State Systemic Improvement Plan (SSIP) Theory of Action
Theory of Action: If children improve their social-emotional skills they will be ready to participate successfully in school and community

through everyday activities.

Components	If	Then	Then	Then (from OSEP's Theory of Action)
Governance	If BCW develops and implements written policies practices and procedures on the implementation of evidence-based practices related to development of positive social-emotional skills including social relationships	Local Early Intervention programs will have the foundation needed to ensure fidelity of practice		
	If BCW develops and provides statewide technical assistance on the collection and analysis of early child outcomes data by local Early Intervention programs	Local Early Intervention personnel will be able to make data-based decisions about effective evidence-based practices with young children		
Data	If BCW enhances the current data system -Babies Information and Billing System (BIBS)	Local Early Intervention programs can more effectively monitor and ensure high-quality child outcomes data	BCW will increase	All infants, toddlers, children, and youth with disabilities will receive individualized services in natural settings and demonstrate improved educational results and functional outcomes.
Accountability	If BCW enhances the state's monitoring process to include fidelity of practice checks and mentoring by model programs, then	Local Early Intervention programs will develop the expertise needed to use evidence-based practices in supporting the improvement of social-emotional skills in young children	the percentage of infants and toddlers who are nearer or meet age expectations for	
PD/TA	If BCW develops a statewide system of training and TA resources available for Early Intervention personnel, families and community partners	Early Intervention personnel, families and community partners will have a better understanding of and will use evidence-based practices that improve social-emotional skills and other child outcomes	positive social- emotional skills including social relationships	
Quality Standards	If BCW disseminates the Georgia Early Learning and Development Standards (GELDS) that address social-emotional development as well as other aspects of child development, to the local programs and providers, then	Local Early Intervention programs can ensure the use of child development milestones and standards that are consistent with other early childhood state partners		
Fiscal	If BCW ensures sustainability of appropriate funding and builds the capacity of future resources and funding, then	BCW will be able to attract and retain more providers with expertise in improving social-emotional skills in young children		

Georgia Part C SSIP Phase II Logic Model

Inputs/Resources

- Provide training on the Child Outcome Summary Process
- Technical Assistance and guidance from ECTA team, including access and use of available modules and resources, *Child Outcome Summary* National Community of Practice.
- Revise/update policies and procedures related to the Child Outcome Summary Process
- Establish and communicate mandatory Child Outcome Summary Process training for the Babies Can't Wait workforce to achieve consistency in correct completion of the Child Outcome Summary ratings process.
- Support Local Babies Can't Wait program's implementation of Child Outcome Summary Process practices through Master Cadre
- Resolve data quality issues related to federal Indicator 3 – child outcomes data in BIBS data system
- Provide Training on using Child Outcome Summary data
- Implement evidence-based practices, strategies and interventions associated with the Pyramid Model: Family Coaching and PIWI training at implementation sites
- Establish training requirements for the Pyramid Model: Family Coaching and PIWI for new and existing providers at implementation sites.
- Establish online a Professional Development (PD) portal to track provider completion of mandatory online training modules and participation in trainings and technical assistance

Strategies/Activities/Outputs

- Improve the Child Outcome Summary Process by:
 - o Revising and communicating policies and procedures
 - Providing training and ongoing professional development and TA, using Master Cadre model for coaching and support to practitioners
- Enhance the data system (BIBS) to provide local Early Intervention programs access to "real-time" child outcomes data, resolve data quality issues that impact the COS process and provide training to implementation sites on using COS data to improve socialemotional outcomes in support of the SIMR thus assisting with program improvement and quality assurance.
- Provide training to practitioners (EIS providers and Babies Can't Wait staff) on the evidence-based Pyramid Model: Family Coaching and PIWI, designed to improve socialemotional development in infants and toddlers through parent interactions, thus supporting the SiMR.
- Using the Master Cadre model, support competency, confidence of practitioners (providers and staff) on delivering the *Pyramid Model: Family Coaching and PIWI* training with fidelity. Support providers through ongoing training onsite visits, learning collaborative, technical assistance, supervision, and access to resources resulting in a competent workforce to support implementation and scale-up statewide

