Ohio Part C State Systemic Improvement Plan

Phase III, Year 2

Submitted March 23, 2018

Contents

Component #1 - Summary of Phase III, Year 2

1(a) Theory of Action

Ohio continues to focus its SSIP work in the following three improvement strategy areas, reorganized through the Phase II work:

- **(I)** Increase the quality of child and family assessments to develop meaningful initial and exit COS statements
- **(II)** Improve the quality of IFSP outcomes to address family priorities related to the child's acquisition and use of knowledge and skills
- **(III)** Increase access to and delivery of needed evidence-based services

Ohio's Theory of Action illustrates how, in each of the three improvement strategy areas, further identification of issues and development of additional resources at the state level will result in increased knowledge and improved practice among local programs and providers. These improvements within the local programs will lead to engaged, more confident families. Together, these changes will ultimately result in achieving Ohio's SIMR: ***Substantially increase rate of growth for infants and toddlers with IFSPs who demonstrate improved acquisition and use of knowledge and skills.*** In the previous reporting year, Ohio's Part C program worked through the state-level activities in the Theory of Action to achieve short-term outcomes. Over the past year, the state has moved toward ensuring the intended results are achieved among local programs and providers, and that family-level results will ultimately be achieved, as well. See the figure below for further details.

Strands of Action	If Ohio's Part C program ...	Then local programs and providers...	Then families...	Then ...
Quality of Child and Family Assessments	Identifies strengths and weaknesses within the child and family assessment process, including the extent to which assessment information informs child outcome statements about the child's acquisition and use of knowledge and skills and develops or updates professional development materials to address identified areas of difficulty...	...Will conduct thorough, functional child and family assessments that identify family priorities related to acquisition and use of knowledge and skills; Will accurately and thoroughly record Child Outcomes Summary information...	...Will be involved as part of the team during the child and family assessment and have a thorough understanding of their child's strengths, needs, and overall functioning in regard to acquiring and using knowledge and skills...	
Quality of IFSP Outcomes	Analyzes the extent to which IFSP outcomes are functional, family-directed, based on child and family assessments, and address family-identified needs related to acquisition and use of knowledge and skills and develops resources and trainings to emphasize aspects of quality outcomes and address areas of weakness...	...Will develop activity and routine-based IFSP outcomes which address family priorities identified in the child and family assessment process that impact acquisition and use of knowledge and skills...	...Will be fully engaged in development of IFSP outcomes to address the priorities they identify regarding acquisition and use of knowledge and skills...	...The percent of children who demonstrate improved acquisition and use of knowledge and skills among children receiving Part C services will increase.
Access to and Delivery of Needed Services	Identifies gaps in needed services , maximizes resources available to fund these services, and develops resources and trainings for delivering quality, evidence-based interventions to address outcomes related to acquisition and use of knowledge and skills...	...Will have access to all needed services and ensure delivery of quality services that address the outcomes related to acquisition and use of knowledge and skills identified by the entire IFSP team, including the family...	...Will have improved confidence and competence and an increased ability to address acquisition and use of knowledge and skills to help the child develop and learn...	
	Short-Term	**Intermediate**		**Long-Term**

1(b) Coherent Improvement Strategies and Principle Activities

Ohio continued implementing numerous activities over the past year, both to achieve short term outcomes and to begin working toward achieving intermediate outcomes. See Section 5(a) for a summary of improvements in each infrastructure area. Because the activities needed to achieve short-term outcomes were primarily foundational, the bulk of activities completed during the previous reporting year centered around increasing access to useful resources. As Ohio shifted focus to activities needed to meet intermediate outcomes – the crux of its plan – the state began to employ activities with the intent to increase knowledge and improve practice at the local level, as well as to improve equity of access to EI services across the state. Specifically, the state:

- Continued to evaluate the impact of the new SOP rule;
- Began to identify which changes are needed to the state's in-person COS training in preparation for requiring all Service Coordinators and assessors, at a minimum, to complete the training;
- Continued to gather information about the quality of IFSP outcomes, including where additional support is needed, in preparation for implementing training for IFSP team members (including parents) about writing high quality individualized IFSP outcomes; and
- Began to determine how and where evidence-based practices targeted at acquisition and use of knowledge and skills could be incorporated into new and existing trainings.

In addition to completing steps and activities to achieve the intended SSIP outcomes, Ohio has begun or continued several other statewide initiatives and projects. A description of Ohio's major activities and accomplishments over the past year follows, most of which will continue to be referenced throughout this document. Though each of these is systemic in nature, all of them impact at least one improvement strategy area, as referenced at the end of each description.

Implementation of Ohio's New SOP Rule

With invaluable input from OSEP and considerable involvement from the state's broad array of EI stakeholders, Ohio implemented a new System of Payments (SOP) rule in August 2017. Much of the legwork was completed throughout the summer. Beginning in early June, the EI Resource Coordinator held numerous training sessions across the state to ensure that Ohio's EI field had a comprehensive understanding of the SOP rule and their responsibilities related to the rule. In addition to the in-person trainings, a brochure, forms, and other resources were widely disseminated to the field to ensure the SOP rule was thoroughly understood by everyone in Ohio's EI system. Ohio's EI website has a tab dedicated to SOP resources, as well. ***(Improvement Strategy III)***

Other New Rules

With Ohio's lead agency transition from the Ohio Department of Health (ODH) to the Ohio Department of Developmental Disabilities (DODD), the ODH EI rules remain in effect for the EI system until DODD promulgates new rules. Over the past year, DODD has been working extensively with a broad group of stakeholders to review and codify EI rules under DODD. The new rules, while undergoing fairly substantial changes structurally to consolidate and clarify the content into fewer total rules, will not be vastly different in regard to content. Each of the new proposed rules was drafted by DODD, then shared at an EI Advisory Council and Stakeholder meeting with ample opportunity for feedback. Once the input from those stakeholders was incorporated into the draft rule, a work group was formed to work out additional details and create a polished draft. DODD plans to release all new EI rules, as well as updated forms, as a package in the summer or autumn of 2018. Ohio will provide support to its EI field in the form of regional meetings, guidance documents, and job aids to ensure there is a clear understanding of

changes that have been made to the rules and how to implement them. *(Improvement Strategies I, II, and III)*

Supporting Ohio's Service Coordinators

Because Ohio firmly believes that a strong Service Coordination system is the foundation for a strong EI system, DODD developed the Supporting Ohio's Service Coordinators (SOSC) process to assist with identifying Ohio's strengths and challenges related to providing Service Coordination, including the ten federally-mandated Service Coordinator responsibilities. The first phase of the process, which focused on Service Coordinator responsibilities related to parent's rights, evaluation and assessment, and the COS process, began in and continued throughout 2017. Through assessments, interactions with local programs, and record reviews, DODD program consultants gained substantial insight about Service Coordination across the state. Most notably, DODD learned that there was a need for additional training about documentation in general, and that Service Coordinators would benefit from additional support around the COS, particularly with explaining the process to families and with facilitating team discussions. DODD also learned that providing additional support regarding the SOP rule and the Service Coordinator role on the EI team would be useful. Through three total phases, Ohio will evaluate how well all of the mandated responsibilities are being implemented via competency assessments, self-reflections, record reviews, interviews, and observation. Identified needs will be addressed through TA and updated or new trainings. *(Improvement Strategy I)*

Data System Transition

DODD worked throughout the second half of 2017 to prepare to transition the Early Intervention piece of its data system from ODH to DODD. Prior to going live with the new system, data and monitoring staff collaborated with IT staff to gather all needed requirements and perform extensive testing of the data system functionality. The new Early Intervention Data System (EIDS) went live on September 1, 2017. The agency plans to begin working on enhancements to EIDS in late 2018. *(Improvement Strategies I, II, and III)*

Professional Development

In addition to the new and continuing professional development opportunities described subsequently, The Professional Development tile of the EI website was extensively updated in early 2018. The EI field in Ohio can now even more easily access information about trainings, resources, and the TA Team. The Training page now also includes a search feature that allows users to filter the list of trainings by continuing education option, skill level, topic and format.

Parent and Physician Modules

Ohio previously contracted with the Family, Infant and Preschool Program (FIPP) Center for the Advanced Study of Excellence (CASE) in Early Childhood and Family Support Practices to develop a series of six self-paced, web-based modules to increase understanding of the Agreed Upon Mission and Key Principles for Providing Early Intervention Services in Natural Environments[1] (EI Mission and Key Principles). The state again contracted with FIPP in late 2016 to create a module for parents that walks families through what they can expect during the entire EI process, including a summary of their rights in EI, and a module for physicians that provides an overview of EI, as well as how and why to make referrals to the program. Both web-based modules will be finalized and available to the field in summer

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[1] Agreed Upon Mission and Key Principles for Providing Early Intervention Services in Natural Environments: http://ectacenter.org/~pdfs/topics/families/Finalmissionandprinciples3_11_08.pdf

2018. These resources are intended to reach broader facets of the EI field than previous professional development, providing vital knowledge that is specific to these audiences. *(Improvement Strategies I and II)*

Tough Conversations: Making the Most of Difficult Situations
DODD contracted with Robert Gallen, PhD, to create a training designed to support Service Coordinators and service providers in coaching families to effect desired change. Based on the principles of motivational interviewing, this training addressed some of the more challenging situations families face, including addiction, mental illness, intellectual disability of caregivers, coping with a child's diagnosis, and homelessness. The training also included information specific to the challenges IFSP teams face while engaging families in conversations regarding the Child Outcomes Summary. This training was held via webinar in July 2017 and in person four times in September 2017. The in-person sessions included interactive activities to allow participants to practice these conversational strategies.

