

Vermont families are able to help their infants and toddlers develop and learn functional social and/or emotional skills, and infants and toddlers substantially improve their social and/or emotional functional development.

Introduction

Vermont's Part C Early Intervention services are known as Children's Integrated Services-Early Intervention (CIS-EI). Vermont CIS-EI supports families with young children who have developmental delays, or who are at risk of having developmental delays due to a medical condition. CIS-EI services are provided in accordance with Part C of the Individuals with Disabilities Education Act (IDEA) in collaboration with a variety of professional partners. Knowing parents are their children's first and most important teachers, CIS-EI partners with families in their homes and community settings to provide services to support children's development.

To enhance Vermont CIS-EI's work, the federal Office of Special Education Programs (OSEP) requires every state's Early Intervention program to develop a five-year plan. Known as the State Systemic Improvement Plan (SSIP), this plan identifies a State Identified Measurable Result (SiMR) that will improve outcomes and quality of life for infants and toddlers receiving CIS-EI services. Phase I of the plan examined data, identified the outcome(s) of focus, and the coherent improvement strategies that would be pursued by the CIS-EI program. Phase II of this plan describes the infrastructure improvements and supports needed for the State and regional CIS-EI programs to implement the planned strategies. Additionally, this phase of the plan describes how the State and regional CIS-EI programs will evaluate the strategies implemented, analyze their effectiveness and expand those that demonstrate they have a positive impact on achieving the State's desired result. Phase III of the plan will identify implementation and progress made as a result of evaluation data.

The Vermont CIS-EI State Identified Measurable Result (SiMR) of our SSIP Plan is: Vermont families are able to help their infants and toddlers develop and learn functional social and/or emotional skills, and infants and toddlers substantially improve their social and/or emotional functional development. To support achieving the SiMR, Vermont has identified four interconnected strategies:

1. Development of a Comprehensive System of Personnel Development (a framework to support the training and retention of highly qualified practitioners);
2. Fostering family connections to increase opportunities for families to interact with other families, and learn advocacy and leadership skills;
3. Three regions will implement supports targeted to significantly improve areas of the SiMR and collect data to determine if the supports had the intended results;
4. Alignment with other community and State partners on all improvement strategies to maximize resources and ensure consistent and uniform information.

In collaboration with families and other CIS and State and community partners, CIS-EI seeks to support families to help their children develop and improve their social and emotional skills. Research¹ shows that all learning happens in the context of relationships. Therefore, supporting social and emotional development fosters positive relationships for children within their families,

¹ Edelman, Larry (2004), *A Relationship-Based Approach to Early Intervention*, originally published in Resources and Connections, July-September, 2004, Volume 3, Number 2, also at: http://cacenter-ecmh.org/wp/wp-content/uploads/2012/03/relationship_based_approach.pdf

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school and broader community. Doing this will help children's overall development now and in the future.

Through the SSIP, CIS-EI will implement strategies that directly and positively impact families' ability to support their children's healthy social and emotional development. CIS-EI's goal is to increase infants' and toddlers' social and/or emotional functional skills, which will be demonstrated by increases in Vermont's performance on the following Federal IDEA Part C Indicators:

Child Outcome 3A summary statement 1: Increasing the percentage of infants and toddlers who show substantial growth in positive social-emotional skills.

Family Outcome 4C: CIS-EI has helped me to help my child develop and learn.

Update on Vermont's SSIP Coherent Improvement Strategies

To support the SiMR, Vermont chose four specific strategies:

1. develop and promulgate a Comprehensive System of Personnel Development (CSPD) to increase practitioner expertise and retention;
2. enhance and promote family access to adult mental health supports and participation in family-oriented community activities to improve social connections – this is amended to fostering family connections, which includes families participating in community-oriented activities and increasing opportunities for family engagement to develop advocacy and leadership skills;
3. provide targeted supports to three regions that were below target for Indicator 3A summary statement 1 in 2013, so the regions can identify, implement and evaluate specific strategies to improve outcomes associated with the SiMR in their region; and
4. align with other State initiatives to maximize resources and ensure consistent and uniform information is provided to families and communities;

Comprehensive System of Personnel Development (CSPD)

In January, 2016, the Vermont CIS-EI contracted with a Personnel Development Coordinator. It is the Personnel Development Coordinator's responsibility to develop and promulgate Vermont's Comprehensive System of Personnel Development (CSPD) framework. Vermont is receiving intensive technical assistance from the Early Childhood Personnel Center to develop our CSPD. It is anticipated that we will have a completed CSPD document by late summer of 2017. Once the CSPD is developed, the State is fully committed to implementing the framework to improve the expertise and retention of highly qualified CIS-EI staff.

The CSPD addresses issues identified during Phase I around high staff turnover through identifying and implementing recruitment and retention strategies, increasing practitioner's sense of competency through planned Individual Personal Development Plans (IPDP), and coordinating preservice and inservice personnel development to provide consistent and ongoing training to the field. With the long-term implementation of the CSPD, we expect to have all tools

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and processes in place, from funding and leadership to certification and training, in order to effectively increase the average years of experience for all Early Interventionists (EIs).

During Phase I, stakeholders identified that high staff turnover was a barrier to providing high-quality CIS-EI services (Vermont Phase I SSIP, page 18). By increasing the number of highly qualified personnel who implement best practices with families and children, Vermont believes families will be better able to help their children develop functional social and/or emotional outcomes, achieving the SiMR. The CSPD will incorporate a data and evaluation plan which will be used to continually improve our goals and outcomes along all measures.

In addition to hiring a Personnel Development Coordinator whose primary focus is on developing the CSPD, in January Vermont launched the initial phase of the CIS-EI Certification process. This phase is intended to support the current regional CIS-EI practitioners who are providing Developmental Education or Special Instruction to attain their CIS-EI Certification. As of the writing of this Phase II document, 57 out of 60 regional staff have submitted their preliminary documentation to attain their CIS-EI Certification. The initial phase of this certification process is intended to end on June 30, 2016. Sustainability of the CIS-EI Certification will be developed through and part of the CSPD.

On June 24-26, 2015, Vermont CIS-EI held two trainings for regional CIS-EI practitioners involved in the completion of Child Outcomes Summary rating forms (COSFs). Vermont's goal was to orient and train regional CIS-EI practitioners on the new Vermont COSF, which was amended to include a decision tree to increase statewide fidelity to the rating scale. Staff were also trained on how to use an age-anchoring tool to assist them with their rating. Of the 115 active CIS-EI practitioners, 76 completed the training. Since the training there has been some staff turnover in the field. Staff turnover data made the State mindful of the need to consider on-going COSF training as part of the CSPD implementation. In lieu of other State-developed formal training on the COSF, practitioners are being referred to:
http://ectacenter.org/eco/pages/training_resources.asp

In collaboration with our co-lead, the Vermont Agency of Education, and the Placement Stability Project (PSP, which focuses on screening for children in the foster care system), Vermont CIS-EI provided train-the-trainer training on the ASQ:SE-2 for staff from ten of the twelve CIS-EI regions. Each person trained is required to offer at least two trainings this year to regional staff to instruct them on administering the ASQ:SE-2. The identified groups required to be invited to receive training are: CIS-EI and other CIS practitioners, Family Services Division social workers (Vermont's child protection agency), school staff, and Head Start. The ASQ:SE-2 is intended to be an additional tool to help practitioners identify and developing goals (or making referrals for additional mental health supports if needed) to support children's develop functional social and/or emotional skills.

Fostering Family Connections

As Vermont began implementation of some of our strategies and development of our Phase II plan, we recognized the need to amend a few of our approaches. Specifically, we realized, as we reflected on our Phase I data and engaged other key stakeholders, that our root cause analysis did not provide sufficient information to support a strategy to "enhance and promote

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family access to adult mental health...” As page 9 of Vermont’s Phase I SSIP indicates, we recognize we need to engage more families throughout Phases II and III of the SSIP. Without comprehensive and credible input from families, we cannot truly identify the key barrier(s) to engaging families in helping their children develop and learn functional social and/or emotional skills. Therefore, Vermont’s strategy is amended to now focus on fostering family connections.

Fostering family connections means that Vermont will intentionally focus on identifying opportunities for families to connect within their communities, and to expand family leadership and advocacy skills at the provider, regional and statewide level. In this way Vermont will support families to connect with other families reducing their sense of isolation and improving their social connections as indicated on page 56 of Vermont’s Phase I SSIP:

“Social connections support children’s healthy development, reduce family isolation, and increase natural supports for families. Stakeholders identified that when families have healthy social connections, these connections contribute to improving social and emotional functional development of infants and toddlers.”

