

ACTION STRAND EVALUATION PLAN

SiMR: There will be improved social emotional outcomes for children who come in below age expectation but make substantial gains.

SiMR Measurement: North Dakota Part C's State-Identified Measurable Result (SiMR) data source is child outcome Indicator 3a, Summary Statement 1, and the data for this is gathered through the states Assessment, Evaluation and Programming System Assessment, Evaluation, and Programming System for Infants and Children (AEPS) child outcomes tool.

Indicator 3a: Positive social-emotional skills (including social relationships).

Summary Statement 1: Of those infants and toddlers who entered early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

Evidence Based Practice (EBP): Pyramid Model and Routines-Based Interview (RBI).

EBP Framework: DEC RP F6. Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family's preferences.

Early Intervention System Outcomes:

- Families support their children's development through improved understanding of family routines and relationships.
- Service Coordinators and Infant Development providers use evidence-based methods to support families to develop relationships through natural learning opportunities.

DATA QUALITY Strand

Goal: An online data visualization system to ensure that valid and reliable data are available.

Data Quality Outcome: State, regional programs, families, and community stakeholders have data available for program planning and continuous improvement.

Strategies	Performance Indicator (How will we know it is met?)	Measurement/Data Collection Methods	Projected Timeline	Status Notes
1.1 Data processes assure valid and reliable data.	A data process manual is developed.	<ul style="list-style-type: none">• An online manual outlines the procedures for valid	January 2024-January 2027	Jan 2025 Status: Ongoing. Fields for specific data elements were added in Therap for exiting data, and

	<p>Annual initial APR indicator data retrieval reduce manual review by the field.</p> <p>Annual data retrieval have improved accuracy.</p>	<p>and reliable data retrieval.</p> <ul style="list-style-type: none"> Annual data retrievals demonstrate improved accuracy/reduced technical errors/reduced manual errors. 	<p>January 2026-January 2029</p>	<p>those elements will be included in an updated report beginning in FFY 2024.</p> <p>Jan 2026 Status: Ongoing- extended to 2027. An expanded Data Guidance document was developed to include more detailed deadlines, processes, and procedures for data collection and review. In FFY 2025, the document will be updated to the new ND EIS IDEA Part C Programmatic and Fiscal Comprehensive Monitoring Manual currently being reviewed by OSEP.</p> <p>Jan 2025 Status: Ongoing. The state EI Specialist has verified exit reasons within the data system without requiring manual review by local providers for Indicator 1, 7, and Table 3.</p> <p>Jan 2026 Status: Ongoing. Updated reports were generated to include Therap supplied data points. Verification for exiting has remained at a program level to ensure accuracy. An updated Comprehensive Monitoring</p>
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				Manual (awaiting OSEP approval) will be included in the process and accuracy of data will be monitored in FFY 2025.
1.2 A public-facing, interactive system creates access to real-time data for community stakeholders, providers, and families for data-based decision-making.	<p>Part C Coordinator and Data Officer coordinate a system for real-time data on the ND website.</p> <p>Power BI offers access to stakeholders for timely data.</p> <p>Stakeholder training on new data system is provided.</p>	<ul style="list-style-type: none"> Part C Coordinator and Data Officer complete data management system parameters. Real-time data access is available for community stakeholders, providers, and families. 	<p>January 2024- January 2027</p> <p>January 2026- January 2027</p>	<p>Jan 2025 Status: Ongoing. Work has been completed on the data system to show a 4-year review of data through Power BI for FFY 2023. Planning for public-facing system has been initiated.</p> <p>Jan 2026 Status: Ongoing- updated to 2027 as the Comprehensive Monitoring Manual (awaiting OSEP approval) was updated and will be included in planning for data management system parameters.</p> <p>Jan 2026 Status: Ongoing. The Power BI that shows a four-year review of data remains in use. Work continues on creating a public facing system with the NDDHHS, Information Technology Department, Data Scientist. The Part C Coordinator is working collaboratively to develop real-time data access for stakeholders.</p>

		<ul style="list-style-type: none"> • A minimum of two stakeholder training events occur. • Stakeholders access real-time data reports as demonstrated by data analytics. 	January 2027- June 2027 June 2027- December 2029	
1.3 A statewide, online referral system is used for referrals.	<p>Part C Coordinator and Data Management coordinate a system for EI referrals on the ND website.</p> <p>Stakeholder training on new referral system is provided.</p> <p>Community partners make referrals through a web-based system.</p>	<ul style="list-style-type: none"> • Part C Coordinator and Data Management complete referral system parameters. • Online referral system is created on the ND website. • A minimum of two stakeholder training events occur. 	<p>January 2024- January 2027</p> <p>January 2026- January 2028</p> <p>January 2028- July 2028</p>	<p>Jan 2025 Status: Ongoing. The ICC has been engaged to provide input on desired components of an online referral system for EI.</p> <p>Jan 2026 Status: Ongoing- updated to 2027. Regional referral email addresses have been put in place to coordinate regional referrals. This will streamline the current referral process for stakeholders. Information was provided to stakeholders on October 16, 2026, regarding information that needs to be shared during referral.</p>