Additionally, Dr. Gallen will be facilitating a three-part series in the coming months, including using motivational interviewing techniques to have difficult conversations and how to use motivational interviewing strategies in COS conversations, followed by face-to-face sessions where participants can practice using these strategies and receive feedback and coaching from Dr. Gallen. *(Improvement Strategies I and II)*

Supporting Ohio's New Service Coordinator Community of Practice
Launched in December of 2016 and continuing over the past year, DODD's New Service Coordinator community of practice (COP) supports new Ohio EI Service Coordinators by offering them the opportunity to access mentoring, ask questions, and receive informational support around participant-chosen topics. Two advanced credentialed Service Coordinators from local systems, the DODD EI Program Manager, and the DODD EI Training Coordinator facilitate the COP. The first cohort, which included Service Coordinators who attended DODD's Principles of Service Coordination training between May and October 2016, chose to discuss the following topics: explaining parent's rights, clarifying the role of the SC on the team, how to explain EI to families, the Routines-Based Interview (RBI), IFSP Outcomes, and the new System of Payments. Notes from each COP meeting have been posted on Ohio's EI website and are accessible to the entire EI field. The second cohort of this COP began in February 2018. *(Improvement Strategies I, II, and III)*

Family-Centered Practices
The state continues to contract with Debbie Ashley, MA, Certified RBI Trainer, to create additional resources to help the EI field understand and utilize family-centered practices. The two-part webinar series focused on moving from a foundational understanding of family-centered practices to digging deeper and implementing the practices. The initial series was completed in January and February 2017, and DODD plans to offer the training at least twice per year going forward. *(Improvement Strategies I, II, and III)*

Functional Assessments
Ohio contracted with Lee Ann Jung, PhD, to create an intensive 30-hour training course intended to support Ohio's Part C assessors in learning how to conduct a functional assessment that: integrates all developmental domains; is conducted in the family context and in natural environments; is conducted using multiple methods; integrates COS information; and includes the use of data. This training, which incorporates more specific information about how to address acquisition and use of knowledge and

skills, is being completed by three separate cohorts, the first of which has completed the course, and the second of which began in September 2017. Each cohort completes interdisciplinary, job-embedded activities and receives TA from Dr. Jung, to ultimately move from simply understanding theory, to implementing practices, to properly conducting functional assessments. DODD is working to continue this course beyond the three planned cohorts. *(Improvement Strategy I)*

"Donuts with Di"

As a supplemental activity to the Functional Assessment course, the EI program manager, along with EI TA consultants, began a monthly learning collaborative for Ohio's EI assessors called "Donuts with Di". Each month highlights a different content expert (including an audiologist, a dietitian, a developmental specialist, and a teacher of the blind) who leads a discussion about typical and atypical development in a specific content area, as well as how to listen, observe, and utilize all available information to determine whether families have a need for early intervention services. *(Improvement Strategy I)*

Documentation Training

Monitoring and program staff have worked in tandem to create a training on documentation that is applicable to anyone in the EI field. The extensive training will address how providers should create detailed case notes that document both compliance requirements and evidence-based practices, meeting a need identified as unmet early in the SSIP process. To ensure that the training is meaningful to the field, local EI professionals developed scenarios reflecting typical interactions (e.g., introducing the family to EI, explaining and securing consents, developing the IFSP, participating in a joint visit, etc.) and then were videotaped while they role-played each scenario. Participants will have the opportunity to observe these video segments throughout the training and practice their documentation skills in realistic settings. This training will be available to the field in spring or summer 2018. *(Improvement Strategies I, II, and III)*

Increasing Access to Services

SOCOG Pilot

In July 2016, Ohio launched a pilot with the state's Southern Ohio Council of Governments (SOCOG), an association of county boards of developmental disabilities, to establish regional core EI teams to serve six Appalachian counties in the SOCOG and increase access to services in that area of the state. DODD is currently working with eight therapists who make up the core teams to provide services to all participating local programs. All of these local programs have been supplied with wireless hotspots and/or phones to increase the ability for services to be provided virtually. Though there are continued challenges, access to EI services via technology has increased for involved local programs, and both families and the local programs are satisfied with the increase in service availability. As the pilot progresses, the state continues to consider how these strategies can be implemented in other areas with limited provider access to ensure equitable access to services statewide. *(Improvement Strategy III)*

Hearing Services Contracts

DODD posted a competitive request for proposals (RFP) in the spring of 2017 for specialized providers of EI services for families with a child who is deaf or hard of hearing. DODD's contracts with the providers stipulated, among other requirements, that the providers take part in three facilitated training opportunities throughout the yearlong contract. The topics in the current contract cycle include documentation, strategies for meeting IFSP outcomes, and the COS process. Additional self-paced

trainings covering topics such as an introduction to Early Intervention, the IFSP process, family-centered practices, and natural learning environments were also required in the contract. *(Improvement Strategy III)*

Vision Services Contracts
Beginning in July 2017, DODD changed its process for providing EI vision services. Previously, DODD had a contract with the Ohio State School for the Blind (OSSB) to provide vision services in 68 local programs and an additional three contracts with other providers to provide EI vision services in the remaining 20 local programs. In July, DODD moved to one contract with OSSB to both provide vision services in all Ohio local programs and provide technical assistance and support to the interventionists providing the services. DODD's contract with OSSB also ensured that interventionists will take part in the evaluation and assessment process, IFSP reviews, and EI provider team meetings. This change has allowed DODD to leverage the in-house expertise in vision impairments present at the OSSB. *(Improvement Strategy III)*

1(c) Specific Evidence-Based Practices Implemented to Date

For several years, Ohio has been focusing on implementing the seven EI Key Principles and DEC Recommended Practices[2] (DEC RPs). In 2014, ODH and DODD finalized and distributed a position paper (See Appendix B of Ohio's Phase III, Year 1 SSIP Submission) that outlined Ohio's vision for improving its EI system, as informed by the EI Mission and Key Principles, IDEA Part C regulations, and four years of intensive discussions with the state's EI stakeholders. Ohio remains focused on this vision for its EI program and has used the SSIP to further advance improvements in its EI system as a whole. Additionally, over the past six years, "core teams," including a Service Coordinator; Physical Therapist; Occupational Therapist; Speech-Language Pathologist; and Developmental Specialist from nearly all of Ohio's 88 local programs completed six months of intensive professional development activities developed by Drs. M'Lisa Shelden and Dathan Rush[3,4], built around the principles of adult learning, fidelity, and building system capacity. Ohio's EI Program Manager and five EI Program Consultants became certified fidelity coaches through FIPP CASE in late 2017 and provide ongoing support to local programs to help them move toward fidelity in implementation of EBPs.

The state continues to refine the specific practices within its SSIP work that will have the most substantial effect on improving its SIMR area. Ohio has begun implementation of EBPs related to each improvement strategy, and will continue to do so until practices are being implemented to fidelity statewide. To date, Ohio has been able to make progress in implementing DEC RPs focused on functional assessments, largely due to the integration of the assessment into the IFSP process and IFSP form in January 2015, as well as RPs related to family-centered practices and teaming through multiple projects and professional development opportunities, such as the FIPP Case modules and Family-Centered Practices webinars. DEC RPs directly related to Ohio's the SSIP work include the following:

- **RP A6** - Use a variety of methods, including observation and interviews, to gather assessment information from multiple sources, including the child's family and other significant individuals in the child's life

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[2] DEC Recommended Practices: http://www.dec-sped.org/dec-recommended-practices
[3] Rush DR, Shelden ML. The Early Childhood Coaching Handbook. Baltimore, MD: Paul H. Brookes Publishing Co; 2011.
[4] Shelden ML, Rush DR. The Early Intervention Teaming Handbook: A Primary Service Provider Approach. Baltimore, MD: Paul H. Brookes Publishing Co; 2012

- **RP A7** - Obtain information about the child's skills in daily activities, routines, and environments such as home, center, and community
- **RP F3** – Practitioners are responsive to the family's concerns, priorities, and changing life circumstances
- **RP F4** - Practitioners and the family work together to create outcomes or goals, develop individualized plans, and implement practices that address the family's priorities and concerns and the child's strengths and needs
- **RP F7** - Practitioners work with the family to identify, access, and use formal and informal resources and supports to achieve family-identified outcomes or goals
- **RP TC2** - Practitioners and families work together as a team to systematically and regularly exchange expertise, knowledge, and information to build team capacity and jointly solve problems, plan, and implement interventions
- **RP TC5** - Practitioners and families may collaborate with each other to identify one practitioner from the team who serves as the primary liaison between the family and other team members based on child and family priorities and needs

Through continued TA, professional development (including practice-based opportunities), and coaching, DODD will continue to ensure local programs have the support needed to implement these EBPs with fidelity going forward. Ohio's EI TA and Training team are now working on evidence-based EI modules that follow Shelden and Rush's training program. Four modules in total will be created including natural learning environments, coaching, family centered practices, and teaming. As they are certified fidelity coaches, EI TA consultants will assess each of the local programs using the Fidelity in Practice – Early Intervention (FIP-EI) assessment tool to determine whether each program is at fidelity in each of the four areas. EI TA consultants will then work with counties in any area in which they have not yet reached fidelity using the evidence-based EI trainings, TA, and coaching, until each local program reaches fidelity in all four areas, including the SSIP-specific RPs listed above.

1(d) Overview of Evaluation Activities, Measures, and Outcomes

Ohio's primary evaluation activities over the past year were focused on data analyses related to intermediate outcomes. DODD again utilized data, both quantitative and qualitative, to determine how well each local program was implementing the functional assessment process. DODD used data from its annual family questionnaire to measure families' understanding of and ability to support their child's strengths, needs, and functioning related to acquisition and use of knowledge and skills. Additionally, DODD utilized data extracted from EIDS to create a sample of outcomes added to IFSPs between January and June 2017. Like last year, DODD staff recorded whether the outcomes met each of the ECTA six-step criteria included in the Developing High-Quality, Functional IFSP Outcomes and IEP Goals Training Package[5]. See Section 3(a) for additional details about measures used for each intermediate outcome and the results of ongoing analyses.

1(e) Highlights of Changes to Implementation and Improvement Strategies

As described above, Ohio's SSIP work remains focused on the same improvement strategies that were realigned in Phase II, which include: (I) Increasing the quality of child and family assessments to develop

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[5] Developing High-Quality, Functional IFSP Outcomes and IEP Goals Training Package:
http://ectacenter.org/knowledgepath/ifspoutcomes-iepgoals/ifspoutcomes-iepgoals.asp

meaningful initial and exit COS statements; (II) Improving the quality of IFSP outcomes to address family priorities related to the child's acquisition and use of knowledge and skills; and (III) Increasing access to and delivery of needed evidence-based services. The implementation and evaluation of Ohio's SSIP continues with only minor adjustments to activities and data collection, as described subsequently.

Though much progress has been made, and Ohio's short-term outcomes have largely been achieved, the state will continue to build on work related to steps and activities identified as needed to meet some of the state's short-term outcomes. These steps and activities, which are also vital to completing activities needed to achieve intermediate outcomes, include:
- Creating a COS data report,
- Revising the state's COS training,
- More heavily focusing on family outcomes,
- Increasing family engagement in the IFSP process,
- Ensuring quality funding source data, and
- Implementing continued improvements in data collection, TA, use of evidence-based practices, and availability of resources

Additionally, some of the intermediate activities related to use of Medicaid have been put on hold due to the current uncertainties regarding national healthcare and Medicaid. Section 2(a) includes additional details regarding the status of ongoing activities needed to meet short-term and intermediate outcomes.