During Phase II, Vermont examined effective ways to “do more root cause analysis to help identify what strategy/strategies Vermont CIS-EI can engage in to impact family involvement in community activities” (Vermont Part C SSIP Phase I, page 57). In reflecting further on Vermont’s Early Childhood Action Plan, specifically result #2: “Families and communities play a leading role in children’s well-being” (Vermont Part C SSIP, page 39), The SSIP Team, with the Vermont Interagency Coordinating Council (VICC) and CIS-EI regions receiving Targeted Supports, determined that Vermont needed more effective ways to engage families to gather their input.

Currently, family input is gathered using the Family Survey. As indicated in Vermont’s Phase I SSIP (page 28-29) and the introduction to the FFY 2014 Annual Performance Report (APR), Vermont is implementing strategies to effectively increase family survey response rates. It is Vermont’s belief that increasing the numbers of responses will provide us with a more representative sample of Part C-served families. This larger data set will be a more credible indication what families truly feel are strengths or areas for improvement of the CIS-EI program.

However, we realize that even with a greater response rate, the questions on the family survey limit us to understanding only areas in need of improvement. The survey cannot inform the State about improvement strategies. To identify those effectively, we need broad direct input from families. Traditionally we have received this input from the Vermont Interagency Coordinating Council. Again, this does not provide a representative sample. Therefore, in January Vermont contracted with a Family Engagement Coordinator. The Family Engagement Coordinator is responsible for developing a statewide approach to engage families and expand family leadership and advocacy skills at the provider, regional and statewide level.

Families are children’s first and most important teachers, advocates and nurturers. As such, strong family engagement is central—not supplemental—to promoting children’s healthy development and wellness. Effective family engagement practices are a marker of quality early childhood programming. Many in our Vermont communities have been working diligently on improving family engagement for years by making concerted efforts to grow a culture of trust

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and partnership among families, community members, practitioners, and formal educators with the goal of growing successful and happy children. Because every community must define parent engagement locally, since no two communities are identical, Vermont's CIS-EI approach to family engagement will include a documented framework with goals and identified strategies, and a plan for increasing the level of accountability around family engagement efforts statewide.

By developing a framework, strategies, and accountability plan for CIS-EI to engage families and expand their skills in advocating for their and their child's needs, we will learn what families need to increase their ability to help their infants and toddlers develop and learn functional social and/or emotional skills. To develop this framework, Vermont CIS-EI will be collaborating with key stakeholders and partners such as: the Vermont Interagency Coordinating Council, Strengthening Families² regional projects (Project 4 of Vermont's Race to the Top Early Learning Challenge Grant (ELC)), Promise Communities (Project 24 of the ELC), regional parent child centers and CIS-funded agencies.

Worthington (2001)³ found that "it is becoming increasingly clear that family engagement is a key component not only of participation in care, but also in effective implementation of it" (p. 19). To engage in something means to be actively involved or committed; engagement refers to persuading or encouraging someone to participate or become committed. In a review of the literature around family and community engagement, it is suggested that both the direct relationship between parents and their provider and the parents' perception of their providers are important factors in effective service delivery (Worthington, 2001).

Infrastructure Alignment

Throughout our work on Phase I and Phase II of the SSIP, Vermont CIS-EI has engaged key partners in SSIP planning and activities. In addition to those collaborative activities identified under CSPD and Fostering Family Connections, Vermont CIS-EI participates regularly in shared conversations and planning around issues affecting the populations we serve. For example, the CIS-EI State staff participate in the Agency of Human Services Integrating Family Services (IFS)

² The Strengthening Families approach, a project of VT's Race to the Top Early Learning Challenge, is a comprehensive approach to engaging and working with families and allows each provider to apply the Protective Factors Framework within the context of their own work with children and families, such as services for children with special needs, domestic violence services, family child care or others. Based on the initial success of embedding this approach in center-based early learning and care programs, the VT Agency of Human Services is adopting the Strengthening Families framework across its programs and service systems. This approach does not require new funding and can be implemented through low-cost and no-cost innovations, therefore supporting agencies and other entities, such as non-profit organizations, to shape existing resources around common goals and ensure sustainability.

³ Worthington, J., Hernandez, M., Freidman, B., & Uzzell, D. (2001). Systems of care: Promising practices in children's mental health, 2001 series, volume II. Washington D.C.; Center for effective collaboration and practice, American institutes for research.

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workgroups around topics such as family engagement, data and evaluation, and autism supports.

As a result of parallel conversations related to the need for Vermont to have a shared tool for family risk/needs assessment, CIS-EI will participate in identifying a tool with the Home Visiting Alliance, IFS, Help Me Grow and regional stakeholders. The CIS-EI Program Coordinator participates in the Everything Matters for Babies conversations about how Vermont can better support universal screening. The selection of the ASQ screening tools used by CIS-EI was made collaboratively to align with their use by Agency of Education Part B 619 and Help Me Grow.

Vermont's I-Team (Interdisciplinary Team) Early Intervention (EI) Project (aka 'Baby I-Team'), a collaboration among the University of Vermont's Center on Disability and Community Inclusion, Children's Integrated Services-Early Intervention, and the Department of Health, was formally implemented in FFY 2014. The I-Team EI Project expands the Vermont I-Team's capacity to receive referrals for and support Vermont's infants and toddlers from birth to age three who have complex health and developmental needs in home, hospital, childcare, preschool and other community settings. The 'Baby I-Team' is composed of a team of consultants who provide interdisciplinary technical assistance, training, consultation and resources to families and other early intervention One Plan (IFSP) team members.

The CIS Director and Part C Coordinator are members of the Vermont I-Team Early Intervention Project Advisory Council and attend its regularly scheduled meetings to share input related to project strengths and to problem solve around any issues/concerns. Providing specialized supports for children with complex needs and supporting their families and other team members is essential in nurturing infants' and toddlers' social and emotional development and relationships with their families/caregivers, and in supporting them in learning to move their bodies, use language, and explore their world.

The Vermont Agency of Human Services Integrating Family Services (IFS) program is involved in community discussions around providing effective supports for those diagnosed with or suspected of having Autism. As of the writing of this document, the Part C Coordinator and key CIS-EI partners are participating in these community conversations. In addition, the Part C Coordinator, the Vermont Family Network (Vermont's Parent Training and Information Center), IFS, the Department of Health's Children with Special Health Needs Program Coordinator, and the Child Development Clinic, along with the newly hired Autism Coordinator for the Division of Vermont Health Access, are currently considering collaboratively applying for an Autism Grant recently offered by the federal Health Resources and Services Administration (<http://www.grants.gov/web/grants/view-opportunity.html?oppld=282073>).

Vermont's Building Bright Futures hosts the Vermont State Advisory Council for children from birth to age eight. The State Advisory Council works to establish key indicators of success in the lives of young children and their families, and a means for regularly collecting, analyzing, and reporting these data. From these data the Council members develop a strategic plan to address key needs and ongoing issues and improve outcomes. CIS-EI participates in the Council's Data and Evaluation Committee providing data and insight to the committee on the Early Intervention system and the CIS-EI data results. One output of the State Advisory Council is the legislative

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report “[How are Vermont’s Young Children and Families](#)” for the Legislature and the public, which places the CIS-EI data in the context of early childhood across the state. In addition, CIS-EI is engaging with the Building Bright Futures [Vermont Insights project](#), a data analysis and public reporting website, with the goal of sharing the Vermont Part C Annual Performance Report (APR) (including Indicator 11) and 618 data. This will encourage private sector agencies and the general public to engage with CIS-EI to focus on results.

By using every opportunity to align with other key partners and stakeholders as we pursue all strategies associated with the SSIP, to substantially improve children’s social and/or emotional development, Vermont CIS-EI seeks to maximize resources and ensure that families receive consistent and uniform information to assist them in helping their children develop and learn functional social and/or emotional skills.

Targeted Supports

It is important to note that this strategy was identified as the State CIS-EI team providing targeted supports to regions during Phase II of the SSIP. However, this focus changes as we begin Phase III – the implementation and evaluation phase. Through Phase II, the State, with technical assistance from the National Center for Systemic Improvement (NCSI) and IDEA Data Center (IDC), has provided targeted support through regular in-person meetings to three regions to help them conduct root cause analysis, identify one to three improvement strategies to implement with a targeted population, and develop an evaluation plan for measuring the efficacy of their selected strategy/strategies. As of the writing of this Phase II document, the three regions have identified their root cause(s) and at least one strategy they will pursue to address the root cause(s), and are in the process of completing their implementation and evaluation plans.

As we move to Phase III, and the three regions complete their planning and begin implementation (as of July 1, 2016), in fact “Targeted Supports” acquires new meaning. For Phase III, Vermont’s strategy of targeted supports refers to the supports these regions will be targeting to implement with identified cohorts of infants, toddlers and their families. Therefore, the measures reported in the evaluation plan reflect the measures of the targeted supports that will be implemented with infants and toddlers and their families within the three selected regions.