		<ul style="list-style-type: none"> • Data analytics demonstrate a majority of referrals are made through an online system in each region of the state. 	January 2028-December 2029	
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PROFESSIONAL DEVELOPMENT Strand

Goal: Design statewide professional development utilizing the state learning platform for community partners, families, onboarding of staff, and experienced practitioners in the field

Professional Development Outcome: Early Intervention leaders (families and EI professionals) are developed at the program and community level, increasing recruitment and retention in the field.

Strategies	Performance Indicator (How will we know it is met?)	Measurement/Data Collection Methods	Projected Timeline	Status Notes
2.1 EI stakeholders collaboratively develop timely and meaningful professional development.	<p>The Professional Development Workgroup develops modules using the PeopleSoft platform in target areas.</p> <p>The PD Workgroup updates previously developed modules to the new platform.</p> <p>The PD Workgroup Develops three new modules for performance</p>	<ul style="list-style-type: none"> • A collaborative PD workgroup of service coordinators, infant development providers, and family stakeholders develop professional development modules through regular meetings. 	January 2024- January 2029	<p>Jan 2025 Status: Ongoing. One parent and one Service Coordinator were added to the PD workgroup. Monthly meetings occurred to work on EI modules.</p> <p>Jan 2026 Status: Ongoing. Monthly meetings occurred to work on EI modules. The group met face-to-face in Bismarck, ND, June 24-26, 2025, to complete module work and</p>

	<p>support of new and experienced staff.</p>	<ul style="list-style-type: none"> Previously developed PD modules will be updated in the new platform: Family-Centered Practices, Triadic Strategies, and Service Coordination. 	<p>January 2024-September 2026</p>	<p>finalize the strategic plan for PD after reviewing stakeholder feedback.</p> <p>Jan 2025 Status: Ongoing. The Family-Centered Practices module is in the final stages of being updated. The Service Coordination module is in process for update and release in 2026. Competency Assessment Tool (CAT) was created. Triadic Strategies is the next module slated for completion. Stakeholder feedback has been collected on three Authentic Assessment modules as well as Part 1 and 2 of the RBI modules. Data was shared with the PD workgroup for improvement.</p> <p>January 2026 Status: Completed. Family-Centered Practices and the Service Coordination modules were updated and released on October 15, 2025. Triadic Strategies module completed with release slated with release slated for Spring 2026.</p>
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		<ul style="list-style-type: none"> Stakeholder feedback is used to create a list of 3 new modules to aid performance support in early intervention. 	January 2024- January 2025	<p>Jan 2025 Status: Ongoing. Stakeholder feedback has been collected on three Authentic Assessment modules as well as Part 1 and 2 of the RBI modules. Data was shared with the PD workgroup for improvement.</p> <p>January 2026 Status: Ongoing. Family-Centered Practices and the Service Coordination modules were updated and released on October 15, 2025. Triadic Strategies module completed with release slated with release slated for Spring 2026. Feedback data will be reviewed in FFY 2025. Transition Guide released with training completed in Fall 2025. Pyramid cohort scale-up continues with second cohort. Stakeholders (EI, SC) identified a strategic priority list of PD to be developed beginning with discussion at an EI Statewide Meeting on 5.14.25 and reviewed with the PD Workgroup. Following is a brief review:</p> <p>2025-2026: Triadic Strategies, Transition</p>
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		<ul style="list-style-type: none"> Creation of 3 new EI modules. 	January 2026-December 2029	<p>Guide, Pyramid Cohort continuation. All completed.</p> <p>2026: Functional Outcomes</p> <p>2027: Referrals/Eligibility, Informed Clinical Opinion, NICU/Hospitalized, General Supervision, Pyramid continuation.</p> <p>2028: IFSP Guidance Manual, Case Review Tool revision, Pyramid continuation.</p> <p>2029: Teamwork and Collaboration training development.</p>
2.2 Community partners, families, service coordinators, and ID providers have increased knowledge and skills in use of evidence-based practices through effective professional development.	<p>PeopleSoft analytics demonstrate increased use of PD modules.</p> <p>Module survey data demonstrates increased understanding of EI topic.</p> <p>EI programs use a list of PD modules for onboarding new staff.</p>	<ul style="list-style-type: none"> An annual review of Peoplesoft analytics demonstrates increased use of PD modules across regions of the state and user demographics. 	January 2024- January 2029	<p>Jan 2025 Status: A review of data analytics for Authentic Assessment Parts 1-3 and RBI Parts 1-3 indicates 178 EI, 4 students, 70 SC, and 1 EP users completed 709 modules since their placement on the Peoplesoft platform.</p> <p>Jan 2026 Status: Ongoing. A review of data analytics for RBI Part 3 indicates the following number of users</p>