In regard to ongoing data, Ohio elected not to collect or analyze data for the intermediate outcomes related to service availability and practitioner use of EBPs. Baseline data were collected to determine availability of EI services for Phase III, Year 1, but data collection for this item was put on hold for this reporting year, as the state focused efforts on ensuring the new SOP rule was completely understood and fully implemented rather than analyzing data in this area. Activities related to practitioner use of EBPs to promote child engagement and independence began in July of 2017, but Ohio postponed establishing a baseline in this area for one more year. DODD will continue focusing on strengthening functional assessments and improving quality of IFSP outcomes prior to evaluating practitioner behavior.

Component #2 - Progress in Implementing the SSIP

2(a) Implementation Progress

Ongoing Activities Needed to Meet Short-Term Outcomes

The majority of activities needed to achieve short-term outcomes were completed prior to Ohio's Phase III, Year 1 report. However, due to ongoing needs and, in some cases, outside limitations, some steps that were part of activities needed to complete short-term outcomes continued over the past year. Additionally, some of Ohio's short-term activities were not scheduled to be completed until June 2017. The status of the steps needed to complete short-term activities that were not completed prior to last year's report are included in the tables that follow.

Improvement Strategy I: Increase the quality of child and family assessments to develop meaningful initial and exit COS statements

Activity (I)(A)(2) *The state will provide additional data as well as guidance/trainings on how to access and use data and inform local programs about where to access needed data*

Needed Steps	Details	Status
(a) Create a COS report that includes percentages for child outcomes	The DODD researcher continued preparing COS data files to send to each local program quarterly. The following COS data sets were sent to each local program over the past year, along with additional data or explanations as requested: • A quarterly report containing children exiting January through March 2017 • A full fiscal year report for children exiting July 1, 2016 through June 30, 2017 • Quarterly reports containing children exiting July through September 2017 and October through December 2017	**Revised/ Complete**

Activity (I)(A)(3) *The COS training content will be revised to include any missing content areas in order to ensure that child outcomes statements on IFSPs are meaningful and derived from assessment information, and then are entered accurately into state data system*

Needed Steps	Details	Status
(b) Identify content missing from current training materials and revise as necessary	Through Phase 1 of the SOSC process, EI TA consultants learned that there is still a great deal of discomfort in the field in involving families in the COS and that COS scoring is still an issue. Dr. Gallen's three-part training series will address having conversations around the COS, and DODD staff will also keep these concepts in mind while revising COS trainings. Additionally, when rating IFSP outcomes for ongoing evaluation data, DODD staff also indicated whether each outcome was related to the other two COS areas. These data indicated that more of Ohio's IFSP outcomes are related to the state's SIMR area than the other two outcome areas.	**Complete**

Needed Steps	Details	Status
(c) Discuss with Ohio Department of Education (ODE) aligning Early Childhood tool development and training on assessment, outcomes and interventions	The EI Program manager has participated in work groups with ODE and several other state agencies working on standards for state of Ohio-approved trainings and infant and toddler standards, as well as trainer qualifications. Discussions specifically related to aligning tools and training on assessment, outcomes, and interventions continue between DODD and ODE. The Deputy Director at DODD responsible for EI also attends monthly cross-agency leadership meetings where topics related to early childhood professional development are discussed.	**Ongoing**

Improvement Strategy II: *Improve the Quality of IFSP outcomes to address family priorities related to child's acquisition and use of knowledge and skills*

Activity (II)(A)(1) The state researches/investigates resources related to the role of the parent in the team development of quality, individualized IFSP outcomes

Needed Steps	Details	Status
(d) Better utilize work done by DD council regarding "family outcomes" on IFSP	DODD continued to collaborate with the Ohio DD Council as the council began to implement its grant project (Project TREES) designed to increase family presence and family outcomes within the EI system. Over the past year, a multi-level stakeholder advisory committee was formed and met quarterly. Eight pilot sites were selected to explore improvements to EI service delivery directly related to supporting families involved in EI. Focus groups consisting of families and professionals were held at all eight sites, with the biggest takeaway being the need for increased attention to the family's overall quality of life and supporting family resiliency.	**Complete**

(II)(A)(2) The state develops resources and trainings to increase family engagement and involvement in the IFSP development process

Needed Steps	Details	Status
(a) Develop materials for Service Coordinators, providers and parent mentors or advocates to talk to families about family engagement and involvement in EI, including the assessment and IFSP development process.	Continued use of: • "What is Ohio Early Intervention?" video • "IFSP: It's All about the Process" training module • "Family-Centered Practices" trainings • Service Coordinator Community of Practice A module for parents will also be available in summer 2018. Additionally, information regarding family needs throughout the IFSP process and their experiences in EI, in general, continues to be gathered from the eight pilot sites chosen for Project TREES.	**Complete**

Activity (II)(B)(1) The state adopts tool(s) or mechanisms that will be used consistently by both state (data, monitoring and technical assistance/training) staff and local EI providers to analyze the extent to which IFSP outcomes are functional, family directed, based on child and family assessments, and address identified needs related to acquisition and use of knowledge and skills

Needed Steps	Details	Status
(a) Add/modify data collection mechanisms around IFSP outcomes to ensure complete/accurate data are available to analyze	Bug fixes have taken priority over new enhancements and development to the data system. DODD program staff have been working with IT staff, though, to ensure the data in the data system are consistent with changes to the rules and forms regarding the IFSP. After soliciting input from stakeholders, DODD will begin focusing on how to better track IFSP outcomes in EIDS.	**In progress**
(b) Develop or adopt tool(s) to determine the extent to which IFSP outcomes are functional, family-directed, and based on child and family assessments	The state continues to utilize the ECTA six-step criteria to evaluate the quality of IFSP outcomes, both in analyzing SSIP data and on an ongoing basis, and encourages local programs to do the same.	**Complete**
(c) Emphasize the development of family outcomes	The development of family outcomes continues to be the primary focus of Project TREES. The functional assessment course also incorporates content specifically addressing acquisition and use of knowledge and skills. Of IFSP outcomes reviewed for the SSIP, 10% were family-focused outcomes, which is a significant increase from previous years.	**Complete**
(d) Revise current or create new resources to be used for training, TA, monitoring, data collection, and family engagement	The "IFSP: It's All about the Process" module continues to be available. Additionally, the Parent module will be released in summer 2018.	**Complete**

Improvement Strategy III: Increase access to and delivery of needed evidence-based services

Activity (III)(A)(1) The state and local providers identify gaps in availability of core teams

Needed Steps	Details	Status
(c) Ensure quality of funding source data	Quality funding source data has become even more important with the implementation of Ohio's new SOP rule in August 2017. Statewide trainings for Service Coordinators regarding this rule have been focused on the importance of accurately tracking funding sources and the role of the Service Coordinator in coordinating and explaining funding to families. DODD staff have also begun monitoring the implementation of the SOP rule in each local program through the verification of records, and plan to provide tailored feedback and TA, as needed.	**Complete**

(III)(A)(2) The state will identify additional, feasible cost effective EI financing options and opportunities, including other statewide early childhood initiatives

Needed Steps	Details	Status
(c) Develop interagency agreement (IAA) to reflect decisions	DODD and the Ohio Department of Medicaid (ODM) have been working through the OSEP Methods checklist to create an operating protocol between the agencies that reflects the checklist requirements. The agencies plan to have the work completed by summer 2018.	**In progress**
(d) Identify other statewide early childhood initiatives that could be a resource or partner in EI financing	This work has been put on hold, given the current national healthcare and Medicaid uncertainties.	**On Hold**
(f) Determine access to Medicaid, public insurance, family cost share, etc.	The revised SOP rule articulates the family cost participation requirements and the current requirements related to use of public and private insurance.	**Complete**
(g) Consider which EI activities/practices are reimbursed	Medicaid continues to cover services to children birth through age three under their Early and Periodic Screening, Diagnostic and Treatment (EPSDT) requirements as established under the state plan. The implemented SOP rule identifies requirements for utilizing Medicaid as a funding source.	**Complete**

Activity (III)(B)(1) The state develops resources and trainings for delivering quality, evidence-based interventions to support child acquisition and use of knowledge and skills

Needed Steps	Details	Status
(a) Develop resources and training that include content that supports the implementation of evidence-based intervention	Numerous resources and trainings related to utilizing EBPs within the EI system, including those related to coaching; family-centered practices; natural learning environments; using a primary service provider approach; and an overview of EBPs in EI, continue to be offered to and utilized by the field.	**Complete**
(c) Provide guidance (including training, TA and monitoring) on how to simultaneously meet Part C of IDEA requirements and engage in evidence-based EI practices	All resources, trainings, and guidance materials are more frequently reviewed and edited by staff representing both Data and Monitoring and Training and TA teams. Trainings are also updated annually (as needed) by the EI Training Coordinator along with the TA and Training team.	**Complete**

Activities Needed to Meet Intermediate Outcomes

In addition to the ongoing activities needed to meet short-term outcomes, DODD began or continued working on the steps that are part of activities needed to meet the state's intermediate outcomes, expected to be achieved by June 2019, as described in the subsequent tables.