The targeted support strategies identified by the regions to use with defined cohorts of infants and toddlers and their families include:

- administration of the Ages and Stages Questionnaires: Social-Emotional, Second Edition (ASQ:SE-2: <http://agesandstages.com/products-services/asqse-2/>);
- administration of the Social, Emotional Assessment Measure (SEAM: <http://agesandstages.com/products-services/seam/>);
- identification of functional goals to promote social and/or emotional development where these skills are significantly below the expected range for the child’s chronological age; and
- use of a family risk/needs assessment tool to address family factors that may impact the parent/caregiver’s ability to effectively support their child’s social and/or emotional skill development.

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Stakeholder Involvement

As with Phase I, Vermont Part C CIS-EI has relied on stakeholders to examine our strategies more deeply, support infrastructure changes and approaches to supporting implementation of evidence-based practices, and develop evaluation criteria. Stakeholders involved in this Phase II of the SSIP include the:

- Vermont Interagency Coordinating Council
- Child Development Division Statewide Systems and Community Collaborations Unit
- Agency of Education Part B 619
- Early Learning Challenge Grant project coordinators
- All CIS-EI Host Agencies, especially the regions implementing Targeted Supports
- Agency of Human Services Integrating Family Services
- University of Vermont Early Childhood Special Education Program
- Placement Stability Project

Throughout Phase II the State SSIP Team met weekly to move the work of the SSIP coherent improvement strategies forward and develop the evaluation plan. This team consists of the Part C Coordinator, Part C Data Manager, CIS Evaluation and Quality Assurance Specialist, Part C Outreach Specialist, CIS Family Engagement Coordinator, CIS Personnel Development Coordinator, Part C Data Technicians, and CIS Communications Technician.

In addition, the Part C Coordinator met monthly with the Part B 619 Coordinator. The Education Assistance Division Director has also joined the meeting with the Part B 619 Coordinator as frequently as possible to determine intersections with the Part B SSIP. These meetings provided an opportunity to obtain the Part B coordinator's perspectives on the work of the Part C SSIP and to collaborate on areas of intersection between both SSIPs. These areas included data sharing challenges and the interest on the part of both Part B and Part C to find ways of generating longitudinal data, and personnel development, standards and certification, and screening tools.

The Part C Coordinator, and subsequently the CIS Personnel Development Coordinator, met multiple times with the University of Vermont (UVM) Early Childhood Special Education Degree Program Coordinator. Discussions included the personnel development standards and certification, UVM Special Education Program enrollment, data related to Part C staff retention challenges, and ways to increase and support Part C field placements for UVM students.

Vermont's Placement Stability Project, which focuses on screening for children in the foster care system, met bi-monthly with CIS State staff, including the Part C coordinator. This grant project is collaborating with CIS (including CIS-EI) to support screening using the ASQ and ASQ:SE-2 of all children who enter State custody due to child safety concerns. In partnership with this project and the Agency of Education, CIS-EI is supporting training on the ASQ:SE-2 to all early childhood practitioners throughout Phase III of the SSIP.

As discussed in the "[Phase II Supports for CIS-EI Programs](#)" section below, CIS-EI has been and will continue to actively collaborate and partner with various projects funded by Vermont's Race-to-the-Top Early Learning Challenge Grant (ELC) and the Agency of Human Services

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Integrating Family Services (IFS). These shared activities include personnel development standards and framework, data and evaluation, and family engagement activities. Representatives from the ELC and IFS projects are included in SSIP workgroup activities. Likewise, CIS-EI representatives actively participate in workgroup activities originating from the ELC and IFS projects.

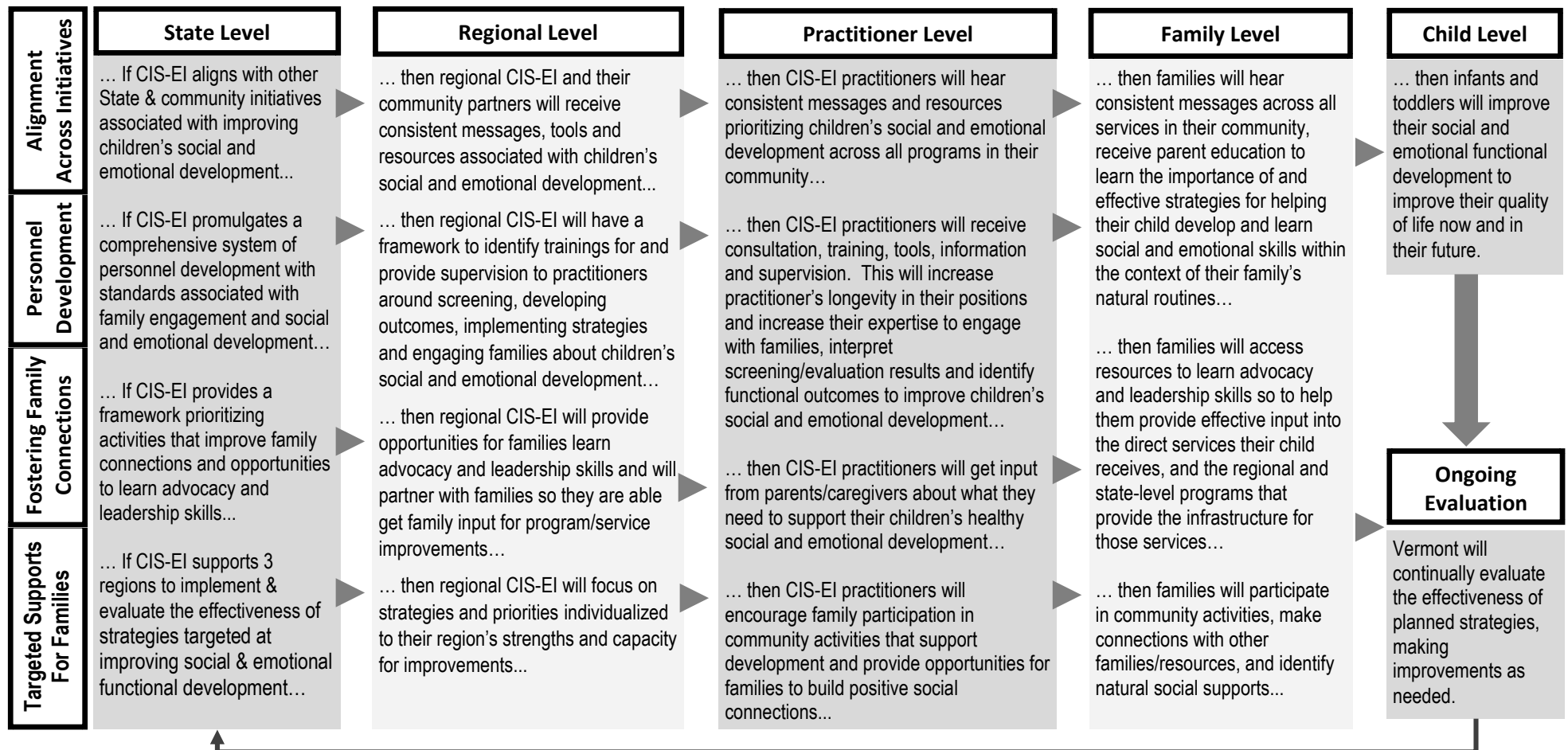
CIS-EI shares data with and seeks input from the Vermont Interagency Coordinating Council (VICC) on all aspects of the SSIP. During Phase II this input especially focused on the Family Survey, family engagement activities, and the State's Part C annual performance data. As we move into Phase III, the VICC will identify workgroups in May, 2016, to focus on areas of associated with the SSIP of specific interest to the VICC. Those workgroups will further advise on and assist with implementing SSIP strategies. It is expected that workgroups will include, at a minimum, data and evaluation, family engagement, and personnel development. CIS-EI will meet with the VICC at least quarterly through Phase III and share SSIP data and discuss areas of the SSIP the data indicate are effective or that need to be amended.

The CIS-EI SSIP State Team also meets monthly by phone with the twelve regional CIS-EI host agencies. These meetings are used to gather input into SSIP strategies, share progress, including data, and provide guidance. These meetings will continue through Phase III of the SSIP. In addition to these meetings, the State hosts a joint annual meeting with the VICC and the regional CIS-EI host agencies to share the state-level and regional APR data and to discuss SSIP activities and data. The meeting this year also was used to promote regions' understanding of and ability to make data-driven decisions based on the data used in making their regional determinations. The State CIS-EI program will continue to support the regions as they develop and implement improvement strategies to address indicators identified in their determinations as requiring improvement.

Vermont's strategies at the State, community and family level will improve the social and emotional functional development of infants and toddlers by: aligning with other State and community initiatives to maximize resources and unify messages; fostering family connections to increase social interactions and promote family advocacy and leadership skills; and increasing early intervention practitioners' expertise to support families to help their infants and toddlers develop and improve functional social and emotional skills.

