors agreed to have some discussion with their LITs about initial thoughts of how to use the tool with providers. Everyone recognized the value of the tool supporting the implementation of the early intervention key principles and recommended practices. It is anticipated that the EIPPFI will likely be the focus of the next TAP-IT cycle in 2020 and the SIT will move towards being able to collect provider-level fidelity data. In the meantime, data showing increases in the number of IFSPs with social-emotional outcomes (89% of all IFSPs with COS entry ratings of three or less having SE outcomes) indicates increased staff competency in identifying related issues which could be linked to building competency in social emotional development, as well as the implementation of universal social emotional screening.

The MSDE also prioritized building coaching capacity and being able to measure that progress during Year 4, by contracting with Dr. Dathan Rush and Dr. M'Lisa Shelden to train and support the first State cohort of Master Coaches. Nineteen local providers completed the training and the six months of follow-up coaching. Fidelity was determined based on Rush and Shelden's criteria reviewing coaching logs. At the end of the six months, 15 had achieved fidelity, three more reached fidelity with an additional two to three months of support, and one coach is expected to reach fidelity early in 2020. These 19 Master Coaches are then supporting their colleagues through the use of coaching logs to also demonstrate fidelity in coaching families. The SIT will need to address how to collect data that reflect local provider-level coaching fidelity in Year 5.

Finally, local programs continued training and supporting staff to implement the Routines-Based Interview and the SIT continued to collect data relative to the number and percentage of staff trained to fidelity. As discussed in previous sections, the number of early intervention providers in the SSIP counties trained to fidelity in the RBI increased from 32.6% to 65.75% in Year 4. The outcomes of an RBI completed with fidelity include establishing positive family relationships, getting a rich description of child and family functioning, and identifying a list of family-identified, functional, participation-based child outcomes. The high percentage of families (98%) reporting they believe early intervention services helped them help their child to develop and learn could be attributable at least in part to a positive relationship with the early intervention providers as a result of completing the RBI. These data points, along with the high percentage of RBIs and SAFERs completed to develop initial IFSPs in the SSIP programs and the number of IFSPs with associate SE outcomes, indicates a correlation between more robust child and family assessment in first identifying the strengths and needs and then developing IFSP outcomes to address the family's priorities.

It should be noted that those programs more fully implementing RBI have already made infrastructure changes to allow teams time to complete the RBI following the evaluation for eligibility. Programs that have not fully implemented are continuing to make adjustments in their processes, understanding the

need to create additional time within the 45-day timeline, which may include increasing number of staff to do the work, in order for providers to complete the RBI with fidelity. The SIT continues to engage in conversations and problem-solving about staffing and time.

Regardless of the EBP, the MITP continues efforts to build understanding and capacity in using fidelity measures within reflective practices as a mechanism to coach, develop, and sustain providers and programs. Creating the time and space to truly reflect on process and procedures is challenging to implement even for those who embrace the concept. The State will continue to partner with local programs to identify and address the systemic issues that contradict reflective practices.

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

In Phase III Year 4, the MITP continued building on and strengthening the foundational objectives of participation and learning that began in Years 1, 2, and 3 including providing high quality professional learning opportunities and high-quality coaching and resources to support ongoing implementation.

Professional learning opportunities included regional statewide Implementation Lessons Learned sessions offering local early intervention and education leaders the forum to share successes and challenges in implementation efforts, as well as a variety of EBP-specific trainings outlined previously in this report. The DEI/SES also conducted the Statewide Professional Learning Institute in November 2019, which offered several early childhood learning sessions addressing implementation and scale-up of evidence-based practices. Data reflect participants' perceptions of high-quality professional development and increases in knowledge. The MITP rounded out the year's professional learning activities with a statewide webinar on Authentic Assessment (RBI) in the IFSP Process provided to all Family Support personnel.

The EBP State Content Expert Team continued efforts to strengthen understanding and implementation of reflective coaching as the adult interaction style to support local implementation of the RBI and SEFEL/Pyramid Model. Training and support from Rush and Shelden further strengthened the coaching capacity in the first cohort of Master Coaches. Again, data indicate that the quality of the majority of coaching opportunities at all levels was reported as "Very Good/Excellent" and 93% of Master Coaches rated their capacity had maximum improvement to coach colleagues.