Improvement Strategy I: *Increase the quality of child and family assessments to develop meaningful initial and exit COS statements*

> **(I)(B)(1)** *Service Coordinators and assessors, at a minimum, will be trained on the child and family assessment requirements and the COS process*

Needed Steps	Details	Status
(a) Training and resources will be easily accessible and provided through a variety of mechanisms	Resources related to child and family assessment and the COS continue to be accessible to local programs: • Three cohorts are participating in Dr. Jung's, "Effective Functional Assessment in Early Intervention" course. This course will also be moved to an online self-paced course in SFY19. • Dr. Gallen's three-part series, including how to use motivational interviewing strategies for COS conversations, is available via facilitated webinar • Debbie Ashley's trainings on family-centered practices • Links to the DaSy COS modules are included in each edition of the Ohio Part C Coordinator's bi-weekly communication • Local programs can contact their EI TA consultant to schedule a training about the COS process as a whole or about engaging families in the COS process. The above trainings, including how to access them, are also included in Ohio's EI Training handbook which is available on the state's EI website.	**Complete**
(b) Include guidance about what types of information should be entered on the IFSP that can be easily translated to the COS statements chosen in the data system	When the new rules and forms are implemented, though the COS will continue to be integrated into the IFSP form, there will be an option for a standalone COS page to capture COS ratings completed any time other than an annual IFSP. This will be particularly beneficial in capturing Exit COS statements. Updates to the COS section will include adding the COS statements directly to the form so the summary information and chosen statements are all in one place.	**In progress**
(c) Utilize the same materials/guidance across state teams with local staff to promote consistency of understanding	All of the materials described in (I)(B)(1)(a) are available to local and state staff, with the DaSy COS modules being a prerequisite for the in-person COS trainings. DODD is also in the process of gathering information to update the in-person trainings to make them even more useful. Additionally, staff across the state use the IFSP form to ensure consistent collection of assessment and COS data, utilizing age anchoring and COS statements adapted from Maryland for COS ratings.	**Complete**

Improvement Strategy II: *Improve the Quality of IFSP outcomes to address family priorities related to child's acquisition and use of knowledge and skills*

(II)(C)(1) *Implement training for IFSP team members, including parents, about writing high quality individualized IFSP outcomes*

Needed Steps	Details	Status
(a) Include process for operationalizing EBEI practices (Mission and Key Principles and DEC recommended practices) for fostering true partnerships with parents and other primary caregivers, in the development of IFSP outcomes	The FIPP Case modules were designed to increase understanding of the EI Mission and Key Principles across the board. The "IFSP: It's All about the Process" module helps to paint a clear picture of the full IFSP process, including fostering partnerships with parents, and ultimately developing meaningful IFSP outcomes. Additionally, Debbie Ashley's family-centered practice trainings provide information around evidence-based practices aimed at supporting and involving families throughout EI-related activities.	**Complete**
(b) Utilize a variety of resources to support diverse needs and promote EI professional competence and mastery.	In addition to the numerous trainings that are broadly available to the EI field in Ohio, the state has engaged in activities and processes to target more specific audiences to promote competence and mastery, as needed: • The SOSC process was designed specifically to support Service Coordinators in performing their mandated responsibilities as part of an EI team • The New Service Coordinator COP supports new Service Coordinators on topics chosen by the cohort • "Donuts with Di" provides additional support to Ohio's assessors from DODD staff as well as other content experts. Improved assessments will ultimately lead to higher quality IFSP outcomes.	**Complete**

Improvement Strategy III: *Increase access to and delivery of needed evidence-based services*

(III)(C)(1) *Evaluate impact of change in payment methodology and allocation*

Needed Steps	Details	Status
(a) Evaluate the impact of any financing structure changes so counties/communities don't lose services	These activities were embedded within the development and implementation of the of the SOP rule. Ohio's EI funding structure was updated and clarified. DODD will perform ongoing monitoring of services listed on the IFSP, including funding sources, as well as service delivery going forward. The SOP rule	**Complete**

Needed Steps	Details	Status
(b) Evaluate potential financing structures (grant, contracts, combination)	also requires that all providers of EI services under contract with DODD must provide EI services in accordance the provider agreement that requires compliance with all state and federal Part C requirements.	
(c) Determine whether a cost share plan would need to be established for system of payments	This is described in Ohio's SOP rule. Each child in need of EI services in Ohio is guaranteed up to 55 hours of EI services per IFSP year at no cost to the family. If a child is in need of more than 55 hours of services, EI services may be financed through the family (including potential parent cost participation) depending on the family's determined ability to pay.	**Complete**
(d) Evaluate methods of billing (e.g., centralized billing, provider direct billing) and simplify system to accommodate the maximum number of providers and payors	As described in (III)(C)(1)(a) and (III)(C)(1)(b), Ohio's SOP rule clarifies Ohio's EI funding structure and requirements for EI service providers. During the drafting of the SOP rule, methods of billing and simplification of the system were discussed with stakeholders. The SOP rule reflects adherence to the federal Part C requirements as well as clarity around the specifics for funding sources.	**Complete**

(III)(C)(2) *Evaluate payment options for services that have no cost to parents (SC, evaluation and assessment)*

Needed Steps	Details	Status
(a) Examine payment options for intake, child find, public awareness and other non-direct system services and evaluate impact of change in payment methodology	No changes were made to the funding formula and administration locally of evaluation, assessment, service coordination, and the implementation of procedural safeguards. DODD is also continuing to provide local programs with funding for local child find efforts while also supporting a new (as of early 2018) statewide marketing effort for child find.	**Complete**
(b) Evaluate payment options for EI services that may have a family cost share (e.g., Medicaid, private insurance, Payor of Last Resort)	As described in (III)(C)(1)(c), EI services may be financed through parent cost participation, depending on the family's ability to pay, if a child needs more than 55 hours of services during an IFSP year.	**Complete**

(III)(D)(1) *Offer a variety of training and technical assistance opportunities for implementation of EBPs for acquisition and use of knowledge and skills*

Needed Steps	Details	Status
(a) Use and promote DEC recommended practices	DODD continues to offer and, for some local staff, require foundational courses that describe evidence-based practices in EI generally. Additionally, DEC RPs, including how they apply in a more targeted manner, are incorporated into all other relevant trainings. The Ohio DEC also provided a training to the EI field in March 2018 regarding DEC RPs related to assessment practices. Over 25 local programs participated in the training and a statewide follow up session will be included in an upcoming session of "Donuts with Di."	**Complete**
(b) Explore several methods and mechanisms for communicating with the EI field regarding service delivery on a consistent basis	To reach the broadest audience, the Part C Coordinator's bi-weekly newsletter has included guidance around best practice regarding coaching, teaming, and the role of PSP and SSP as well as to announce any new trainings related to service delivery. More targeted assistance is provided, as well. For example, the state has delivered targeted TA to providers of services to children who are deaf or blind regarding the functional assessment, ECTA six-step criteria for IFSP outcomes, and teaming. Additionally, initiatives such as "Donuts with Di" have been created to provide topic-specific guidance, as needed.	**Complete**
(c) Initiate conversations with higher education about incorporation of EBEI interventions for supporting acquisition and use of knowledge and skills	Ohio's EI Program Manager and an EI TA Consultant are part of a workgroup for the state's Early Childhood Advisory Council (ECAC). The group has started a conversation with higher education about how to graduate high quality personnel who can get their DS certification upon graduation.	**In progress**
(d) Examine how and when evidence-based EI services may be provided virtually	Through the SOCOG pilot, the provision of EI services via technology to participating local programs has increased. The state continues to consider how these strategies can be implemented in other areas with limited provider access.	**In progress**

Outputs Accomplished

Ohio accomplished numerous outputs over the last year as a result of the implementation of the previously-described activities in each improvement strategy area. See the table below for a list of outputs that resulted as Ohio has worked toward achieving its intended short-term and intermediate outcomes over the past year.

Improvement Strategy	Outputs
(I) Increase the quality of child and family assessments to develop meaningful initial and exit COS Statements	- COS Report specifications and quarterly COS reports - Ongoing data reflecting quality of functional assessments - Ongoing data from families reflecting their understanding of their child's strengths, needs, and functioning - Information regarding Service Coordinators' role in the assessment process, including the COS - Dr. Gallen's "Tough Conversations: Making the Most of Difficult Situations" series - Data reflecting the frequency with which IFSP outcomes address each child outcome area - Dr. Jung's "Effective Functional Assessment in Early Intervention" course
(II) Improve the quality of IFSP outcomes to address family priorities related to child's acquisition of knowledge and skills	- Ongoing data reflecting quality of IFSP outcomes - Information from focus groups from the eight pilot sites that are a part of Project TREES - Information regarding needed changes and additions to the collection of IFSP data in the data system
(III) Increase access to and delivery of needed evidence-based services	- Establishment of new funding structure for EI via the SOP rule - Increase in the number of contracts DODD has directly with EI service providers via the SOP rule - SOP forms - Ongoing data from families reflecting their understanding of their child's strengths, needs, and functioning - Establishment of methods and mechanisms for delivering EI services via technology as part of the SOCOG pilot

2(b) Stakeholder Involvement in SSIP Implementation

EI Advisory Council and Stakeholder Group

As in previous years, Ohio's EI Advisory Council and Stakeholder Group (the state's ICC plus a broader stakeholder group) was provided with updates and given the opportunity to provide meaningful input regarding the implementation of activities and status of outcomes that are part of the SSIP at its each of quarterly meetings. In May 2017, the group received a summary of the activities completed as part of Ohio's Phase III, Year 1 SSIP work. The August 2017 meeting included an announcement about the implementation of Ohio's new SOP rule, as well as a summary of training efforts related to the rule, and updates about the Parent and Physician modules. Updates regarding the SSIP at the November 2017 meeting were specific to the evaluation, as the group discussed data and was heavily involved in the

decision-making process regarding setting targets for each intermediate outcome evaluation question. The meeting that was scheduled to take place in February 2018 was postponed due to inclement weather. The SOSC process, which has been implemented parallel to the SSIP, but addresses some of the same primary topics, such as child outcomes, was discussed at each quarterly meeting, as well.

EI Program Updates Newsletter

Ohio communicates with and seeks feedback from its EI stakeholders more broadly through a newsletter compiled and sent by the Part C Coordinator every other week. These newsletters include updates about guidance, resources and materials, trainings, monitoring processes, the data system, and other important updates within the EI system in Ohio. In addition, feedback is also frequently sought from the field about implementation of new initiatives or proposed program changes. After completing and submitting Phase III, Year 1 of the SSIP, Ohio provided a detailed summary of the progress made over the course of the year in the newsletter, as well as a description of all the outcomes the state intended to achieve over the next several years. Since then, this newsletter has been utilized to inform the field about various implementation activities and resources related to the SSIP. The newsletter is designed primarily for local EI Contract Managers and FCFC coordinators, but other EI stakeholders, such as interventionists and county board superintendents, have also subscribed to the newsletter. Approximately 1,000 people receive this communication. All newsletters are also posted and archived on the EI website.

Other Stakeholder Involvement and Feedback

In addition to actively engaging the EI Advisory Council and Stakeholder Group and more broadly informing the EI field about SSIP-related resources and accomplishments via the bi-weekly newsletter, DODD also continued to receive meaningful feedback from groups of stakeholders regarding the ongoing implementation of the SSIP as needed. Specifically, the EI Advisory Council and Stakeholder group, along with the other stakeholders they represent, were given the opportunity to review and provide feedback regarding the Parent and Physician modules. Representatives from several local programs drafted the scenarios for and participated in making the video content of the Documentation Training activities. Stakeholders representing several different local programs, along with various DODD staff, also participated in a pilot training for Ohio's new SOP rule, and provided helpful input about the format and content that was incorporated prior to the launch of the regional trainings. Additionally, the SOSC process was first piloted with twelve local programs prior to the statewide implementation. Through the pilot and Phase I, local program staff actively participated in the SOSC process and provided important information about how well the Service Coordinator responsibilities related to parent's rights, evaluation and assessment, and the COS are being met in each local program. One of the primary discoveries from Phase I of the SOSC process was that Service Coordinators need additional support around explaining the COS to families and facilitating the team discussion about COS descriptors, which has been considered as DODD revises the state's COS training. Finally, local programs continue to collaborate with the state and one another through the SOCOG pilot, which is helping to increase access to services for participating local programs through newly formed core teams, as well as service delivery that occurs via technology.