SiMR: Families are able to help their infants and toddlers develop and learn functional social and/or emotional skills, and infants and toddlers substantially improve their social and/or emotional functional development.

Rationale: Supporting social and emotional development fosters positive relationships for children within their families, school and other community settings. Parents are their children's first and most important teachers. CIS-EI strategies will directly and positively impact families' ability to support their children's healthy social and emotional development. CIS-EI data show that 76% of families feel they have the skills to help their children develop and learn. CIS-EI data indicates only 67% of enrolled children are substantially improving their social and emotional skills. All learning happens in the context of relationships. Therefore, CIS-EI believes that, with direct help from their parents/caregivers, children's social and emotional development will improve which will enable them to form positive relationships with other adults and with their peers so they are able to maximize learning across all developmental domains.



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Phase II SSIP Supports for CIS-EI Programs

Infrastructure

Vermont CIS-EI has made several infrastructure improvements through this Phase of the SSIP. These improvements are directly linked to the identified coherent improvement strategies and will be discussed within those strategies below along with the support that has been provided to CIS-EI programs to date, and the support planned for Phase III of the SSIP. Additionally, as explained in the State Performance Plan, Vermont's CIS-EI program was part of a significant organizational change in 2006. During that time, Part C services, along with early childhood nursing (well-child home visits), family support social work (to address family risks and parent educational needs, and mental health services (for young children and their parents/caregivers) were integrated into the Children's Integrated Services unit. This re-organization led to significant infrastructure changes to support seamless, integrated service delivery to Vermont infants, toddlers, and preschool children and their families. Having CIS-EI a part of the CIS unit ensures the SSIP work benefits from the input and expertise of all of these early childhood services.

It is important to note that, given the above, the SSIP strategy of "Infrastructure Alignment" will not be discussed as an individual item. Vermont CIS-EI at the State and community level considers this strategy integral to all of the other strategies. Partnering with other State and community agencies and/or programs that seek to impact children's social and/or emotional development will help Vermont children and families by ensuring they receive consistent messages and maximizing resources from all programs they access. Therefore, infrastructure alignment is not discussed in this document as a discreet strategy with its own activities and evaluation measures. Alignment of the infrastructure, including collaborative planning, and developing shared understanding, language, tools and resources, is critical in achieving the SiMR.

Communication

All SSIP activities are communicated broadly to CIS-EI practitioners and key stakeholders. The State's CIS blog provides a mechanism for transmitting information and will be a place for engaging staff in dialogue about posted items to deepen their understanding and practice knowledge. The blog currently has over 300 subscribers. The blog contains professional development posts, and articles about current research and evidence-based practice.

The State issues SSIP Newsletters approximately every six weeks. These newsletters contain a high-level overview of the SSIP, SiMR, and the four key strategies. The newsletter is posted on the blog, and is emailed to all CIS-EI providers, key partners, stakeholders, State leadership, national technical assistance liaisons, and our Office of Special Education Program (OSEP) lead. The State contracted with a CIS Communications Technician whose primary role is to develop the newsletter and other CIS publications.

The State holds a state-wide call each month with all CIS-EI directors and supervisors. This call provides an opportunity to communicate program information, process changes, data and data improvement protocols. Throughout Phase I and Phase II the State has used this statewide call

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to communicate about the SSIP, SiMR and the four key strategies. This monthly call will continue to be used as a key communication tool.

Comprehensive System of Personnel Development (CSPD)

Infrastructure Development

The Vermont CIS-EI contracted with a Personnel Development Coordinator to fulfill the CSPD SSIP strategy. The Personnel Development Coordinator's responsibilities include leading the development of the CSPD. Having a staff person dedicated to lead this activity will enable Vermont to take full advantage of the intensive technical assistance grant we applied for and received from the Early Childhood Personnel Center (ECPC). The Personnel Development Coordinator has identified key stakeholders and partners who will assist the State in the development of the CSPD. These individuals include Vermont's Part B 619 Coordinator, representatives from the University of Vermont's Early Childhood Special Education program, staff from the Statewide Systems and Community Collaboration Unit of the Child Development Division who are responsible for Vermont's highly effective professional development system for licensed early childhood programs, CIS-EI practitioners, representatives from the Vermont Interagency Coordinating Council, those involved with Vermont's Building Bright Futures council, and, most importantly, parents who have or formerly had a child enrolled in Vermont's Part C program.

In addition to the Personnel Development Coordinator, the State has worked with a contractor to reconfigure the job responsibilities of another position: Community Outreach Professional. The Community Outreach Professional's primary responsibilities are to increase the State's capacity to monitor and provide technical assistance the field. This staff person will visit each regional CIS-EI host agency team to conduct file reviews and support professional development. The Community Outreach Professional will work collaboratively with the Personnel Development Coordinator. The Community Outreach Professional's interactions with the field will provide data and input to the Personnel Development Coordinator to support the work of the CSPD. The Personnel Development Coordinator, in turn, will provide information and support to the Community Outreach Professional around supporting practitioners to develop IPDPs and recommend trainings or technical assistance to support practice improvement.

With the leadership and facilitation of the Personnel Development Coordinator, workgroups will be formed involving members of the CIS SSIP State Team, including those named above, and other individuals identified as being key partners. These workgroups will be instrumental in developing each area of the CSPD framework. The CSPD framework will be developed by mid-summer, 2017. The CSPD will provide a framework documenting the following elements necessary for a highly functioning and effective personnel development system:

1. Leadership, coordination, and sustainability: a cross sector leadership team will be in place that can set priorities and make policy, governance, and financial decisions related to the personnel system.
2. State personnel standards: Vermont has cross-walked our identified CIS-EI certification standards with the Division for Early Childhood (DEC) personnel standards, National Association for the Education of Young Children (NAEYC) standards, and Council for

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- Exceptional Children (CEC) specialty sets. This cross-walk was provided to the ECPC for review to ensure Vermont's standards are aligned across disciplines and to national professional organization personnel standards.
3. Preservice personnel development: Vermont's only Institution of Higher Education (IHE), the University of Vermont (UVM), currently offering an Early Childhood Special Education degree program is nationally accredited, meaning UVM's program and curricula are aligned with national professional organization standards. Specifically, UVM's curricula align with the DEC personnel standards, as does Vermont's Early Childhood Special Education Endorsement offered through the Vermont Agency of Education.
 4. Inservice personnel development: Vermont offers many trainings annually for CIS-EI practitioners, both in-person and via web-based modules. However, the CSPD will provide a framework for ensuring professional development activities align with the personnel standards, and include a system of foundational trainings and orientation for new staff entering the field, as well as regular on-going advanced trainings for seasoned practitioners to support their continued professional growth. Additionally, the framework will identify a system for regular technical assistance to be provided to support personnel in the field.
 5. Recruitment and retention: comprehensive recruitment and retention strategies will be based on multiple data sources, including data on practitioner qualifications, Individualized Professional Development Plans (IPDPs) and surveys administered and analyzed at planned intervals. These strategies, informed by the data, will help Vermont recruit new practitioners to the field, as well as help the State identify ways to improve staff retention.
 6. Evaluation: the CSPD framework supported by the ECPC technical assistance grant includes an evaluation plan. The evaluation plan will outline the processes and mechanisms by which personnel data will be collected, stored and analyzed. Data analysis will help the State monitor the implementation of CSPD activities and make informed revisions as necessary.

The CSPD addresses many root causes and barriers associated to achieving the SiMR that have to do with practitioner quality. Data regarding high rates of staff turnover indicate the need for improved recruitment and retention strategies, increasing practitioner's feelings of competency through IPDPs and responsive inservice training opportunities, and coordinating preservice and inservice personnel development. With the long-term implementation of the CSPD, we expect to have all tools and processes in place, from funding and leadership to certification and training, to increase the number, retention and expertise of CIS-EI practitioners. This will increase the number of highly qualified personnel who will be implementing evidence-based practices with families and children. Thus families will increase their skills to help improve their children's social and/or emotional development, as well as their development across all other areas.

CSPD Activities to Support the CIS-EI Program

Development of the CSPD framework begins with an assessment of the existing personnel development system in Vermont across the early childhood fields. These fields were identified as early childhood education (ie. regulated child care and preschool, including public preschool),

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special education, Children's Integrated Services (including CIS-EI), and Vermont's only special education degree program offered through the University of Vermont. This assessment will inform the development of the CSPD and drive the priority areas of focus for the CSPD workgroups.

In addition to other partners and stakeholders, the State will involve practitioners and families in the development of and input into the CSPD. Involvement will take multiple forms, including in-person workgroup meetings, surveys, and family-engagement activities (see "[Fostering Family Connections](#)" below for more information). By ensuring the broadest possible input, and alignment with Part B, child care, and higher education, the State believes the CSPD will effectively meet the needs of practitioners and, in turn, improve outcomes for children and their families.