Data clearly shows that resources created to support implementation of EBPs are widely accessed. This is evident in the number of times websites are visited, especially the COS pages of Maryland Learning Links and the Making Access Happen website, participants in both training and coaching opportunities at State and local levels, and respondents to surveys.

The medium-term outcomes related to implementation continued to build on previous activities and are discussed throughout this report. In general, infrastructure improvements were noted through stronger, higher performing teams both at the State and local levels, as is evident in the improved communication and collaboration within the TAP-IT process. The ongoing collaboration with intra- and inter-agency partners also continues to grow beyond sharing of information to conducting cross-sector professional development, such as the SEN training, and influencing infrastructure development, as in the Pritzker PN-3 Grant activities and the State SEFEL/PM Leadership Team's use of the *BoQ* to drive decision

making and action steps. The PDG B-5 grant also provides a clear mechanism and expectation to build a comprehensive, mixed delivery system of care and education for young children that the DEI/SES will continue to be a part of. It is expected that Year 5 and beyond will only continue to broaden these types of cross-system collaborations and build the effectiveness of all teams to bring the State closer to the desired long-term outcomes.

The four LITPs implementing the three identified EBPs continue to move through the stages of implementation at their individual rate for each practice. Three of the four LITPs are "planning for full implementation" of the RBI and one has reached "full implementation", with over 50% of staff trained to fidelity using the RBI Implementation Checklist. Likewise, three counties self-report as being in the "initial" stage of implementing the Pyramid Model, while one self-identifies "planning for full implementation". The identification of the stage of implementation for Reflective Coaching continues to show the greatest variances across the four counties. One county, the largest, reports being in the "installation" stage, one is in the "installation" stage, and two are "planning for full implementation. This illustrates programs making progress with implementation of all three EBPs, as all four reported movement from one stage to the next with one or more practices. It also illustrates deeper understanding of the models as some programs have adjusted the level of implementation based on practice and fidelity data.

As conversations around the use of fidelity tools to measure implementation at the provider and program level continue, so too, does the evolution of understanding the evidence-based practices models in their entirety. All three of the SSIP EBPs have fidelity tools created by the model developers. As discussed in previous years' reports, the RBI is believed to be a more concrete practice to define and measure and there is clear State guidance that outlines training and coaching requirements, including the use of the RBI Implementation Checklist. The Early Intervention and Program-Wide Benchmarks of Quality and the EIPPFI clearly outline the components and practices of the Pyramid Model, once the time is taken to fully understand the indicators. One of the SSIP counties has begun exploring the integration of the EIPPFI into their annual performance evaluation process to make the experience more meaningful and an opportunity for reflection and growth. The newly developed State guidance supporting building capacity in the Pyramid Model also outlines expected training and coaching requirements, including the use of these tools. As reported in Year 3, effectively measuring implementation of Reflective Coaching has been challenging at the State, local, and provider levels and thus the installation of Master Coaches in Maryland was an effort to bring clarity and fidelity to coaching practices as measured by the definition provided by Shelden and Rush through the use of coaching logs. The State will develop similar guidance to support building capacity in Reflective Coaching as with the RBI and Pyramid Model in 2020. The MITP continues to highlight the value of reflective practices and emphasizes the need for the State and local programs to address how the infrastructure impacts the true implementation of reflective coaching, including the identification of an evidence-based teaming model that utilizes Reflective Coaching as the mechanism to build team capacity.