Component #3 - Data on Implementation and Outcomes

3(a) Monitoring and Measuring Outputs to Assess the Effectiveness of the Implementation Plan

Aligning with Theory of Action

Each strand of action in Ohio's Theory of Action (See Section 1(a)) corresponds to one of the state's identified improvement strategies, which are structured to address the root causes identified in Phase I. The Theory of Action provides an overview of the intended outcomes. It presents an illustrative representation of how: Developing additional materials and tools at the state level will result in increased access to services and information at the local level; increased access to resources will lead to increased knowledge which will result in improved practice among local programs and providers; and improved practices will result in better engaging with and increasing confidence of families.

Together, achieving these short-term and intermediate outcomes will ultimately lead to improvement in Ohio's SIMR, the percentage of children served in EI in Ohio who demonstrate improved acquisition and use of knowledge and skills. In other words, Ohio's Theory of Action helps to convey the importance of first ensuring all necessary foundational knowledge is gained and foundational practices are utilized prior to successfully narrowing the focus more specifically on the SIMR. Because the questions in Ohio's Evaluation Plan are designed to assess whether the steps and activities needed to meet the outcomes are completed, and ultimately whether the outcomes are achieved, the Theory of Action broadly reflects all the components included in the evaluation.

Ongoing Outcome Data

In Ohio's Phase III, Year 1 SSIP submission, the state reported on the achievement of most of its intended short-term outcomes, which primarily involved increasing access to resources to improve the foundation of the EI system. Baseline data, including data sources, baseline measures, data collection, and data analyses were included for all but one of Ohio's intermediate outcomes, as well.

Over the past year, DODD, in consultation with the EI Advisory Council and Stakeholder group, established targets for each of the intermediate outcome evaluation items. For most items, the state determined the targets should reflect an increase of 5% of the total local programs, which rounded to an increase of four additional local programs meeting the benchmark, each year. The two exceptions were for the items regarding quality of IFSP outcomes and gaps in services/families' access to services. The target for the quality of IFSP outcomes items was set to increase by 10% of total local programs, which rounded to an increase of nine additional local programs meeting the benchmark per year. The targets for items regarding access to services were set at 100% each year. For items where fewer than the state's 88 local programs were included in the baseline measure, DODD used the denominator from the baseline for purposes of setting each year's target. Appendix A outlines the targets for all of the state's intermediate outcomes and the following tables provide this year's evaluation data. Results for the 2018 submission that are in bold and underlined text indicate that the target was met for that item.

Improvement Strategy I: *Increase the quality of child and family assessments to develop meaningful initial and exit COS statements*

> **Outcome (I)(B)** *Assessment teams conduct more thorough and functional child and family assessments to better identify the child's level of functioning and families have an increased understanding of how to support their child's development in the area of acquisition and use of knowledge and skills*

Evaluation Question[6]	Data Source	Benchmark	Number of Local Programs that Met Benchmark	
			2017 Submission (Baseline)	2018 Submission
(Q1) Are child and family assessments more thorough?	E&A Process Review Summary Questions	Score of at least 80% of the total possible points on the Functional Assessment review area (14 or higher out of a possible 17 points)	10 local programs (11%)	**21 local programs (24%)**
(Q2) Are children's levels of functioning better identified by the child and family assessment process?	E&A Process Review Summary Questions	E&A Process Review included information about: (5) Child/family engagement; (6) How independently the child participates in family preferred activities and routines; (7) The strength of social relationships	(5): 31 local programs (35%) (6): 24 local programs (27%) (7): 27 local programs (31%)	**(5): 47 local programs (53%)** **(6): 47 local programs (53%)** **(7): 50 local programs (57%)**
(Q3) Do families have a better understanding of their child's strengths, needs, and functioning regarding acquisition and use of knowledge and skills?	2016 and 2017 Ohio EI Family Questionnaire	95% of respondents answer that they agree or strongly agree that EI has helped them understand their child's strengths and needs in learning new things and gaining new skills	51 local programs (59% of respondent programs)	42 local programs (49% of respondent programs)

Data Collection and Analyses

(Q1) DODD utilized data collected via its E&A Process Review to establish a baseline for this item. Specifically, this review included a section regarding functional assessments with several items, worth

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[6] The following question that was previously Q4 for this outcome was determined to fit better with Outcome (III)(D), and thus baseline results for this item are included subsequently.

one to three points depending on the extent to which requirements were being met. For this year's submission, DODD TA consultants determined each local program's status regarding the items that were included in the Functional Assessment section of the E&A Process Review through typical ongoing interactions related to TA and the local programs' TA plans, as well as through record reviews. The table below includes the number and percent of local programs who were incorporating each individual component over the past two years.

E& A Review Item	2017 Submission (Baseline)		2018 Submission	
	# Yes	%	# Yes	%
(1) The E and A report reflects a real picture of the child and family and guides identification of functional outcomes.	55	63%	45	51%
(2) Assessors observed skills within daily routines and across routines	17	19%	26	30%
(3) Assessors gather and use family information about their interests, important people in their lives, their concerns, resources, what is and isn't working related to the child being able to fully participate in family preferred routines and activities (child and family focused)	45	51%	73	83%
(4) The E and A report includes: Recommendations for EI services with a focus on improving participation and access to family preferred activities and routines	26	30%	38	43%
Benchmark: (5) The E and A report includes: Information about (child/family) engagement	31	35%	47	53%
Benchmark: (6) The E and A report includes: Information about how independently the child participates in family preferred activities and routines.	24	27%	47	53%
Benchmark: (7) The E and A report includes: Information about the strength of social relationships.	27	31%	50	57%
Benchmark: At least 80% of the possible points	10	11%	21	24%

(Q2) Items 5, 6, and 7 from the table above were utilized to establish both the baseline and ongoing progress data for this measure. The number of local programs who met the benchmark for each of these areas increased from the baseline. This year, 47 local programs met the benchmark for items 5 and 6 and 50 for item 7, compared to 31 for item 5, 24 for item 6, and 27 for item 7 for last year's reporting.

(Q3) Ohio utilized the following item from its 2016 and 2017 Family Questionnaires to gather data for this measure: "Help Me Grow Early Intervention has made me better able to: Understand my child's strengths and needs in learning new things and gaining new skills." In 2016, 1,575 families responded to this item and 1,706 responded in 2017, representing 86 and 85 of Ohio's 88 local programs, respectively. While the percentage of local programs that met the benchmark for this item decreased from last year to this year, the total percentage of families statewide who responded positively to this item remained steady (93.71% last year, and 93.38% this year). Thus, the decline is likely primarily due to typical year-to-year variance among respondents. Ohio will continue to include this question on its annual Family Questionnaire for comparison across time.

Improvement Strategy II: *Improve the Quality of IFSP outcomes to address family priorities related to the child's acquisition and use of knowledge and skills*

> **Outcome (II)(C)** *IFSP outcomes are of higher quality, and better individualized to meet the family-identified priorities that address acquisition and use of knowledge and skills*

Evaluation Question	Data Source	Benchmark	Number of Local Programs that Met Benchmark	
			2017 Submission (Baseline)	2018 Submission
(Q1) Are IFSP outcomes of higher quality?	IFSP outcomes extracted from Early Track and rated by DODD staff using the ECTA six-step criteria	At least 80% of outcomes meet all six criteria	3 local programs (4%)	0 local programs (0%)
(Q2) Do IFSP outcomes better meet the family-identified priorities that address acquisition and use of knowledge and skills?		At least 80% of outcomes are related to acquisition and use of knowledge and skills[7]	49 local programs (58%)	**63 local programs (72%)**

Data Collection and Analyses

A representative sample of outcomes added to IFSPs that occurred between January and June of 2016 and 2017, as entered into the data system, was selected for DODD staff to review. For the 2016 selected outcomes (2017 SSIP Submission), EI TA consultants rated outcomes from local programs in their assigned region. For the 2017 selected outcomes (2018 SSIP Submission), the EI TA Consultants, along with data and monitoring team members, split into groups to rate randomly selected outcomes. A 95% confidence level and 25% confidence interval were used both years to determine the appropriate sample size for each local program. DODD utilized a 25% confidence interval so the number of outcomes reviewed was feasible given the entirety of staff workloads. Any outcomes deemed not ratable as entered into the data system were excluded from the sample. Outcomes from 85 of the 88 local programs were included for the 2017 submission, and 87 of 88 for the 2018 submission, with a total of 1,010 and 1,035 outcomes, respectively, rated. DODD staff utilized a data sheet to indicate whether the outcomes met each of the ECTA six-step criteria, as well as whether the outcomes were related to acquisition and use of knowledge and skills. The first table below includes the number and percent of local programs each year where at least 80% of the outcomes reviewed met each criterion, as well as all six criteria, and the number and percent where at least 80% of the outcomes addressed acquisition and use of knowledge and skills. While the percent of counties who had at least 80% of their outcomes meet all six criteria was lower than last year, the state saw improvement in five of the six criteria, as the total percent of outcomes that met each criterion increased. Additionally, an increased percent of reviewed outcomes met five or six of the criteria this year (see the second table that follows). Finally, the percent of local programs with ratable outcomes that had at least 80% of outcomes addressing acquisition and use of knowledge and skills increased from 58% last year to 72% this year.

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[7] Though Ohio's SIMR focuses on acquisition and use of knowledge and skills, the state believes the other child outcomes are equally as important in the overall scheme of its EI program and acknowledges that IFSP outcomes may address more than one of the child outcomes.