The State will offer at least two facilitated community of practice opportunities for CIS-EI practitioners. This is an activity practitioners have requested in order to share information and learn from one another. The State intends to provide opportunities at least two times per year, beginning this fall, for practitioners to have a shared learning experience. The State will use the 'community café' model. There will be guided questions informed by the practitioner survey. These questions will serve as a jumping off point for practitioners to talk together, network and develop a foundation of support and shared learning. The State supports this model as "accumulating evidence suggests that support from coworkers and supervisors is instrumental in worker retention..."⁴. Increasing job satisfaction likewise increases staff retention. A stable, highly qualified field of practitioners reduces service delivery disruption and ensures families have a trusted, experienced person helping them identify and learn skills to help support their child(ren)'s development.

The State is hosting the 6th annual CIS Institute titled "Supporting Families Experiencing Trauma." This two-day Institute is designed for practitioners to go deeper into trauma informed knowledge and practices. In addition to the Institute, CIS State Team is committed to using existing resources strategically at the local and state level to support enhanced or changed practices. Regions will be paired up for face-to-face meetings over the two months following the institute. Regional work will involve supporting implementation of trauma informed care/best practice and how to be more strategic in using existing resources.

The Vermont I-Team Early Intervention Project is a critical partner in supporting and promoting parents'/caregivers' ability to support their children's social and emotional development and to maximizing VT's achievement of its SIMR. Having an infant or toddler with complex and specialized health and/or developmental needs can have implications for the child and parent/caregiver relationship and the family's ability to support their child's development and learning within the context of that relationship. Recognizing that a complex health and/or developmental need such as when a child requires medical procedures may have a traumatic impact on the infant/toddler, the family, and the practitioners who support the child and family,

⁴ Barak, M., Nissly, J., & Levin, A. (2001). Antecedents to Retention and Turnover among Child Welfare, Social Work, and Other Human Service Employees: What Can We Learn from Past Research? A Review and Meta-analysis, in *Social Service Review*, Vol. 75 No. 4, pp. 625-661, The University of Chicago Press, <http://www.jstor.org/stable/10.1086/323166>

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the Vermont I-Team EI Project team will present a 4 ½ hour intensive workshop at the CIS Institute focused on trauma-informed practice.

The State will be monitoring and providing support necessary to ensure that all twelve regions receive training in administering the ASQ:SE-2 training. As stated [above](#), the State CIS-EI team, in collaboration with the Agency of Education Part B 619 program, trained individuals from 10 regions of the state. This was a train-the-trainer event with the expectation that those who attended would return to their regions and train other practitioners on the ASQ:SE-2. The goal is to have all CIS-EI regional practitioners trained and administering ASQ:SE-2 screenings, along with key partners, by December 31, 2016.

Fostering Family Connections

Infrastructure Development

Vermont CIS-EI contracted with a Family Engagement Coordinator. It is the Family Engagement Coordinator's primary responsibility to develop a statewide framework which will outline standards for engaging families and expanding family leadership and advocacy skills at the provider, regional and statewide level. If the State provides a statewide framework, strategies, and monitoring for accountability, CIS-EI practitioners will more effectively engage families and families will expand their skills to advocate for their and their children's needs. Practitioners and the State can then learn what families need to increase their ability to help their infants and toddlers develop and learn functional social and/or emotional skills.

In order to develop an effective framework useful to agencies across disciplines/programs, Vermont CIS-EI will be collaborating with key stakeholders and partners such as the: Vermont Interagency Coordinating Council, Strengthening Families regional projects (Project 4 of Vermont's Race to the Top Early Learning Challenge Grant (ELC)), Promise Communities (Project 24 of the ELC), regional parent child centers and CIS-funded agencies. The input of these partners will enable the State and regional partners to have an effective and unified framework for family engagement that families recognize, thereby maximizing their involvement regardless of the primary service they are receiving. When families are able to provide input into the system of services that support them and their children, we are able to better understand what is working for them and what we need to improve. By developing families' leadership skills, CIS-EI can engage and partner them in a truly collegial manner and gain their help to develop program improvements.

Fostering Family Connection Activities to Support the CIS-EI Program

The Family Engagement Coordinator has planned the following activities to effectively foster family connections:

1. Increase family input and leadership on a state level by recruiting at least 3 more parents to become active members of the VICC by January, 2017. Currently the VICC only has 2 parent members. With increased parent involvement, the VICC will have a stronger family perspective on the issues for which the VICC advises and assists CIS.

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2. Increase VICC participation in CIS-EI and, more specifically, the SSIP activities by developing and supporting workgroups. These workgroups will focus, at a minimum, on the CSPD, CIS-EI data, and family engagement. These workgroups, their members, and their tasks will be identified and functioning by November, 2016.
3. Acquire knowledge of and develop collaborative relationships with state and local resources and initiatives for family engagement by attending parent cafés within each Promise Community and attending bi-monthly update meetings with the Promise Community director by June, 2016 and on-going.
4. Increase knowledge of family engagement strategies by conducting research into other state's practices and attending a training to learn to conduct community or parent cafés by December, 2016.
5. Offer support and technical assistance to regional CIS-EI programs by organizing and conducting relevant workshops and trainings for families and early childhood professionals in collaboration with community partners by January, 2017.
6. Develop a family engagement framework for the State CIS by June, 2017. This framework will be developed in collaboration with regional and State partners, including Vermont's Parent Training and Information Center (Vermont Family Network) and multiple projects of Vermont's Early Learning Challenge Grant (ELC) ([see Family Engagement in the "Update on Vermont's SSIP Coherent Improvement Strategies" section above](#)). The Family Engagement Coordinator will research best practices given cultural dynamics of each region and develop principles that prioritize engagement around children's social and emotional health.
7. Through the family engagement activities, keep CIS informed of the issues and challenges experienced by families who have children enrolled in CIS-EI by July, 2017. These data will be shared with CIS-EI program and partners, and used for continuous program improvement activities associated with the SSIP.
8. In addition to the SSIP Newsletter, contribute relevant articles to the monthly Family Connections Newsletter published by the Vermont Family Network, Vermont's Parent Training and Information Center, beginning July, 2016.

Targeted Supports

Infrastructure Development

Throughout Phase II, the State, with technical assistance from the National Center for Systemic Improvement (NCSI) and IDEA Data Center (IDC), provided targeted support to three regional CIS-EI programs. This support included joint in-person meetings with all three regions, on-site technical assistance to each region from at least one member of the State CIS-EI team, and technical assistance calls and webinars. This support enabled the regions to conduct root cause analysis using current data extracted from the State's data system, identify one to three improvement strategies to implement with a targeted population, and develop an evaluation plan for measuring the efficacy of their selected strategy/strategies. These identified strategies are now referred to that the regions' targeted supports for families.

The State will be supporting the regions to connect with key stakeholders and partners within their communities throughout Phase III of the SSIP. As of the writing of this document the State

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is working with the Placement Stability Project (PSP) to determine if that project's grant can support funding for administration of ASQ:SE-2 screenings conducted by CIS and other community early childhood providers in the PSP Pilot regions of the State. The purpose of this funding would be to incentivize the use of the screening tool and to reimburse the individuals conducting it which will support both the implementation and evaluation required by the PSP's grant.

The State has budgeted for and will support the purchase of evidence-based⁵ training or tools to support the three regions' identified targeted support activities. In addition, the State will support one of these regions that intends to provide the Brazelton Touchpoints training to CIS-EI practitioners and other partners. Touchpoints informed practice offers opportunities for practitioners to support parents in understanding and responding to their child's behavior and strengths. Further, the State will be supporting the three regions' evaluation efforts by ensuring they have access to current CIS-EI data for their region, connecting them with national technical assistance as needed, and assisting them to develop effective data collection mechanisms. Each region has a dedicated technical assistance liaison from the CIS-EI State team. Additionally, the regions are able to access the CIS Evaluation and Quality Assurance Specialist and the Part C Data Manager for technical assistance as needed.

Throughout Phase III the State and the three regions will continuously analyze the data the regions collect associated with the targeted supports. The purpose of this analysis is to determine the fidelity of the implementation, efficacy of the strategies, and any adjustments needed. Further, by December 2018, the State hopes to have sufficient evidence from the data collected to determine which targeted supports could be scaled up to other regions or to a statewide level due to their proven efficacy.

Targeted Support Activities to Support the CIS-EI Program

The three regions have identified their root cause(s) and at least one strategy they will pursue to address the root cause(s), and will complete their implementation and evaluation plans by May, 2016. The regions will begin implementation of their plans (including data collection) by July 1, 2016. The strategic activities the regions will implement and evaluate are referred to as the 'targeted supports.'