		<ul style="list-style-type: none"> • Annual module survey data indicates increased competence and confidence in EI module content areas. 	January 2024- January 2029	<p>completing the RBI Part 3 modules: 137 EI, 63 SC, 1 experienced parent, and 1 community partner.</p> <p>Jan 2025 Status: Ongoing. Users completed the modules and rated themselves at a high level of understanding in the following areas: Training increased my understanding of authentic assessment or RBI in EI. Percentages are a combined rating of completely (100%) or almost (50-99%): AA Part 1: 92.96% AA Part 2: 94.52% AA Part 3: 96.72% RBI Part 1: 92.10% RBI Part 2: 90.32% Training increased my ability to talk with families in EI about authentic assessment/family assessment. AA Part 1: 83.33% AA Part 2: 93.24% AA Part 3: 93.55% RBI Part 1: 92.00% RBI Part 2: 88.71%</p>
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		<ul style="list-style-type: none"> Annual module survey data indicates use of modules to on-board new staff. 	January 2024- January 2029	<p>of understanding in the following areas:</p> <p>Training increased my understanding of RBI in EI.</p> <p><i>Percentages are a combined rating of completely (100%) or almost (50-99%):</i></p> <p>RBI Part 3: 81.25%</p> <p>Training increased my ability to talk with families in EI about family assessment.</p> <p>RBI Part 3: 78.73%</p> <p>Jan 2025 Status: Ongoing.</p> <p>Participant demographics indicate 43 module completions by new staff (less than a year of employment) for on-boarding with the following participation:</p> <p>AA Part 1: 16</p> <p>AA Part 2: 7</p> <p>AA Part 3: 5</p> <p>RBI Part 1: 10</p> <p>RBI Part 2: 5</p> <p>Jan 2026 Status: Ongoing.</p> <p>Participant demographics indicate 9 module completions by new staff (less than a year of employment) for on-boarding with a total of</p>
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				202 users completing RBI Part 3.
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EVIDENCE-BASED PRACTICES Strand

Goal: Support learning and use of evidence-based intervention practices.

Evidence-Based Practices Outcome: Service Coordinators and Infant Development providers use evidence-based strategies to support families and develop relationships to increase confidence and competence in supporting their children's social emotional development through natural learning opportunities.

Strategies	Performance Indicator (How will we know it is met?)	Measurement/Data Collection Methods	Projected Timeline	Status Notes
3.1 Service Coordinators and Infant Development providers increase their knowledge and practice in the use of family assessment.	<p>EI programs (SC & ID) identify RBI Lead and develop an Action Plan for their program.</p> <p>EI programs (SC & ID) complete 16-month Routines-Based Interview (RBI) modules series with their staff.</p> <p>Peer RBI fidelity reviews will be implemented in 2 regions.</p>	<ul style="list-style-type: none"> Each regional Service Coordination unit and Infant Development provider identifies an RBI Lead for the 16-month training and submits an Action Plan. Review of survey data for each of the 3 sections of the 16-modules indicates a growth 	<p>January 2024- May 2025</p> <p>May 2025- September 2025</p>	<p>Jan 2025 Status: Ongoing. Each regional program, including early intervention and service coordination, identified RBI leads and submitted action plans in December 2023 to begin RBI training in January 2024.</p> <p>Jan 2026 Status: Completed. RBI training Parts 1-3 completed, and users are moving to ongoing fidelity work within their programs.</p> <p>Jan 2025 Status: Users completed RBI modules Part 1 and Part 2. RBI Part 3 will be completed during FFY 2024. Users rated themselves at a high level of understanding in the following areas:</p>