Number and Percent of Local Programs where 80% of Rated Outcomes Met Specified Criterion

Criterion	2017 Submission		2018 Submission	
	#	**%**	**#**	**%**
Necessary to meet family needs?	68	80%	77	89%
Reflects real life settings?	16	19%	14	16%
Discipline free?	74	87%	80	92%
Jargon free?	26	31%	42	48%
Emphasizes the positive?	65	76%	75	86%
Avoids passive words?	35	41%	53	61%
(Q1) Benchmark: Met all Six Criteria	3	4%	0	0%
(Q2) Benchmark: Outcomes that address acquisition and use of knowledge and skills, of total	49	58%	<u>**63**</u>	<u>**72%**</u>
Total Outcomes Rated	1,010		1,035	

Number of Reviewed Outcomes that Met Specified Number of Criteria

Number of Criteria	2017 Submission		2018 Submission	
	Number	**Percent**	**Number**	**Percent**
None	13	1%	0	0%
1 Criterion	22	2%	8	1%
2 Criteria	55	5%	32	3%
3 Criteria	131	13%	91	9%
4 Criteria	210	21%	178	17%
5 Criteria	297	29%	365	35%
6 Criteria	282	28%	361	35%
Total Outcomes Rated	**1,010**	**100%**	**1,035**	**100%**

Improvement Strategy III: *Increase access to and delivery of needed evidence-based services*

Outcome (III)(C) Gaps in services that impact acquisition and use of knowledge and skills are reduced, thus families have increased access to needed evidence-based EI services

Evaluation Question	Data Source	Benchmark	Number of Local Programs that Met Benchmark	
			2017 Submission (Baseline)	2018 Submission
(Q1) Have gaps in services that impact acquisition and use of knowledge and skills been reduced? **(Q2)** Do families have increased access to needed evidence-based EI services?	Self – report by local programs	Access to providers for "core" EI services	Number of local programs who indicated access to "core" services[8]: • Special Instruction: 84 (98%) • Speech: 82 (95%) • Occupational Therapy: 81 (94%) • Physical Therapy: 80 (93%)	N/A – Data collection and analyses on hold until next year due to implementation of a new SOP rule

Data Collection and Analysis

To establish a baseline for this item, a DODD EI Researcher utilized the EI Services Needs Assessments to determine the number of local programs with a provider available for each service. Data included the number of local programs that reported having at least one provider available within the local program to provide the specified EI service. As Ohio's new SOP rule was implemented in August 2017, the state focused efforts on ensuring the rule was completely understood and correctly implemented rather than requesting and analyzing new data in this area. Ultimately, the revised SOP mechanism is anticipated to improve local access to EI providers. Ongoing analyses related to availability of services will resume over the next year.

(III)(D) Practitioners better utilize evidence-based interventions that promote child engagement and independence and families have increased confidence in their ability to support the child's development related to acquisition and use of knowledge and skills.

Evaluation Question	Data Source	Benchmark	Number of Local Programs that Met Benchmark	
			2017 Submission (Baseline)	2018 Submission
(Q1) Do practitioners better utilize EBPs to promote child engagement and independence?	To be determined	To be determined	To be reported in Ohio's 2019 SSIP submission	

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[8] Service Coordination is also considered a core service; however, Ohio utilizes a dedicated Service Coordinator model and all children receive Service Coordination. As such, Service Coordination is not tracked separately as a service within Ohio's EI data system.

Evaluation Question	Data Source	Benchmark	Number of Local Programs that Met Benchmark	
			2017 Submission (Baseline)	**2018 Submission**
(Q2)[9] Do families have an increased ability to support their child's development regarding acquisition and use of knowledge and skills?	2016 and 2017 Ohio EI Family Questionnaire	95% of respondents answer that they agree or strongly agree that EI has made them better able to support their child in learning new things and gaining new skills	63 local programs (73% of respondent programs)	55 local programs (65% of respondent programs)

Data Collection and Analysis

(Q1) Activities related to practitioner use of EBPs to promote child engagement and independence began in July of 2017. However, DODD is still focusing on quality of assessment processes and IFSP outcomes, and, as discussed and agreed upon with the EI Advisory Council and Stakeholder group, will establish a baseline for this item that will be included in its 2019 SSIP submission.

(Q2) Ohio utilized the following item from its 2016 and 2017 Family Questionnaires to gather data for this evaluation measure: "Help Me Grow Early Intervention has made me better able to: Support my child in learning new things and gaining new skills." In 2016, 1,575 families responded to this item and 1,706 responded in 2017, representing 86 and 85 of Ohio's 88 local programs, respectively. While the percentage of local programs that met the benchmark for this item decreased from the 2017 submission to the 2018 submission, the total percentage of families statewide who responded positively to this item remained steady (95.37% last year, and 95.08% this year). Thus, the decline is likely primarily due to typical year-to-year variance among local program respondents. Ohio will continue to include this question on its annual Family Questionnaire for comparison across time.

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[9] This question was previously (Q4) under Outcome (I)(B). Ohio determined it fit better with this outcome and it replaced the following evaluation questions: "Do families have increased confidence in supporting improvement in their child's acquisition and use of knowledge and skills?" and "Do families have increased competence in supporting improvement in their child's acquisition and use of knowledge and skills?"

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Long-Term Outcomes: SIMR

> **SIMR: There is an increase in the percentage of infants and toddlers exiting Early Intervention who demonstrate improved acquisition and use of knowledge and skills**

Evaluation Question	Benchmark	Percent of Children who Met Benchmark			
		FFY13 (Baseline)	FFY14	FFY15	FFY16
(Q1) Have more infants and toddlers exiting Early Intervention demonstrated a substantial increase in the rate of growth in acquisition and use of knowledge and skills?	Percent of children who demonstrate substantial increases in rate of growth regarding acquisition and use of knowledge and skills (APR Indicator 3B, Summary Statement 1)	59.58%	62.16%	62.69%	62.08%

Data Collection and Analysis

Ohio collected data for its SIMR via the Child Outcomes Summary Form (COSF) and COS statements adopted from Maryland. These data were extracted from Ohio's Early Intervention Data System and analyzed to obtain percentages for each summary statement for all three outcome areas of Indicator 3 (Early Childhood Outcomes) of the APR. Data for Ohio's SIMR correspond to APR Indicator 3B, Summary Statement 1. See Section 5(d) for additional discussion about Ohio's SIMR area data.

3(b) How the State Demonstrated Progress and Made Modifications to the SSIP

Ohio built upon the completion of activities needed to achieve short-term outcomes, which focused on further identification of issues and increasing access to resources, to begin implementing activities needed to achieve intermediate outcomes, which primarily involve increasing knowledge and improving practice among local programs and providers. DODD continued to provide training opportunities related to functional assessments, IFSP outcomes, and service provision, and continued to prioritize initiatives that promote equal access to needed services statewide. Ohio also offered new professional development options over the past year, and continued to update current and develop new trainings in these areas, as well.

To assess progress toward achieving its intermediate outcomes, Ohio analyzed data related to the evaluation questions, including families' levels of understanding of their role in the IFSP process and in understanding and supporting their child's development; how well assessment teams are conducting functional assessments; and to what extent IFSP teams are writing functional outcomes. As described in Section 3(a), the state has made progress in completing functional assessments and writing quality IFSP outcomes, providing support for the overall direction of the plan. Additional details regarding demonstrated progress and planned next steps are included in Section 3(a), as well. Analyses regarding availability of and access to services will resume next year and baseline data to measure provider utilization of evidence-based interventions will be collected and reported in Ohio's next SSIP submission.

As described in Section 1(e), Ohio will continue implementing its SSIP with very few changes from the state's Action Plan (See Appendix B of Ohio's Phase II SSIP submission). The state's short term outcomes have been achieved. DODD expects all of the intermediate outcomes to be achieved by June of 2019, and the state will perform ongoing analyses related to all of these measures throughout that time to monitor progress that has occurred since baseline data were collected. As the ongoing analyses are performed, the state will continuously consider essential next steps and evaluate whether modifications need to be made to implementation and improvement strategies or the state's intended outcomes.

3(c) Stakeholder Involvement in the SSIP Evaluation

EI Advisory Council and Stakeholder Meetings

Ohio utilized its quarterly EI Advisory Council and Stakeholder meetings to provide updates to and formally seek input from stakeholders to assist in the implementation of and making decisions regarding the progress of the state's SSIP evaluation. A portion of several meetings was dedicated to the SSIP evaluation, with varying stakeholder input as described subsequently.

May 17, 2017

At the May 2017 EI Advisory Council and Stakeholder meeting, the group was provided with a summary of activities completed, outcomes achieved, and data analyzed as part of Ohio's Phase III, Year 1 SSIP submission. Following the summary, the data utilized to establish baselines for Ohio's intermediate outcomes, including benchmarks set and number of counties who met each benchmark, were presented and discussed in detail. Stakeholders were informed that these analyses would be performed on an annual basis to track the state's progress in achieving intended outcomes and provided the opportunity to offer any suggestions regarding data collection and analyses. The group was prompted for input regarding percentage of counties who should be meeting each benchmark by the end of the SSIP reporting as well as data collection methods for ongoing data needs.

August 15, 2017

At the time of the August meeting, Ohio's EI program was primarily focused on several of the major changes and transitions occurring at the time, including the implementation of the state's new System of Payments Rule and the transition of the EI portion of the state's data system. While there were no discussions about or activities specifically related to the SSIP evaluation, the implementation of the SOP rule has and will continue to impact equitable access to EI services statewide, which is part of Improvement Strategy 3. Additionally, meeting attendees were informed that the next meeting would include a discussion about Ohio's targets for its intermediate outcome evaluation questions.

November 14, 2017

DODD provided an overview of the benchmark data for the evaluation questions related to the state's intermediate outcomes at the November 2017 meeting and explained the importance of ongoing data collection and analysis, as well as the need to set targets that were ambitious, but achievable, for each evaluation question. The group discussed the targets and decided that for most of the evaluation items the targets should be an increase of 5% of the total counties in the state each year, which rounds to an increase of four counties each year. Attendees suggested that for the item regarding quality of IFSP outcomes, the increase each year should be 10% of the total counties, which rounds to an increase of nine counties per year. The group also agreed to a target of 100% for the indicators concerning access to

EI services and were in favor of postponing the collection and analysis of baseline data and target setting for the indicator regarding practitioner use of evidence-based practices.

Ongoing Data Collection for Intermediate Outcomes

Ohio's EI stakeholders were meaningfully involved in the collection of baseline data associated with the intended intermediate outcomes, and remained just as involved in the collection of the needed ongoing data. EI TA Consultants drew on their conversations and interactions with local program staff, as well as information obtained through record reviews, to determine how well functional assessments were being conducted across the state. More than 1,700 families in EI responded to Ohio's 2017 Family Questionnaire, including whether EI helped them better understand their child's strengths, needs, and functioning; whether EI helped them better support their child's development; and how they could be better engaged in the program. The results of this item, and all Family Questionnaire responses, were distributed to each local program's EI Contract Manager and FCFC Coordinator. Additionally, DODD staff again completed ratings of a representative sample of IFSP outcomes, all of which had been documented by local program staff. As DODD completes ongoing evaluation analyses, data will continue to be shared and discussed with stakeholders, including whether targets are being met, whether any modifications should be made, and how the state is progressing toward meeting its SIMR.