Overall, the MITP continues to build on short-term outcomes and to make progress towards the medium-term outcomes. Moving forward continues to be an iterative, recursive process that requires teams at all levels to modify and adapt expectations and next steps to ensure outcomes are achieved. The MITP is confident that the EBPs and both the infrastructure and personnel development strategies identified will continue moving Maryland towards the long-term impact goal.

d. Measurable improvements in the SiMR in relation to targets

The MITP SiMR focuses on an increased rate of growth of positive social-emotional skills and relationships for infants, toddlers, and preschool age children with developmental delays/disabilities in four LITPs, as measured by Part C Indicator 3A, Summary Statement #1. As reported in the Phase III Year 1 report, baseline data and targets were adjusted for 2015/2016 due to a change in methodology in data collection of birth to kindergarten child outcomes. Targets for the four LITPs increase by one percentage point each year through FFY 2018. Table 10 below shows the baseline data (2015/16), target and actual data for 2016/17 (July 1, 2016-June 30, 2017), the target and actual data for 2017/18 (July 1, 2017 - June 30, 2018), and the target and actual data for 2018/19.

Table 10 Indicator 3A, Summary Statement #1 Baseline, Targets and Results for Infants, Toddlers, and Preschoolers Across the Four SSIP Jurisdictions

2015/2016	2016/2017	2016/2017	2017/2018	2017/2018	2018/2019	2018/2019	2019/2020
Baseline	Target	Actual	Target	Actual	Target	Actual	Target
47.23%	48.23%	50.84%	49.23%	50.59%	50.23%	49.66%	

The aggregate data across the four SSIP jurisdictions showed a slight decrease this year and the 2018-19 target was not met by .57 percentage points. The new target for 2019/2020, agreed upon by Maryland's stakeholders, is 50.73%.

F. Plans for Next Year

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

Reflecting on Year 4 implementation and outcomes data, the MITP will continue building on and strengthening current strategies and add a few additional improvement activities to be implemented in Year 5. These include:

- Continued planning for ongoing support to Master Coaches, including planning for the next cohort in 2021;
- A written protocol for Reflective Coaching training (ie. Guide to Building Capacity in Reflective Coaching);
- Continue linking SIT work with the MD State SEFEL/PM Leadership Team;
- Continue building cross-sector partnerships through Pritzker PN-3 grant activities;
- Rollout of the revised preschool component of the MD IEP to align to the 2018 IFSP, ensure implementation of EBPs, and smooth transitions from Part C services;
- Continued development of revised online IFSP and IEP reporting capabilities to support local and State decision-making and to make correlations to implementation of EBPs;
- Continued data sharing and exploration of the differences in IFSP outcomes based on the type of child and family assessment completed (RBI, SAFER, or Natural Routines and Environments section of the IFSP) through IFSP/IEP Data Landscapes and online IFSP reporting updates;
- Exploring options to offer additional professional learning opportunities to support capacitybuilding of social and emotional development, such as Facilitating Attuned iNteractions (FAN) to continue building on the three tiers of Pyramid practices;
- Exploring additional national TA opportunities to support Pyramid Model implementation and High Quality Inclusion;
- Continued discussions and collaboration around MA billing for early childhood special education EBPs between MSDE and Maryland Department of Health (MDH);
- SSIP evaluation plan components are an intentional part of quarterly EBP collaborative meetings and SIT meetings to ensure alignment of relevant data collection and planning activities; and
- Developing guidelines and resources in response to service provision to infants, toddlers, and preschoolers with disabilities and their families in the wake of the COVID-19 crisis.

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

The MITP continues to define and refine data collection measures and methods. The SIT and LITs are more deeply committed to the importance of program-level fidelity measures to ensure the infrastructure is in place to support implementation of EBPs to achieve intended results. This work will continue and provide the foundation for integrating provider-level fidelity measures that have long been a part of the evaluation plan but that have proved challenging to embed into program practices. The MITP recognizes the value in fidelity measures not only for evaluation of the SSIP work but to also support ongoing personnel and program development through a reflective and growth-based stance and to inform planning for scale-up.

Specifically, the SIT will continue using the Early Intervention (Part C) Program Benchmarks of Quality and the Early Interventionist Pyramid Practices Fidelity Instrument to guide the TAP-IT Cycle(s) in Year

5. As explained in previous sections, the team will need to review and discuss the document in order to reach consensus about the utility of it to measure fidelity of provider practices and to guide reflective coaching conversations. The MITP expects that the SIT and the LITs would use the provider-level fidelity tool to establish goals and action steps to measure progress towards implementation with fidelity.