Short-term

- Providers have access and knowledge of policies and procedures that support implementation of the Child Outcome Summary Process with fidelity
- Establish communication channels between local BCW programs, practitioners and state lead agency.
- Increased practitioner knowledge and skill set of the Child Outcome Summary Process and documentation of family perspectives at implementation sites
- Local Babies Can't Wait program EICs will be able to effectively monitor local program performance and ensure completeness in documentation of child outcomes data
- Establish a collaborative training process involving the Georgia Part C -Babies Can't Wait program and other early childhood partners for a system of training and coaching to implement Pyramid Model: Family Coaching and PIWI training practices at implementation sites
- Training requirements on Pyramid Model: Family Coaching and PIWI established for new and ongoing providers at implementation sites, completed within 6 months of hire or contract date.
- Families have the knowledge and skills to support their child's social-emotional development and address challenging behaviors

Intermediate

Outcomes

- Providers at implementation sites implement the *Child* Outcome Summary Process with fidelity
- Improved Child Outcome
 Summary data quality from
 improved feedback
 communications between local
 BCW programs, practitioners
 and state lead agency
- Improved documentation of family's perspective of their child's development in the child record and included in the Child Outcome Summary Process
- Improved Child Outcome Summary data quality supported by documentation in child record.
- Babies Can't Wait workforce (providers and Master Cadres) at implementation sites demonstrate expertise in implementing Pyramid Model: Family Coaching and PIWI training evidence-based practices for improving socialemotional skills in young children with fidelity.
- Online PD platform established for ensuring provider completion of state required training at implementation sites
- Families have strengthened and secure relationship with infant/toddler, improved competence and confidence in the strategies to support child's social emotional development based on *Pyramid Model: Family Coaching, PIWI* and TIER III training

Long-term

Increase the percentage of infants and toddlers at implementation sites who are nearer or meet age expectations for positive socialemotional skills including social-relationships

SSIP Evaluation Plan

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short term	Practitioners have access to policies and procedures that support implementation of the COS process with fidelity.	Has COS policy been written, approved and communicated to the field for use? Does the policy specify training requirements for practitioners who will be rating child outcomes?	COS policy that specifies ratings procedures and training requirements written, approved, and communicated to district EICs and practitioners posted on the <i>Babies Can't Wait</i> website.	Policies, procedures and official communication are posted on website Link to ECTA <i>Child Outcome Summary Process</i> modules and face-to-face recorded training is posted on the Professional Development website hosted by VSU.	June 2016- December 2016. Updates, revisions are ongoing
Short term	Improved communication channels between local Babies Can't Wait programs, practitioners and state lead agency.	Do Local Babies Can't Wait staff at implementation sites, including new hires know: where to access the revised COS ratings policy? understand COS policy and procedures including composition of multidisciplinary teams for COS ratings? available communication channels with the lead agency?	# and % positive answers on survey of Babies Can't Wait staff and new hires/contractors at implementation sites	Statewide implementation of a COS Provider Survey at the end of the online ECTA COS module to assess knowledge of COS policy and communication channels with the lead agency	March 2018 - ongoing
Short term	Improve the skill sets and knowledge of providers and staff in the COS process	Was the online COS training module effective in improving competency and confidence of the COS process among Providers?	The % change in knowledge and confidence of the providers for the COS Process as a result of taking the online COS module	Pre and Post survey (developed in collaboration with VSU) completed as providers take the online COS training module	March 2018- ongoing

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Intermediate	Practitioners at implementation sites implement the COS process with fidelity.	% of improvement from entry to exit before COS training and after COS training supported by documentation in child record	% COS ratings that are supported by documented information in the record at entry and at exit.	EICs at implementation sites perform COS ratings data verification using the quarterly COS data checklist to determine if evaluation/assessment and/or progress information supports entry and exit COS ratings.	September 2017- ongoing
Intermediate	Each family's perspective of their child's development is included in the COS process.	Is family input reflected in the COS process for each child?	#% of child records that have documented evidence of family input in the COS process	EICs at implementation sites perform COS data verification using the quarterly COS data checklist to determine if information in child's record reflects family input in the COS process.	September 2017- ongoing
•	strategy 1B: Enhance the da nd quality assurance	ta system (BIBS) to provide local	Early Intervention programs ac	ccess to real-time child outcomes data to assis	st with program
Short term	Improved COS data quality from 88% to 95% completeness of data documentation.	Is there complete data documentation for each child outcome area 3a, 3b, and 3c?	95% completeness in data documentation of COS ratings for Indicator 3	State Part C Data Manager and Babies Can't Wait team review Indicator 3 data in BIBS for each implementation site quarterly for one (1) year, then semi-annually thereafter for duration of SSIP	September 2017- ongoing
Intermediate	90% of Local EICs have access to COS reports in the data system and 90% of EICs are monitor the program for improvements	Are EICS at implementation sites accessing COS reports in the data system in accordance with state policy? Are EICS identifying data quality issues?	90% EICS in implementation sites who monitor their COS data quarterly	EICs can access COS reports through the BIBS data system	July 2016-ongoing

Improvement strategy 2: Provide ongoing training, technical assistance, supervision, resources and support to implement the Pyramid Model: PIWI, Family Coaching and TIER III.