		<p>in knowledge of the RBI process.</p>		<p>Training increased my understanding of RBI in EI. <i>Percentages are a combined rating of completely (100%) or almost (50-99%):</i> RBI Part 1: 92.10% RBI Part 2: 90.32% RBI Part 3: FFY 2024 data</p> <p>Training increased my ability to talk with families in EI about family assessment. RBI Part 1: 92.00% RBI Part 2: 88.71% RBI Part 3: FFY 2024 data</p> <p>Jan 2026 Status: Completed. Users completed RBI module Part 3. Users rated themselves at a high level of understanding in the following areas: The Fidelity Coach training helped me to increase my skills in my current practice of (I) Introducing the RBI. <i>Percentages are a combined rating of completely (100%) or almost (50-99%):</i> RBI Part 3: 81.25% The Fidelity Coach training helped me to increase my skills in my current practice of (II) Getting Started. <i>Percentages are a combined rating of completely (100%) or almost (50-99%):</i></p>
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				<p>RBI Part 3: 81.25%</p> <p>The Fidelity Coach training helped me to increase my skills in my current practice of (III) Learning About Routines. Percentages are a combined rating of completely (100%) or almost (50-99%):</p> <p>RBI Part 3: 81.25%</p> <p>The Fidelity Coach training helped me to increase my skills in my current practice of (IV) Asking the Time, Worry and Change questions. Percentages are a combined rating of completely (100%) or almost (50-99%):</p> <p>RBI Part 3: 72.92%</p> <p>The Fidelity Coach training helped me to increase my skills in my current practice of (V) Recapping the RBI. Percentages are a combined rating of completely (100%) or almost (50-99%):</p> <p>RBI Part 3: 79.17%</p> <p>The Fidelity Coach training helped me to increase my skills in my current practice of (VI) Inviting the Family to Identify Their Priorities. Percentages are a combined rating of completely (100%) or almost (50-99%):</p> <p>RBI Part 3: 79.16%</p>
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		<ul style="list-style-type: none"> Peer RBI fidelity in 2 regional reviews will indicate fidelity in use of the RBI. 	September 2025-September 2026	<p>This information helped me to refine my RBI skills in my current practice.</p> <p><i>Percentages are a combined rating of completely (100%) or almost (50-99%):</i></p> <p>RBI Part 3: 79.17%</p> <p>Jan 2026 Status: Ongoing. Stakeholders including EI and SC at the Statewide EI Meeting and the PD Workgroup supported the development of the RBI Fidelity Plan. Beginning January 2026, two staff from each EI and SC program will be identified to complete the RBI-Fidelity Checklist (FC) once a quarter for a year, including quarterly goal planning for practice improvement and inter-rater reliability checks. Every 6 months, 2 new staff from each program will be added.</p>
3.2 Service coordinators and ID providers increase their knowledge and practice in the use of social-emotional strategies to support caregivers.	<p>Pyramid Model State Leadership Team is in place.</p> <p>State scale-up of Pyramid Model occurs through pilot programs with coaching.</p>	<ul style="list-style-type: none"> An agreement is in place with national Pyramid Model consultants. A State Leadership Team (SLT) is developed. 	<p>May 2024-December 2024</p> <p>May 2024-December 2024</p>	<p>Jan 2025 Status: Completed. Agreement completed during summer 2024 with the Pyramid Model Consortium.</p> <p>Jan 2025 Status: Completed. EI Pyramid State Leadership Team created Spring 2024 and also collaborating with</p>

	<p>Programs use the Pyramid Model to fidelity based on EIPPF1 .</p>	<ul style="list-style-type: none"> • Coaches in at least two regions are trained. 	<p>January 2025-December 2025</p>	<p>statewide PDG Pyramid Leadership group.</p> <p>Jan 2025 Status: Ongoing. Pyramid applications were available for regions in March 2024. Three (3) EI programs in four (4) regions were identified to pilot the Pyramid model. Virtual orientation took place July 10, 2024. Training began with an onsite training October 2-4 in Bismarck, ND. <i>Program Coach Training, Program-Wide Leadership Team Training, and EI Practices Training</i> were completed virtually.</p>
		<ul style="list-style-type: none"> • Staff in at least two regions are trained. 	<p>January 2026-December 2027</p>	<p>Jan 2026 Status: Completed. Three (3) EI programs in four (4) regions were trained by July 31, 2025, including coaches.</p> <p>Jan 2026 Status: Completed. Three (3) EI programs in four (4) regions, including 17 EI in leadership positions and 60 EI practitioners, were trained by July 31, 2025. Cohort 2 began September 1, 2026, with 8 EI and 4 SC leadership positions in training. In addition, 70 EI practitioners</p>

		<ul style="list-style-type: none"> • A statewide scale-up plan is created. • Programs use the Pyramid Model to fidelity based on the EIPPFI. 	January 2028-December 2031	and SC are currently completing Pyramid training. Jan 2026 Status: Ongoing. Another round of applications was released in July 1, 2025. Two programs were chosen to begin training in September 2025. Cohort 2 EI and SC.
			January 2028-December 2031	Jan 2026 Status: Ongoing. Fidelity data will be available late 2026.