The Coaching Feedback Questionnaire will continue to be used to self-assess coaches perceptions of capacity. Additionally, as more programs and providers are trained to use coaching logs as a measure of coaching fidelity, the MITP may include that data.

The MITP will continue to employ and update the online IFSP reports to more easily and accurately gather data on the number of IFSP with outcomes that are: functional and routines-based; aligned to the early childhood outcomes, especially outcome one; linked to social-emotional services as well as looking the quality of IFSP outcomes compared across the three child and family assessment options (RBI, SAFER, and the Natural Routines and Environments section of the IFSP).

Improvement in child outcomes data is the ultimate measure of SSIP progress. The MITP has engaged in multiple activities over the last three years to ensure accuracy of child outcomes data, including a heightened focus on authentic assessment, revised B-K COS Process training and competency checks, revision of the IFSP, and soon to be IEP, process and document to meaningfully integrate the COS process. The impact of those activities however, will not likely be realized in statewide data until all processes are consistently completed with fidelity. Then the data has to reflect families that enter and exit the program after October 1, 2018 (date of the revised IFSP roll out) and afer fidelity is well-established. Given that the SSIP programs are still at various stages of implementation and fidelity, the latter condition is not realistic at this point. The SIT will continue exploring other measures or methods that might indicate the change in practice that would be expected given the stage of implementation.

In general, the MITP, with input and guidance from the external evaluators (AnLar) and in collaboration with stakeholders, will continue to monitor evaluation activities and modify data collections, measures, and/or expected outcomes as appropriate.

3. Anticipated barriers and steps to address those barriers

Although anecdotal reports of more meaningful integration of the EBPs is occurring, the SIT continues careful and critical consideration of the ability of providers to truly internalize the evidence-based practices in a way that allows for full implementation within a service delivery model. The SIT meetings provide the time and space needed for continued open communication and ongoing reflection, sharing successes and challenges, and joint problem-solving. The MITP highlights the lessons learned in the SSIP counties at Statewide professional learning opportunities as a way to begin planning for scaled implementation in other counties as well.

Time continues to be the most significant barrier to implementation and evaluation of EBPs. It is important that expectations on all levels acknowledge the time that the change process necessitates to truly change behaviors and practices, fully implement models with fidelity, and result in improved outcomes for children and families. The MSDE continues to message this and share literature about the gap between research and practice in the early childhood special education field. Furthermore, through Systems Coaching, the MSDE B-K liaisons partner with local leaders to think about ways to innovatively use discretionary funding to "create more time" by shifting roles and responsibilities of existing staff and exploring the possibility of creating new positions to support staff.

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

The MITP continues to actively participate in a variety of national technical assistance activities, including the COS Learning Community (COS-LC), the IDEA Inclusion Community of Practice, and the NCPMI Targeted TA: Pyramid in the Part C SSIP group that has guided much of the SIT work with the Part C Program BoQ and the EIPPFI. Additionally, the MSDE has accessed TA from the National Early Childhood Inclusion Indicators Initiative in the form of consultation and presentations at the DEI/SES Statewide Professional Learning Institute. Participation in these groups and the associated technical and programmatic support continues to be beneficial in supporting systems change in Maryland. Although the formal NCPMI TA will conclude in early 2020, the MSDE will continue to keep abreast of new TA opportunities, such as the Pyramid Model Training of Trainers, and is confident that should any questions or need for assistance arise, the NCPMI staff is available. Similarly, although Maryland is not part of the formal TA through the National Early Childhood Inclusion Indicators Initiative, relationships and connections are in place that allow for the State to access their support as needed. These socialemotional specific TA forums, combined with regular support for Part C and Part B 619 from the Early Childhood Technical Assistance (ECTA) Center, provide Maryland with a strong network of TA providers and opportunities. The MITP does not have additional support needs at this time but feels strongly connected with the TA community if it should become necessary.

ATTACHMENT A: Evaluation Plan