



# Summarizing and Reporting ECTA System Framework<sup>1</sup> Self-Assessment Data to Demonstrate Infrastructure Improvements for SSIP Phase III

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<sup>1</sup> The ECTA System Framework includes 6 infrastructure components of which the DaSy Data System Framework is one. The other components include: Governance, Finance, Personnel/Workforce, Accountability and Quality Improvement, and Quality Standards.

## **Background and Purpose:**

States are in the process of improving and sustaining a high quality early intervention and/or preschool state system as part of the State Systemic Improvement Plan (SSIP) or other program improvement efforts. The ECTA System Framework and the DaSy Data System Framework is a resource that can support states in evaluating the current status of their system, identifying areas for potential improvement, and making improvements to their system to support implementation of evidence based practices with fidelity. The [System Framework Self-Assessment](#) can be repeated to reassess the system and monitor infrastructure improvements over time. The Self-Assessment Comparison Tool allows the state to compare multiple data points to measure progress. When used as part of an ongoing process, the self-assessment produces quantitative and qualitative data to document infrastructure improvements. The results can help identify outputs and outcomes achieved and inform decisions about next steps to support further improvements and/or sustain improvements.

This document is designed to illustrate how a state might summarize and report data gathered through the System Framework self-assessment process to document infrastructure improvements in their Phase III SSIP or other program improvement efforts. A template for reporting progress is provided along with an example of hypothetical state data.

## **Recommendations:**

Several key items are important to keep in mind when reporting progress of infrastructure improvements when using the System Framework self-assessment:

- Clearly identify which infrastructure components were assessed and which have improved over time.
- Provide quantitative evidence to demonstrate improvement, e.g. change over time comparing time 1 and time 2 in QI ratings, change over time comparing time 1 and time 2 in the number of elements that are partially and/or fully implemented. If a state does not yet have multiple data points, describe the number of elements that are partially or fully implemented.
- Provide qualitative evidence related to the infrastructure improvements, e.g. examples in evidence supporting QI changes or element changes.
- Use data visualization tables, as appropriate, to display the data.

## Suggested Reporting Outline:

The following is a potential outline for reporting the System Framework self-assessment data as part of SSIP Phase III:

System Component: \_\_\_\_\_

*Related Improvement Strategies:* \_\_\_\_\_

*Quality Indicators Identified by Stakeholders as High Priority from Initial Framework Self-assessment*

Quality Indicator \_\_\_\_

Quality Indicator \_\_\_\_

Quality indicator \_\_\_\_

*Summary of Quantitative Data/Self-Assesemnt Ratings*

Quality Indicator \_\_\_\_, Self-Assessment Ratings at mulitple points in time, amount of change

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Quality Indicator \_\_\_\_, Self-Assessment Ratings at mulitple points in time, amount of change

*Summary of Qualitative Data/Supporting Evidence for Progress*

[Describe qualitative evidence related to those elements where progress has been made OR, if rating has not changed, provide an explanation for why progress was not made in this indicator.]

*Summary of Additional Evaluation Data including Outputs and Outcomes*

*Conclusions and Next Steps*

## Example: Summarizing and Reporting System Framework Self-Assessment Data

As part of the SSIP, [State Name] is focusing the SIMR on supporting infants and toddlers with disabilities to make greater than expected growth in social-emotional skills (including social relationships) by the time they exit early intervention. [State name] engaged stakeholders in evaluating the state system infrastructure using the ECTA System Framework self-assessment to identify the current status and infrastructure areas needing improvement to enable the state system to better support faithful implementation of evidence-based practices that promote social emotional outcomes. Through the self-assessment process, which was first conducted in January 2015, [state name] identified four components as needing improvement: Personnel/Workforce, Finance, Accountability and Quality Improvement and Data Systems. Improvement strategies, activities and steps were developed to address these four components.

During Phase III, a number of improvement strategies were implemented in accordance with the Phase II plan. [State Name] used the ECTA System Framework self-assessment to reassess infrastructure components again in January 2017. The data is one way the state is measuring infrastructure improvements as a result of implementation. Progress for each of the systems components is described below.

### Professional/Workforce:

*Priority Quality Indicators Identified from Initial Framework Self-assessment:* The State Team in collaboration with stakeholder completed the System Framework self-assessment for the Personnel/Workforce Component and identified four quality indicators as high priority areas of the PD infrastructure:

- **Quality Indicator 1** - A cross sector leadership team is in place that can set priorities and make policy, governance, and financial decisions related to the personnel system.
- **Quality indicator 2** - There is a written multi-year plan in place to address all subcomponents of the CSPD.
- **Quality Indicator 7** - A statewide system for in-service personnel development and technical assistance is in place for personnel across disciplines.
- **Quality Indicator 9** - Comprehensive recruitment and retention strategies are based on multiple data sources, and revised as necessary.