Component #4 - Data Quality Issues

4(a) Data Limitations Regarding Progress in Implementing the SSIP

A description of potential limitations in the data collection and analyses for evaluation questions related to intermediate outcomes follows. See Section 3(a) for a more thorough description of the data.

Functional Assessment Data

Ohio collected baseline data regarding the quality of functional assessments in each local program through the E&A Process Review. This year, each EI TA consultant answered the same questions from the Functional Assessment review area of the E&A Process for each local program to which they are assigned based on their interactions with the local program over the past year. They gathered information via phone calls, emails, record reviews, and in-person visits and utilized the same criteria to determine whether each particular component of the functional assessment was consistently being implemented or utilized in each local program.

Ohio's Family Questionnaire

DODD encountered delays in distributing its 2016 Family Questionnaire, likely contributing to a lower response rate. The state resolved this issue in 2017, and saw an increase in the questionnaire response rate. As always, the responses were based on parent perception and understanding of the questions. However, responses parents provided on the open-ended items of the questionnaire support parents' reports that they have a better understanding of their child's strengths, needs, and functioning and ability to support their child's development in learning new things and gaining new skills.

IFSP Outcomes Data

As data system users sometimes do not enter outcomes into the data system exactly as they are written on the physical IFSP, DODD excluded outcomes that were clearly not ratable as entered into the data system (e.g., the outcome was entered simply as "Outcome 1") from the sample both years. To gather baseline data, the six EI TA consultants completed outcomes ratings separately. For this year's ratings, the EI TA consultants, along with the rest of the Ohio EI team, divided into five separate groups of two to three people to complete the ratings. Because each group reviewed separate outcomes, there was potential for differences between groups, but having the outcomes reviewed in groups was intended to reduce subjectivity as much as possible. Additionally, these outcomes were reviewed in isolation, so the groups lacked context, such as information from the functional assessment, when completing the ratings. Going forward, Ohio will consider how to continue to reduce the possibility of subjectivity as well as how to include additional context when looking at the quality of IFSP outcomes.

4(b) Data Limitations Related to the SIMR

Ohio changed its manner for collecting Child Outcomes data in January 2015 in order to increase the number of children for whom COS data were being collected and to improve the accuracy of the data. Prior to the change, Ohio used the COSF (See Appendix E of Ohio's Phase III, Year 1 SSIP submission) to collect child outcomes data. Beginning in January 2015, the Child Outcomes Summary process was integrated into the child and family assessment process, at which time Early Track was updated, as well, to collect Child Outcomes Summary statements (See Appendix F of Ohio's Phase III, Year 1 SSIP submission) for each of the three outcome areas. Though these changes are intended to improve data

quality in the long term, it created data quality challenges for reporting in the short-term, as it's difficult to draw meaningful conclusions through the transition period. Because Ohio chose one of the child outcomes indicators as its SIMR, these data quality issues are pertinent to the state's SIMR, as well.

These challenges continue to become less significant over time as fewer and fewer children have initial and exit COS ratings completed using different mechanisms and as IFSP teams continue to better understand the COS process. For FFY14 reporting, Ohio chose to only include children who had both their entry and exit COS ratings completed using the COSF, as the COS process was still very new at that time. For FFY15 and FFY16, Ohio included both children with entry COS ratings completed using the COSF and those with entry COS ratings completed using the new COS process. Approximately half of the children had COS ratings completed using each method for the FFY15 reporting, but by FFY16, nearly 90% of children included in the reporting had both their entry and exit scores completed using the new COS process. Ohio has also emphasized the COS through training and technical assistance since that time with the intent to improve the accuracy of the COS ratings.

Component #5 - Progress toward Achieving Intended Improvements

5(a) Infrastructure Changes
Through the state's SSIP work, Ohio continued to work toward achieving activities intended to improve the state's Accountability/Monitoring, Data, Fiscal, Governance, Professional Development, Quality Standards, and Technical Assistance systems, which contribute to improvements across several improvement strategy areas. As enhancements in these areas address the root causes identified in Phase I, they have collectively led to increases in, and will ultimately lead to achievement of, Ohio's SIMR. See below for more details about progress made in each infrastructure area over the past year.

Governance
Ohio continues to reap the benefits of its Part C Lead Agency transition. With ongoing support from leadership and continuous improvement in the collaboration among team members, DODD is able to efficiently and effectively monitor, communicate with, and provide the needed resources, technical assistance, and other support to the state's local programs. Over the last year, the state has also worked to finalize tasks related to the agency transition as well as collaborated with ODH regarding the transition of the state's EI and Home Visiting Central Intake system and the EI portion of the data system.

While undertakings related to the lead agency change are largely complete, the transition of the EI rules is still in progress. As described in Section 1(b), DODD, with input from a wide array of stakeholders, has been working to transition the EI rules from ODH to DODD. Drafts of the EI rules are in the final stages, and Ohio plans to implement these rules and the relevant updated forms as a package in the summer or autumn 2018.

Additionally, Ohio's EI and Home Visiting Central Intake system transitioned from several locally run entities to one central site in August 2017. Since the implementation of the new central site, DODD has been working closely with ODH to ensure Central Intake is operating as smoothly as possible. Program leadership team members, the data and monitoring team, and the EI TA consultants have all contributed to the supervision, monitoring, troubleshooting, and training for the new Central Intake site.

Accountability/Monitoring
Over the past year, Ohio developed monitoring standards for its new SOP rule and has begun verifying documentation from each local program to ensure appropriate coordination of funding. Additionally, the SOSC process has been a mechanism for examining specific service coordination responsibilities in depth, including those related to the COS process, and to begin to address identified needs as well as any related noncompliance issues. The state also ensured that resources related to the Data and Monitoring Road show completed in late 2017 were made available on the state's EI website so the field has continual access to needed data and monitoring information. In addition to the Data and Monitoring Road Show resources, DODD continues to utilize its EI website to make materials related to the SOP rule and SOSC process, as well as various other monitoring resources, available to the field.

Data
Program and IT staff continued to work diligently to transition the EI data system from ODH to DODD and collaborated with their counterparts at ODH to ensure consistent functionality of the data system for the end users. In August of 2017, the transition was finalized, and DODD launched a version of the

data system that encompassed only EI data components. Program staff updated specifications for COS reports that will allow local programs to monitor their COS data on a regular basis and, with IT staff, began gathering requirements to enhance its IFSP data collection, including increasing data collection around IFSP outcomes so state and local staff can more effectively monitor and make improvements to the outcomes. DODD program staff and IT also began working to ensure the data system functions are consistent with the new EI rules when they are released, as well as to resolve long-standing bugs and make enhancements to the new version of the data system.

The implementation of the new EI rules will also enhance collection of COS data in a couple of ways. First, the COS statements currently only chosen in the data system will be added to the COS section of the IFSP form so that IFSP teams can choose the appropriate statement directly on the form. Additionally, the updated IFSP form will include a form specific to the exit COS. Together, these changes will improve both the data quality and the percentage of children who have COS data that can be analyzed and included in APR and SSIP reporting.

Fiscal
The predominant change within Ohio's fiscal system was the implementation of the state's new SOP rule in August 2017. The new rule requires that the ability to pay be determined for all families at entry into EI, and guarantees up to 55 hours of EI services at no cost to the family, for families who are eligible and in need of EI services, regardless of the family's ability to pay. With the implementation of Ohio's SOP rule, the state made significant progress in ensuring all families of eligible infants and toddlers have equitable access to EI services.

Professional Development
Ohio continues to develop trainings and resources to educate the EI field in Ohio. Several professional development opportunities related to the state's outcomes and the SIMR were developed or continued over the past year, including the Parent and Physician modules; Robert Gallen's motivational interviewing trainings, including one specific to the COS; Debbie Ashley's Family-Centered Practices webinar series; and Lee Ann Jung's Functional Assessment course. Other initiatives that incorporate content related to Ohio's SSIP work include the Service Coordination Community of Practice and "Donuts with Di."

As Ohio continues to gather data related to its SSIP outcomes, specifically regarding functional assessments, IFSP outcomes, and the SOP, the state will also identify both statewide and county-specific needs in these areas and TA and training opportunities will be developed or adjusted accordingly. As a primary focus of Ohio's current SSIP work is to facilitate increased knowledge, and ultimately improved practices, among its EI field, these professional development opportunities, collectively, are essential to achieving the state's intended intermediate outcomes.

Quality Standards
Ohio continuously updates and creates new trainings and guidance to ensure the field has access to the best and most up-to-date information possible, all of which are made available on the state's EI website. Related to quality standards, DODD developed new monitoring standards and verification criteria in early 2018 to support Ohio's SOP rule. DODD is also collaborating with ODE to draft comprehensive guidance documents regarding the transition from Part C to Part B, which outline program roles and responsibilities. These documents, once finalized, will provide the foundation for a statewide training on transition. Additionally, DODD staff are working on a comprehensive Service Coordinator training

that incorporates monitoring components such as verification standards. Finally, as part of the Documentation training, DODD staff created a case note checklist to help EI professionals ensure that their documentation reflects both regulatory requirements and best practice.

Technical Assistance

In addition to supporting local programs through the typical TA plans, as well as providing other targeted support, as needed, the TA and Training team began Phase I of the three-phase SOSC process. The consultants gathered information about the Service Coordinator responsibilities related to parent's rights, evaluation and assessment, and the COS process through onsite visits including observations and interviews, data analyses, and record reviews. The consultants, with input from the local programs, then developed individualized TA plans to support each local program in implementing the Service Coordinator Responsibilities that are the focus of Phase I of the SOSC process and address any specific concerns identified throughout this process. The state's Principles of Service Coordination Training was updated to reflect needs identified in the SOSC process and training modules are scheduled to be released in summer of 2018.

In addition to routine TA and the additional guidance provided through the SOSC process, the EI Resource Manager has been providing significant support to local programs regarding the state's new SOP. As verification of records from each local program is completed over the coming months, additional TA needs will undoubtedly be identified and addressed as such.