The three regions targeted supports will be implemented with identified cohorts of infants, toddlers and their families. The measures reported in the evaluation plan below reflect the measures of the targeted supports which will be implemented with infants and toddlers and their families within the three selected regions.

The targeted support strategies identified by the regions to use with defined cohorts of infants and toddlers and their families include:

⁵ The State is using the following definition: "Evidence-based practice is a decision-making process that integrates the best available research evidence with professional wisdom and values."; Buysse, V., Winton, P., Rous, B., Epstein, D., & Lim, C. (2012). Evidence-Based Practice: Foundation for the CONNECT 5-Step Learning Cycle in Professional Development. *Zero to Three*, 32(4), 25-29.

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- administration of the Ages and Stages Questionnaires: Social-Emotional, Second Edition (ASQ:SE-2: <http://agesandstages.com/products-services/asqse-2/>);
- administration of the Social, Emotional Assessment Measure (SEAM: <http://agesandstages.com/products-services/seam/>);
- identification of functional goals to promote social and/or emotional development where these skills are significantly below the expected range for the child's chronological age; and
- use of a family risk/needs assessment tool⁶ to address family factors that may impact the parent/caregiver's ability to effectively support their child's social and/or emotional skill development.

Each targeted support activity will be implemented with an identified infant/toddler or their family at specified points in time during their enrollment in Part C services. Most of these activities have built in pre- and post- test measures. This will ensure the State and regions are able to effectively measure efficacy. In addition, the regions will implement fidelity measures to ensure that each strategy is implemented as planned. This will enable the State and the regions to determine if the strategy was implemented as intended, and to identify areas in need of improvement if there is a question of fidelity.

Evaluation

Evaluation Team and Resources

The Vermont CIS-EI team consists of the Part C Coordinator, Danielle Howes; the Personnel Development Coordinator, Natalie Whitfield; the Family Engagement Coordinator, Heather Case; the Part C Community Outreach Specialist, Jane Ross-Allen; the Part-C Data Manager, Leslie Mitrano; the CIS Evaluation and Quality Specialist, David Bogdan; the CIS Communications Technician, Samantha Higgins; and the Early Intervention Data Technicians, Mary Lou Lorenz and Danielle Rochford. Additional input and support has been provided from the CIS training consultant, Sheri Lynn. Additional stakeholders include the Vermont Interagency Coordinating Council, chaired by Andreas Koenig, Vermont Part B administrator, Kate Rogers, our twelve regional CIS-EI Program managers, the Child Development Division Statewide Systems and Community Collaborations Unit, Vermont's Building Bright Futures Council, Vermont Family Network, and the Vermont Early Learning Challenge Grant Race to the Top project managers. All of these individuals and groups will be involved with the evaluation process.

⁶ It is important to note that the region that is planning to implement the [family risk/needs assessment](https://www.hudexchange.info/resource/1625/hmis-self-sufficiency-matrix-sample/) is using a tool based on the Housing and Urban Development Self-Sufficiency Matrix (<https://www.hudexchange.info/resource/1625/hmis-self-sufficiency-matrix-sample/>) modified slightly by a community partner. This region will be participating with the State in broader conversations with other partners to determine a family risk/needs tool that can be used statewide by multiple State-funded or Federal grant-funded programs. This will include looking for ways to align with Vermont's Strengthening Families work and the home visiting evidence-based models including Parents as Teachers and Maternal, Early Childhood Sustained Home Visiting.

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Vermont, through one of the Early Learning Challenge Grant Race to the Top initiatives, is in the process of specifying an advanced Care Management data system to support CIS and CIS-EI. In the meantime, during the SSIP timeline, Vermont will use paper forms, spreadsheets, existing Microsoft Access databases and Survey Monkey to collect, store and analyze data. In addition, Vermont Insights, a data analysis and public reporting system offered by Building Bright Futures, will be investigated for sharing results publicly.

Alignment of Evaluation Plan to Phase I

As with Infrastructure alignment, the Evaluation Plan threads through each of Vermont's SSIP Strategies; the Comprehensive System of Personnel Development, Fostering Family Connections and Targeted Supports.

The CSPD process evaluation starts with project management of activities and key dates in the CSPD development plan. In parallel, data will be collected to determine baselines for key performance indicators. Data will be used to assure practitioner engagement in the CSPD process and to monitor staffing vacancies and retention.

The Fostering Family Connections process evaluation also starts with project management of activities and key dates in the Family Connection's plan. Family engagement opportunity dates, times, location and attendance will be tracked. Recruitment to higher level engagement such as membership on regional councils or the Vermont ICC will also be tracked. The annual Part C Family Survey results and comments will provide key information on the impact of Fostering Family Connections.

The three regions implementing targeted supports, Bennington, Brattleboro and Hartford, will each collect its own evaluation data. The CIS Evaluation and Quality Specialist and members of the CIS-EI SSIP State Team will work with the regions to assure that data is collected so that the performance measure analysis may be completed. Generally, data will be collected on the same six-month basis as the One Plan review and update. The evaluation plans will be completed by the three regions by May, 2016.

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Evaluation Plans for SSIP Key Strategies

Vermont’s CIS-EI State Identified Measureable Result (SiMR) of our SSIP Plan is: Vermont families are able to help their infants and toddlers develop and learn functional social and/or emotional skills, and infants and toddlers substantially improve their social and/or emotional functional development. To support the SiMR, Vermont has identified four interconnected strategies: development of a Comprehensive System of Personnel Development (a framework to support the training and retention of highly qualified practitioners); fostering family connections to increase opportunities for families to interact with other families, learn advocacy and leadership skills; practitioners in three regions will implement supports with families targeted to address the SiMR; and alignment with other community and State partners on all improvement strategies to maximize resources and provide consistent and uniform information. The goal of evaluation is to demonstrate the efficacy of these strategies.

Infrastructure alignment does not have an identified evaluation plan. As discussed throughout this document, aligning with key stakeholders is critical to the success of every aspect of the SSIP. Additionally, members of the CIS-EI SSIP State Team participate in key workgroups around initiatives lead by our primary partners. Therefore, this strategy will be evaluated by the continued participation of our partners in this SSIP work and our own membership on the various workgroups whose goal is related to the SiMR.

Comprehensive System of Personnel Development Intended Outcomes:

[\(See above for the CSPD Improvement Strategy Activities\)](#)

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short term	Of the EIs that were hired as of January 1, 2016, 100% will have gone through the process for certification by July 1, 2016	How many certifications have been issued?	Number of certifications issued	Contractor will maintain excel spreadsheet	July 1, 2016

Part C State Systemic Improvement Plan (SSIP) Phase II: Infrastructure, Supports, Evaluation

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short term	All EIs have IPDPs if, based on the self-assessment of the certification, there is a goal each EI has selected to work on and that is signed by the supervisor.	How many certified EIs have IPDPs?	Number of IPDPs on file with State or BFIS	Each EI agency will see that the supervisor signs that IPDP and the State will attain copies from a segment of the individuals annually. All IPDP's will be available for State review for monitoring upon request within regional personnel files.	July 1, 2016
Short term	ECPC TA Phase One Completed.	Was Phase One Completed and submitted?	Submitted and accepted Phase One documents	The Personnel Development Coordinator will ensure completion and submission	6 months (September 30, 2016)
Intermediate	ECPC TA Phase Two Completed.	Was Phase two of the CSPD plan completed and submitted?	Submitted and accepted Phase Two documents	The Personnel Development Coordinator will ensure completion and submission	12 months (March 30, 2017)
Intermediate	Quarterly meetings scheduled between Preservice and Inservice	Are quarterly meetings scheduled and productive?	Four meetings a year are convened and recommendations submitted	The Personnel Development Coordinator will document meeting agendas, minutes and action plans	Sept 30, 2016 – Sept 30, 2017
Intermediate	Increased number of Field Placements	Have the number of field placements increased?	Increase from baseline number of field placements	The Personnel Development Coordinator will collect numbers from preservice orgs	Sept 30, 2016 – Sept 30, 2017

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Intermediate	Regularly scheduled trainings for all new employees on COSF, ASQ, etc.	Is there an ongoing, strategically designed schedule of new employee trainings?	Sign in sheets and evaluations from trainings	The Personnel Development Coordinator will collect and maintain documentation of trainings	Sept 30, 2016 – Sept 30, 2017
Intermediate	Written CSPD plan completed and submitted.	Was written CSPD plan completed and submitted?	Submitted and accepted written CSPD plan	The Personnel Development Coordinator will ensure completion and submission	18 months (October 30, 2017)
Intermediate	PD supports and activities are ongoing, coordinated and strategically designed to implement best practices.	Is there an ongoing, strategically designed schedule of employee trainings? Is there ongoing supervision meetings and/or structures for feedback for each employee?	Sign in sheets and evaluations from trainings Schedule of trainings	The Personnel Development Coordinator will collect and maintain schedule and documentation of trainings Collect survey from supervisors on the types of structures and meetings to staff to support personnel development needs of individuals.	By October 30, 2017
Intermediate	Staff morale and retention improves as shown by Survey Monkey results Suggest a pre and post survey	How do practitioners self-report on morale and retention?	Improvement from baseline numbers on relevant SHRM Benchmarked Survey Monkey questions	The Personnel Development Coordinator will send out Survey Monkey on a regular (quarterly/bi-annual/annual) basis	By October 30, 2017