*Improvement Strategy:* The State Team identified the following improvement strategy related to the professional development system during Phase I and Phase II of the SSIP for which related activities were implemented during the first year of Phase III (April 2016 through February 2017):

Enhance the statewide system of professional development to increase early intervention providers' knowledge of social-emotional (SE) development, development of functional SE Individualized Family Service Plan (IFSP) outcomes/objectives/strategies, and implementation of the IFSP using evidence-based practices (EBP).

*Summary of Quantitative Data/Self-Assessment Ratings:* After implementing a number of professional development improvement activities (described in more detail in Section \_\_\_\_ of the SSIP report), the State Team with stakeholder input completed the self-assessment again and found progress in three of the four priority quality indicators as reflected in Table 1 below.

<b>Table 1: Personnel/Workforce Component</b>			
<b>Quality Indicator</b>	<b>Time 1 (1/6/15)</b>	<b>Time 2 (1/15/17)</b>	<b>Increase</b>
#1 - A cross sector leadership team is in place that can set priorities and make policy, governance, and financial decisions related to the personnel system	2	3	+1
#2 - There is a written multi-year plan in place to address all subcomponents of the CSPD	1	1	0
#7 - A statewide system for in-service personnel development and technical assistance is in place for personnel across disciplines	2	5	+3
#9 - Comprehensive recruitment and retention strategies are based on multiple data sources, and revised as necessary	2	5	+3
Note: Each of the quality indicators was provided a rating based upon a 7-point scale with 1 as "None of the elements is yet planned or in place" and 7 as "All elements are fully implemented".			

*Qualitative Data/Supporting Evidence for Progress:*

**Quality Indicator 1** - Progress was made on two of the elements of quality under QI-1 (cross sector leadership team). The evidence of improvement includes:

- [State name] identified, invited, and secured key partners including representatives from early childhood agencies, TA providers, IHEs, and parent organizations and formed a cross-sector leadership team. A list of key partners is available in Appendix A.
- This newly formed leadership team developed their mission statement and begun to develop an action plan.

**Quality Indicator 2** - Progress was not yet made for QI-2 (written multi-year plan). The evidence of improvement includes:

- The cross-sector leadership team formed a workgroup to develop a CSPD based on the mission statement. The plan will also address the evaluation of CSPD activities including the process for collecting and analyzing fidelity data related to implementation of social emotional evidence-based practices.

**Quality Indicator 7** - Progress was made related to four of the eight elements of quality under QI-7 (in-service personnel development and TA). The evidence of improvement includes:

- A team of professionals identified competencies related to social-emotional development to be used for in-service personnel development. The competencies were aligned to national professional organization personnel standards across disciplines and aligned with our state personnel standards across disciplines. These competencies were disseminated to all practitioners with explanation of how these competencies would be used and expectations for

practitioners gaining these competencies. The competencies were incorporated into training materials to ensure that practitioners gain competencies in supporting social-emotional development in infants and toddlers with disabilities.

- [State name] developed a provider self-assessment tool regarding social emotional competencies and related evidence-based practices. The results of the needs assessment will be used to inform the CSPD plan, design in-service professional development, and track EI provider perceptions of competencies over time.
- The state developed a training plan to improve social-emotional development in infants and toddlers with disabilities. The plan includes online modules, face-to-face training opportunities, webinars, communities of practice, and the identification and training of coaches to provide ongoing support to providers in the area of social-emotional development. Coaches were selected and trained (see a list of coaches in Appendix B).
- [State name] also drafted a process for individualizing in-service training at the provider level as well as at the program level by using needs assessment and coaching data.

**Quality Indicator 9** - Progress was made related to each of the three elements of quality under QI-9 (recruitment and retention). The evidence of improvement includes:

- [State name] developed a framework that will be used to collect data on personnel shortages statewide. The framework defines composition of teams for service delivery including caseload. It also includes criteria for the number of coaches needed per provider/team and administrative staff needed to support effective program management.
- The state summarized data collected on personnel shortages and will be drafting a plan to prioritize recruitment of specific disciplines.

*Summary of Additional Evaluation Data including Outputs and Outcomes:*

[This section is where the state summarizes additional evaluation data on outputs and progress toward achieving outcomes related to the Personnel/Workforce Component.]

*Conclusions and Next Steps:*

[In this section, the state would summarize overall progress made in the Personnel/Workforce Component. The state also might summarize the key outputs that were achieved (e.g. the formation of a cross-sector leadership team, development of social-emotional competencies) and outcomes (e.g. practitioners in the state have access to a variety of TA opportunities, in service professional development follows adult learning principles) that were achieved. The state also should describe next steps (e.g. implementing online training modules and webinars, disseminating the social emotional competencies self-assessment, collecting coaching data on the fidelity of implementation of evidence-based practices).]

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