5(b) Evidence-Based Practices

Both data related to intermediate outcomes and responses directly from families suggest that Ohio's implementation of select EBPs, as described in Section 1(c), is having the desired effects. Specifically, the functional assessment data included in Section 3(a) show that a greater number of local programs are completing functional assessments, including observing families within daily routines and across settings; gathering information about the interests, concerns, resources, and routines of the families; and obtaining information about the strength of social relationships. The IFSP outcomes data, also described in Section 3(a), provide evidence that practitioners and families are collaborating to address priorities and concerns, identify resources, exchange knowledge, and create outcomes that address the needs of the child and family. Additionally, Ohio continues to receive confirmation that EBPs, both those related to its SSIP and more generally, are being carried out as intended, directly from families via their responses to the state's annual Family Questionnaire. Further, this direct feedback from families indicates that the implementation of EBPs is having the desired effect of increasing families' confidence and competence. Examples of direct quotes from families received via Ohio's 2017 Family Questionnaire follow.

> ## Direct Quotes from Ohio's Families – Ohio's 2017 Family Questionnaire
>
> ### What in Early Intervention has worked well with your family?
> *"From the moment we had our initial assessment I felt as though there was a team of people who were there to help us meet the needs of our daughter. At one point I looked around my living room and had 4 other people there who were listening to our needs and assuring us they would do whatever they could to help. I felt extremely supported and validated."*
>
> *"EI has been very accommodating to the changing needs of our family. My oldest started preschool and I was pregnant and all providers were willing to adjust our scheduled times in order to meet our needs. Also, when our affected son fell behind, our care plan was as immediately changed and services were coordinated to accommodate speech therapy."*
>
> *"Visits occurring in home less chaotic than office/therapy sessions. Made excellent suggestions that improved family life/routines not necessarily related to development concerns (bedtime routines)."*
>
> ### What part of Early Intervention has had the biggest impact for your family?
> *"The support from the team at EI has been amazing. I feel much more confident as a parent and know strategies that will work for my son."*
>
> *"...Without her perspective and professional opinion, I don't think I would have had the awareness or confidence to make the change. She is now at the [child care center] and she is THRIVING. I am thankful every day that she advocated for my daughter, I truly think that it has changed the trajectory of her life. Working with the team also helped me understand more context for what I need to do for my daughter. That has had a huge impact on what I have been driven to do for her. They also made ME feel supported and much less alone in the process of learning about her issues."*

5(c) Outcomes

Ohio continues to make progress toward achieving its objectives with only minor adjustments to the state's original plan, primarily including the continuation of some of the short-term activities. Ohio successfully implemented the majority of its intended short-term outcomes, as reported in last year's SSIP submission, and has made significant progress in the implementation of activities needed to meet intermediate outcomes, as outlined in Section 3(b). The state continues to make additional resources related to conducting functional assessments, developing quality IFSP outcomes, and accessing and delivering services available to its EI field. Additionally, Ohio has begun carrying out activities with the intent to increase knowledge and improve practice among local programs and providers in these areas.

As described in Section 3(a), DODD again collected and analyzed data related to most of the state's intermediate outcomes, and will continue to do so over the next couple of years to monitor progress in these areas. This year's data indicated improvements in functional assessments and IFSP outcomes that address acquisition and use of knowledge and skills.

5(d) Measurable Improvements in the SIMR

Because Ohio's SIMR focuses on the population of children in EI rather than a subset, the baseline data and targets for Ohio's SIMR correspond to those established for the state's APR. As suggested by the EI Advisory Council and Stakeholder Group, targets established for each child outcome increase slowly over time, to ensure that they remain rigorous, yet achievable. Targets through FFY2018 for the chosen outcome, and results where applicable, are as follows:

FFY2014 through FFY2018 Targets and Results: Percent of Infants and Toddlers with IFSPs Who Demonstrate Improved Acquisition and Use of Knowledge and Skills

FFY	2013 (Baseline)	2014	2015	2016	2017	2018
Target	58.00%	60.00%	61.00%	62.00%	63.00%	64.00%
Actual	59.58%	62.16%	62.69%	62.08%		

In FFY13, 59.58% of children had a substantially increased rate of growth in the state's chosen outcome area, acquiring and using knowledge and skills, which served as the state's baseline. This percentage increased to 62.16% in FFY14, and remained steady in FFY15 and FFY16 (62.69% and 62.08%, respectively).

While the percentage in Ohio's SIMR area has not changed the last several years, the state is confident that the integration of the COS process into the IFSP form and process, as well as the increased focus on the COS, have led to higher quality, more accurate COS data. With continued improvement efforts through SSIP-related work, and more generally focusing on the COS, Ohio expects to move closer to its ultimate SIMR target of 64% for this indicator by FFY18.

Component #6 - Plans for Next Year

6(a) Additional Activities to be Implemented

Several of the activities needed to meet intermediate outcomes described in Section 2(a) will continue throughout the next year. See the table below for the activities that will be continuing along with the planned timeline for completion.

Activities to Meet Outcomes	Timelines
(I)(B)(1) Service Coordinators and assessors, at a minimum, will be trained on the child and family assessment requirements and the COS process	July 2016 to June 2018
(II)(C)(1) Implement training for IFSP team members, including parents, about writing high quality individualized IFSP outcomes	
(III)(C)(2) Evaluate payment options for services that have no cost to parents (SC, evaluation and assessment)	January 2017 to June 2019
(III)(D)(1) Offer a variety of training and technical assistance opportunities for implementation of evidence-based practices for acquisition and use of knowledge and skills	July 2017 to June 2019

Additionally, through continued data analyses and monitoring processes, Ohio will utilize feedback loops to adjust activities in each improvement strategy area as necessary. The state will continue to assess the extent to which implemented strategies and activities are making the intended impact and further identify areas of weakness. Trainings, resources, TA, and coaching for the EI field will continue to be adapted or developed to meet any additional identified needs and ensure continued improvement to move the state closer to achieving its SIMR. For each of the three improvement strategy areas, Ohio included the following activity: ((I)(B)(2), (II)(C)(1), and (III)(D)(2)) "Implement continued or additional training and technical assistance, identified as needed through data analyses and monitoring processes." The table below includes the specific steps that will be taken to complete this activity in each improvement strategy area:

Improvement Strategy I: *Increase the quality of child and family assessments to develop meaningful initial and exit COS statements*

Activity	Steps Needed to Implement Activity	Timelines
(I)(B)(2) Implement continued or additional training and technical assistance, identified as needed through data analyses and monitoring processes	**(a)** Perform analyses on the quality of the child outcomes data, using the same methods OSEP uses in making state determinations, and provide feedback to each county	July 2018 to June 2019
	(b) Identify programs in need of TA to improve COS data quality	
	(c) Update all training materials and resources as necessary	

Improvement Strategy II: *Improve the quality of IFSP outcomes to address family priorities related to the child's acquisition and use of knowledge and skills*

Activity	Steps Needed to Implement Activity	Timelines
(II)(C)(2) Implement continued or additional training and technical assistance, identified as needed through data analyses and monitoring processes	**(a)** Link data and perform analyses to compare collected COS statements to IFSP outcomes, Family Questionnaire responses, etc.	July 2018 to June 2019
	(b) Create an IFSP outcomes report where the state and local programs can access IFSP outcomes in one place for ongoing monitoring	
	(c) Identify additional training needs around outcome development	
	(d) Consistently apply standards across state teams regarding determining quality of IFSP outcomes related to acquisition and use of knowledge and skills	

Improvement Strategy III: *Increase access to and delivery of needed evidence-based services*

Activity	Steps Needed to Implement Activity	Timelines
(III)(D)(2) Implement continued or additional training and technical assistance, identified as needed through data analyses and monitoring processes	**(a)** Identify programs in need of TA to improve evidence-based service delivery	July 2018 to June 2019
	(b) Update all training materials and resources as necessary	

6(b) Planned Evaluation Activities

Ohio will continue work on several of the activities needed to meet intermediate outcomes described in section 2(a) and referenced in 6(a). Also described in 6(a), the state will utilize feedback loops to assess the extent to which implemented strategies and activities are making the intended impact, further identify areas of weakness, and continue to adapt resources, trainings, TA, and coaching to ensure continued improvement, especially as it relates to the state's SIMR. Finally, Ohio will analyze data related to all measures described in Section 3(a) on an ongoing basis to assess progress, as well as share evaluation data with and elicit feedback from stakeholders frequently.

6(c) Anticipated Barriers

Ohio expects to encounter minimal barriers over the next year. Some of the expected barriers include further identification of local programs' needs related to more basic aspects of EI as a result of the SOSC process. Others – such as monitoring of the SOP rule to ensure that the rule is being properly implemented, implementation of revised EI rules and forms, and the EI data system updates and subsequent training needs – while marginally related to the SSIP, may limit resources available to complete work specific to the state's intended outcomes.

Activities and data analyses completed as part of Ohio's evaluation and implementation plan, as well as other processes like the SOSC, are intended as a formal means to provide needed support to local programs. However, by digging deeper into the practices and procedures at the local level, Ohio oftentimes identifies the need for additional support around foundational functions of EI. Identification of these additional needs certainly does not change Ohio's end goals related to the SSIP or more broadly. However, as the state addresses more basic needs, it may take longer than planned to achieve the intended outcomes and make improvements in the state's SIMR area.

Additionally, DODD will continue to be involved in other endeavors over the next year that will likely require much attention, and thus potentially limit resources available for the SSIP. DODD began monitoring the implementation of the SOP rule in early 2018, and will continue to do so going forward. Though time consuming, this will help the state support local programs in implementing the rule, and ultimately in ensuring equitable access to services statewide. The implementation of new EI rules and data system enhancements will also require time and resources to be utilized, but will ultimately provide greater clarity and generate improvements within Ohio's EI system.

6(d) Additional TA Support Needs

Ohio's SSIP TA team, which includes Ohio's OSEP TA team as well as individuals representing The Center for IDEA Early Childhood Data Systems (DaSy); The Early Childhood Technical Assistance Center (ECTA); The National Center for Systemic Improvement (NCSI); and the IDEA Data Center (IDC), has been extremely helpful and supportive and very much appreciated throughout the first four years of SSIP work. Additional technical assistance will be sought over the next year, as well. Specifically, Ohio will likely need continued assistance in implementing and measuring EBPs, additional resources and examples from other states and federal TA centers, and suggestions for the most effective ways to incorporate information specifically related to acquisition and use of knowledge and skills into trainings and other resources to more directly target improvement in this area. Though additional, unanticipated TA needs may arise throughout the next year, Ohio is confident that the state's OSEP TA team and the TA centers will be able to meet any identified needs.