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Short term	Establish a collaborative process involving Babies Can't Wait and other early childhood partners for a system of training and coaching to implement Pyramid Model: PIWI, Family Coaching and TIER III practices at implementation sites.	Did Babies Can't Wait collaborate with their early childhood partners to train current practitioners/staff at implementation sites?	90% Babies Can't Wait staff/practitioners at implementation sites and 80% of other early childhood partners (DECAL, Project Launch, Head Start, and Part B) participate in Pyramid Training during the 1st year of implementation.	Training registration data collected on practitioner and Early childhood agency represented	July 2016-June 2017
Short term	Training requirements are established for new and ongoing practitioners at implementation sites.	Is Pyramid Model: Family Coaching PIWI and TIER III training conducted for new and current practitioners at implementation sites?	80% of new practitioners at implementation sites complete state required Pyramid training on the PD website within 6 months of hire date or contract date.	Training registration and certification process managed by the state and state Professional Development vendor GSU-CLD	June 2017-ongoing
Short term	BCW Providers and Master Cadres at implementation sites have improved their knowledge and confidence about supporting the process of improving and strengthening parent and infant/toddler relationships using techniques from the Pyramid Model: PIWI, Family Coaching and TIER III * TIER III trainings conducted virtually for FFY2020 due to COVID-19	Has knowledge, confidence and understanding of the Pyramid Model: PIWI, Family Coaching and TIER III increased among BCW Providers and Master Cadre's Has the BCW Provider and Master Cadre built competence and confidence in parents to support their child's emotional development?	25% or more of BCW staff (state and local-level) Providers and Master Cadres demonstrate improved understanding on a proficiency post-test administered after all trainings compared to the pretest administered before the training. 25% or more parents have increased knowledge and confidence demonstrated by improved understanding	Pre-and post-assessment administered to trainees during each Pyramid training module. GSU-CLD collects and compiles pre-and post-test data. Pyramid Family Survey ditributed to families by Pyramid trained providers	September 2017- ongoing

Type of Outcome	Outcome Description	Evaluation Questions	How Will We Know the Intended Outcome Was Achieved? (performance indicator)	Measurement/Data Collection Method	Timeline (projected initiation and completion dates)
Intermediate	BCW workforce (providers and staff) at implementation sites will implement <i>Pyramid Model:</i> PIWI, Family Coaching and TIER III as intended.	Do practitioners at implementation sites implement the <i>Pyramid Model:</i> PIWI, Family Coaching and TIER III practices as intended?	25% BCW workforce (providers and staff) at implementation sites who correctly demonstrate Pyramid practices with fidelity	Pyramid Provider-Self Assessment Survey for implementation of Pyramid practices as intended; survey administered to providers who completed one or more Pyramid series trainings at implementation sites. (one measurement cycle annually) Observations of trained practitioners at implementation sites by Pyramid Master Cadre using the Pyramid Provider Observation checklist. (completed quarterly * Observations done virtually for FFY2020 due to COVID-19	July 2018-ongoing July 2018- ongoing;
Intermediate	Families will have improved understanding of and confidence in strategies to support their child's social-emotional development.	Do families have an increased understanding and confidence in their capability to support their child's social-emotional development?	25 % of families positively report understanding and confidence on an assessment tool	Pyramid Family Survey ditributed to families by Pyramid trained providers	September 2018- ongoing
Long term	Increase the percentage of infants and toddlers at implementation sites who are nearer or meet age expectations for positive social-emotional skills including social-relationships from 90% to 92%.	Have more infants and toddlers exited <i>Babies Can't Wait</i> at or nearer age expectations for positive social-emotional development?	State target met	State Epidemiology and <i>Babies</i> Can't Wait team reviews BIBs data for improvements in Outcomes 3A	During APR data inspection periods for each APR reporting period