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Long term	Increased average years of experience for EIs.	What is the average number of years of experience for EIs?	Improvement from baseline numbers on relevant SHRM Benchmarked Survey Monkey questions	The Personnel Development Coordinator will send out Survey Monkey on a regular (quarterly/bi-annual/annual) basis	Increase annually over five years by March 2021.
Long term	Highly qualified personnel implement best practices.	Do IPDPs document best practice professional development goals?	Documented PD goals in IPDPs on file with State or BFIS	The Personnel Development Coordinator will collect or maintain a sample of IPDPs that represent all regions.	Increase/improvement annually over five years by March 2021.
Long term	Families know how/are better able to support the social and emotional development of their children	Are families better able to support the social/emotional development of their children?	Annual state-wide APR data – Indicators 4C.	Annual data collection in place	Increase/improvement annually over five years by March 2021.
Long term	Social/emotional development of children has improved.	Has the SE development of children improved?	Annual state-wide APR data – Indicators 3aSS1.	Monthly/Annual data collection in place	Increase/improvement annually over five years by March 2021.
Long term	Data used to evaluate and adjust all pieces of CSPD.	Is there a functioning, effective data collection system in place?	Data system is in place and functioning to make improvements and adjustments	All data inputs and outputs (see above)	Increase/improvement annually over five years by March 2021.

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Long term	ECPC Self-Assessment quality indicator scores improve each year.	How have our self-assessment scores improved?	Completion of ECPC Self-assessment by large stakeholder meeting	Annual review of ECPC Self-Assessment	Increase/improvement annually over five years by March 2021.

Fostering Family Connections Intended Outcomes:

[\(See above for the Fostering Family Connections Improvement Strategy Activities\)](#)

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short term	Quarterly Regional Spotlight On Community Activities and Family Connections in the SSIP Newsletter	How does the state CIS-EI team highlight opportunities for adults and children to make positive social connections with peers in Vermont for other local CIS-EI providers?	Parents and practitioners will have increased access of resources highlighted in newsletter	Publishing of “regional spotlights” in quarterly SSIP newsletter	Present and quarterly as published.

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short term	Vermont Regional Family Engagement Self-Assessment	How do we assess our current family engagement practices across the 12 regions of Vermont to grow a culture of trust and partnership between families, community members, and practitioners?	<p>Root cause analysis of community involvement barriers within the 12 regions of Vermont will be completed.</p> <p>Local CIS-EI providers recognize the quality family engagement work already being done</p>	<p>Evaluate community activity best practices</p> <p>Family Outcomes Survey improves</p>	December 2016
Intermediate	Increase parent membership in the Vermont Interagency Coordinating Council	How do we increase family leadership at the provider, agency, community, and state level?	At least 3 more parents become members of the VICC	Parent members receive formal acknowledgement of their membership from the Governor's office.	January 2017
Intermediate	Parent Community Café Training	How do we increase family leadership at the provider, agency, community, and state level?	At least 8 parents from the CIS demographic are recruited and commit to be parent café hosts and receive training presented in coordination with the Promise Community project of the ELC.	<p>12 parents from at least 4 different regions attend the scheduled training.</p> <p>At least 3 regional parent hosts coordinate and conduct up to 3 parent café opportunities in their communities.</p>	November 2016 December 2017

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Long Term	In coordination with the Vermont Family Network, develop and promulgate an Early Childhood Friendly Media Portal for Family Centered Social Connection Opportunities	What opportunities exist for adults and children to make positive social connections with peers in Vermont?	Early Intervention practitioners have increased knowledge of community resources and provide information to families	An inventory of activities is compiled and an electronic media portal activated which lists community activity resources by region across the state	September 2017
Long Term	Statewide Family Engagement Framework	How does Early Intervention choose systemic, integrated, and comprehensive approaches that have strong potential for attaining family and child outcomes?	Early Intervention practitioners have an increased level of accountability around family engagement	There is a documented framework with goal definitions and identified strategies Data is collected by the Family Engagement Coordinator quarterly about formal family engagement activities in each region.	June 2017 December 2017 and onward

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Targeted Supports Evaluation Plan

Hartford Targeted Supports Intended Outcomes:

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short Term	All Children with an entry COS rating of 4 or less in social/emotional development receive the ASQ:SE-2 screening at prescribed intervals	Is every practitioner using the ASQ:SE-2 with the defined cohort of children?	All EI Practitioners are trained in ASQ:SE-2	Name and role recorded on training attendance sheet	TBD by end of May, 2016
Short Term	All children screened with the ASQ:SE-2 have goals identified with the family and written into their One Plan to improve their social and/or emotional development	Is the screening administered at least every 6 months? Does the child have at least one SE goal on their One Plan as a result of the screening?	All Children with an entry COS rating of 4 or less receive the ASQ:SE-2 screening at least every 6 months All children screened have at least one Social/emotional goal on their One Plan	ASQ:SE-2 scores are logged in a spreadsheet. Social emotional goals identified are entered into the One-Plan and a goal tracking spreadsheet.	TBD by end of May, 2016

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short Term	Families understand the importance of emotional goals and identify social emotional goals in the One Plan	Do families identify social emotional goals using the ASQ:SE-2 results and include social emotional goals in the child's one plan	Social emotional goals are documented in the One Plan and through observation or dialog, the practitioner determines that the family understands that social emotional development is important to their child's development	TBD by end of May, 2016	TBD by end of May, 2016
Intermediate	Families actively work on social emotional goals identified in the One Plan with their child	Do families actively work on social emotional goals identified in the One Plan?	Through observation or dialog, practitioner determines that families and caregivers have actively worked on social emotional goals identified in the One Plan.	TBD by end of May, 2016	TBD by end of May, 2016
Long Term	Families report that CIS-EI has helped them help their child develop and learn.	Do families report that CIS-EI has helped them help their child develop and learn?	Family Survey results indicator 4C. Family cohort identified with permission.	Annual Part C Family Survey results.	TBD by end of May, 2016
Long Term	Children substantially improve their social emotional development	Do children substantially improve their social emotional development?	Child outcomes 3A	Entry and Exit COSF evaluations	TBD by end of May, 2016

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Brattleboro Targeted Supports Intended Outcomes:

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short Term	Practitioners understand family stressors and connect family to available resources	<p>Does the family receive a referral to a resource to address the identified stressor(s)?</p> <p>Does the family actively engage with the resource they are referred to?</p>	<p>Practitioners report they made a referral for the family.</p> <p>Families report they are actively engaged with the resource.</p>	TBD by end of May, 2016	TBD by end of May, 2016
Short Term	All practitioners participate in weekly clinical supervision that connects Touchpoints principles and assumptions to their work with families	Are practitioners intentionally linking Touchpoints principles and assumptions to their work with families?	Pre- and post-evaluation tool (in development)	<p>Practitioners complete the Touchpoints workbook on a bi-weekly basis</p> <p>The clinical supervisor keeps a log of workbook completion for each practitioner</p> <p>Practitioners participate in bi-weekly Touchpoints reflective supervision</p> <p>The clinical supervisor keeps a log of supervision for each practitioner</p>	TBD by end of May, 2016

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Intermediate	The targeted family stressors decrease over time	Does One Plan goal to address the identified stressors lead to a decrease in stressors over time?	There a decrease in stressors as identified by the family on the family assessment	Practitioners complete a family assessment for each family at 6 month intervals. Family assessment scores are logged in a tracking spreadsheet	TBD by end of May, 2016
Long Term	Parents are more engaged and active participants in supporting their child's development	Do families report that they know how to support their child's development?	Part C Family Survey indicator 4C	TBD by end of May, 2016	TBD by end of May, 2016
Long Term	Children substantially improve their social and/or emotional functional development	Do children substantially improve their social and/or emotional functional development?	Child Outcomes indicator 3A.	TBD by end of May, 2016	TBD by end of May, 2016

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Bennington Targeted Supports Intended Outcomes:

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short Term			All EI Practitioners are trained in ASQ:SE-2 and SEAM	Name and role recorded on training attendance sheet	TBD by end of May, 2016
Short Term			15 Children with an entry COS rating of 4 or less and atypical behavior receive the ASQ:SE-2 and SEAM evaluation at prescribed intervals	ASQ:SE-2 and SEAM work sheets are included in the child's file, ASQ:SE-2 scores are logged in a spreadsheet. Goals identified using SEAM are entered into the One-Plan and a goal tracking spreadsheet.	TBD by end of May, 2016
Short Term	Families actively work on social emotional goals identified in the One Plan with their child	Do children achieve social emotional goals identified in the One Plan?	Through observation or dialog, practitioner determines that goals have been achieved	TBD by end of May, 2016	TBD by end of May, 2016
Intermediate	Families and Caregivers identify and work on 1 to 3 activities from the SEAM toolkit that will reduce the atypical behavior.	Do families report that they have worked on the activities identified by the SEAM toolkit?	Families are asked about the frequency and progress on activities at each visit.	TBD by end of May, 2016	TBD by end of May, 2016

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Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Intermediate	The child's atypical behavior is noticeably changed.	Do activities identified in the SEAM toolkit change the atypical behavior of the child?	At each 6 month review, through observation or dialogue, the practitioner identifies any noticeable change in the child's atypical behavior.	TBD by end of May, 2016	TBD by end of May, 2016
Long Term	Families report that CIS-EI has helped them help their child develop and learn.	Do families report that CIS-EI has helped them help their child develop and learn?	Family Survey results indicator 4C. Family cohort identified with permission.	Annual Part C Family Survey results.	TBD by end of May, 2016
Long Term	Children substantially improve their social emotional development	Do children substantially improve their social emotional development?	Child outcomes 3A	Entry and Exit COSF evaluations	TBD by end of May, 2016

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Methods for Analyzing the Data

The Vermont CIS-EI, as previously noted, does not have a comprehensive data system and relies on a collection of Microsoft databases and spreadsheets. Processes have been developed to link, at the individual child level, child count data, COS data and demographic data. Processes to link child specific data created for Vermont SSIP evaluation performance indicators will be developed by the Part C Data Manager and CIS Evaluation and Quality Assurance Specialist as the data collection tools are created.

By linking child and family specific data, performance measures associated with ASQ:SE-2, SEAM and the identified family assessment tool may be correlated to Child Outcome data. Performance measure results may also be split by demographic data and other program data. Families participating in the CIS-EI programs in the Bennington, Brattleboro and Hartford regions will be asked if they are willing to self-identify on the Family Survey so that Family Survey results of participants may be compared to Family Survey results of non-participants.

Analysis of the long term outcome performance measures will primarily consist of tracking the measure over time compared to a baseline. Most of the long term outcome performance measures either have baseline data or baseline data will be generated. In particular, baseline data exists for Performance Measure 3A, and Performance Measure 4C. Baseline data will be created for CIS-EI staffing performance measures such as the number of years of service.

Sample size is of particular concern for the Bennington, Brattleboro and Hartford regions. CIS-EI is working with technical assistance staff from the IDEA Data Center (IDC) to identify ways to mitigate variations due to sample size. Vermont is particularly interested in the concept of a three year rolling average for the performance indicators. This smooths the curve but adds a lag time on the response to changes. IDC has given preliminary approval to this concept but asked that Vermont assess the ramifications more thoroughly. Data will be maintained to allow the State to use annual data if the rolling average does not prove helpful.

The three regions implementing targeted supports will identify all evaluation measures and finalize their evaluation plans by May, 2016. Once these evaluation plans are completed, the regions will work with the State to develop data collection methods. The State will then cultivate ways to analyze and correlate data similar with other data described above. The purpose of any correlation will be to find appropriate evidence to support or refute the efficacy of the strategy being implemented.

To summarize, correlations will be evaluated between child specific SSIP evaluation performance measures and child outcome results. In addition, child outcome results will be compared over time to baseline data. In this way, Vermont hopes to show that SSIP strategies are impacting child outcomes. In addition, family survey results for the cohort self-identified as participating in SSIP strategies will be compared to family survey results of those who did not self-identify to show that SSIP strategies impact family outcomes.

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Timeline and Plans for Sharing and Using Evaluation Results

The “[Evaluation Plans for SSIP Key Strategies](#)” section above describes the timelines for gathering data for various activities for each strategy. The State will review data as it is gathered. Data will be immediately analyzed by the CIS-EI SSIP State team for any data anomalies that suggest a strategy may need review, technical assistance should be provided to regions or received from national centers, or more guidance is necessary. Once the data is analyzed, the data will be presented to the VICC at least quarterly for its review and input into what the data show. All relevant data will be provided to VICC workgroups as applicable as it is generated and analyzed. At least once per year, with the input of the VICC, the State will consider any necessary amendments to the SSIP coherent improvement strategies. Before any amendments are finalized, proposed changes will be reviewed with the CIS-EI regions, Part B 619, and other key stakeholders.

In addition, the CIS-EI SSIP State Team together with the regions implementing targeted supports will review data gathered. These data will be compiled by the State and analyzed for anomalies. With the regions, the State will analyze the data to determine if the strategies are being implemented with fidelity and if they are making the intended difference for infants, toddlers and their families. Within eighteen months of implementation of targeted support activities, the State, with the three regions implementing these supports, will review all data and determine if sufficient evidence exists to warrant scaling up the targeted support(s) to another region or even statewide. Any recommendation for scaling up will be reviewed with the VICC and the other nine regional CIS-EI agencies.

Throughout the year, as data are available, relevant pieces of data will be communicated to CIS-EI practitioners, key SSIP stakeholders, and State leadership through the SSIP Newsletter. Each year the Part C Coordinator will share relevant data from the SSIP strategies with families when communicating with them about the annual Family Survey. The Family Engagement Coordinator, as indicated in the activities associated with fostering family connections, will communicate other information about SSIP strategies, implementation and data through meetings and both established print and electronic communication modalities.

By communicating regularly with parents, partners, practitioners and key stakeholders, we believe we will generate both interest and input to ensure the effectiveness of the SSIP. Through the broad participation and input of others, along with the active implementation of our planned coherent improvement strategies, we believe we will achieve the SiMR.

Technical Assistance and Support

Throughout Phase II, Vermont has participated in webinars and conferences associated with the SSIP that have been offered by the Office of Special Education Program (OSEP). In the fall, Vermont’s OSEP lead met with Vermont by phone and provided input into Phase II expectations and discussed Vermont’s approach to infrastructure changes associated with the SSIP. The input from OSEP has assisted Vermont in understanding the expectations for Phase II and helped us maintain our focus on the priority of this work.



Part C State Systemic Improvement Plan (SSIP) Phase II: Infrastructure, Supports, Evaluation

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Vermont has and will continue to access technical assistance from the following organizations throughout Phases II and III of the SSIP:

- National Center for Systemic Improvement
- DaSy Center
- IDEA Data Center
- Early Childhood Personnel Center
- Early Childhood Technical Assistance Center

Technical assistance from these centers has assisted Vermont with our data and evaluation planning at the State level and with the regional targeted supports. We received technical assistance around the 2016 annual Family Survey dissemination and data collection to improve response rates and share data with survey recipients. Vermont was awarded an intensive technical assistance grant from the Early Childhood Personnel Center to support the development of the CSPD. We have accessed technical assistance to learn methods for engaging the regions in root cause analysis, to identify targeted support strategies, and to develop plans for implementing and evaluating those strategies.

With the support of these technical assistance centers, Vermont has begun moving into Phase III of the SSIP. Our state values the resources and support provided by the technical assistance centers. Each member of the CIS-EI SSIP State team accesses technical assistance as needed to move the SSIP work forward. With assistance from these Centers, Vermont believes this plan will effectively improve outcomes for infants and toddlers and their families.

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Acronyms Used in this Document

APR	Annual Performance Report
ASQ	Ages and Stages Questionnaire, Third Edition
ASQ:SE-2	Ages and Stages Questionnaire: Social Emotional, Second Edition
Baby I-Team	Interdisciplinary Team Early Intervention Project
CEC	Council for Exceptional Children
CIS-EI	Children’s Integrated Services-Early Intervention
COSF	Child Outcome Summary Form
CSPD	Comprehensive System of Personnel Development
DaSy Center	Center for Individuals with Disabilities Education Act Early Childhood Data Systems
DEC	Division for Early Childhood
ECPC	Early Childhood Personnel Center
EIs	Early Interventionists
ELC	Race to the Top Early Learning Challenge Grant
IDC	Individuals with Disabilities Education Act Data Center
IDEA	Individuals with Disability Education Act
IFS	Integrating Family Services
IHE	Institution of Higher Education
IPDP	Individualized Professional Development Plans
I-Team	Interdisciplinary Team
NAEYC	National Association for the Education of Young Children
NCSI	National Center for Systemic Improvement
One Plan	Vermont’s Individualized Family Service Plan
OSEP	Office of Special Education Programs
PSP	Placement Stability Project
SIMR	State Identified Measurable Result
SEAM	Social Emotional Assessment Measure
SSIP	State System Improvement Plan
UVM	University of Vermont
VICC	Vermont Interagency Coordinating Council