POLICY & PROCEDURE Strand

Goal: Develop policies and procedures to ensure implementation of high-quality Early Intervention practices.

Policy & Procedure Outcome: Service Coordinators and Infant Development providers effectively use statewide policies and procedures for high-quality service provision.

Strategies	Performance Indicator (How will we know it is met?)	Measurement/Data Collection Methods	Projected Timeline	Status Notes
4.1 Policy Workgroup develops procedures.	<p>A list of target areas for procedures is developed collaboratively with stakeholders outlining priority areas.</p> <p>EI stakeholders collaboratively develop two or more new policies and procedures annually.</p>	<ul style="list-style-type: none"> • A timeline and list of procedures is developed and prioritized collaboratively with stakeholders. 	January 2024-July 2024 2029	Jan 2025 Status: Ongoing. EI stakeholders identified transition as a priority for development of updated procedures. In FFY 2024 and annually, stakeholders will review and re-prioritize the procedure list.

		<ul style="list-style-type: none"> Reviewed/Revised and new policies developed by stakeholders and approved at the state office level. 	July 2024-July 2029	<p>Jan 2026 Status: Ongoing. Timeline extended to 2029. Stakeholders will re-prioritize the procedure list after the Comprehensive Monitoring Manual is approved by OSEP (see below) and released to support development of a comprehensive procedural manual. The manual was prioritized after DMS.</p> <p>Jan 2025 Status: A Part C and Part B collaborative stakeholder transition workgroup, including parents and community agencies, was developed in December 2023. The workgroup has met twice a month during FFY 2023 to review and update transition policy and procedures.</p> <p>Jan 2026 Status: Ongoing. The Part C and Part B collaborative stakeholder transition workgroup, including parents and community agencies continued and completed their work in fall 2025.</p> <p>Jan 2026 Status: Ongoing. After DMS, the focus moved to updating the</p>
		<ul style="list-style-type: none"> Two or more policies/procedures 	July 2024-July 2029	

		are completed annually.		Comprehensive Monitoring process. A new Comprehensive Monitoring Manual was created and submitted to OSEP for approval. Training was provided at the EI Statewide Meeting January 20, 2026, and implementation of the first cohort of cyclical monitoring begins in 2026.
4.2 Regional programs, families, and community partners have web-based access to policies and procedures ensuring consistent implementation statewide.	<p>ND EI website contains updated policies and procedures.</p> <p>Stakeholders use the ND EI website to access policies and procedures.</p>	<ul style="list-style-type: none"> Policies and procedures are posted and maintained on the ND EI website in a timely manner. Website data analytics indicate stakeholder access of policies and 	<p>July 2025-December 2029</p> <p>January 2026-December 2029</p>	<p>Jan 2026 Status: Ongoing. The EI Website was updated during FFY 2024 with additional policies and procedures, including the updated transition guide and training for it. Guidance is being reviewed for accuracy and updated or removed as appropriate. A Dispute Resolution procedural manual was created to be disseminated in FFY 2025. These documents include multiple procedures and supplemental guides for families, which will be available on the Part B and Part C websites.</p>

		procedures annually.		
4.3 Stakeholder Transition Committee updates state transition guidelines.	<p>A transition committee of stakeholders is developed by Part B and Part C.</p> <p>EI transition guidelines are updated.</p> <p>EI transition guidelines are disseminated across stakeholders.</p>	<ul style="list-style-type: none"> • Cross-collaborative team of Part B and Part C stakeholders is formed. • Collaborative group of Part B and Part C stakeholders meet regularly with the support of Federal TA to review, update, and make recommendations to the transition guidelines. • Newly updated guidelines and supplemental documents are released. • Collaborative training is provided to the Part B and Part C stakeholders. 	<p>January 2024-July 2024</p> <p>January 2024-December 2024</p> <p>January 2025-January 2026</p> <p>January 2026-December 2027</p>	<p>Jan 2026 Status: Completed all 4.3 indicators. The Transition Strategic Partner Group met bi-monthly and reviewed current policies while developing new guidelines to support smoother transitions for families and providers. They were also divided into two subgroups: 1) a group focused on developing transition guides, and 2) a group focused on creating content for meetings.</p> <p>Supplemental guidance for sections 2.7–2.9 was developed, including updates to the parent-facing document and referral processes. Procedural changes were finalized and reviewed with field staff. A new Administrative Transition Guide and a Parent Transition Guide were written to provide clear, consistent guidance. Trainings were delivered to both Part B and Part C staff, and recorded virtual training was created to support onboarding of new staff. Trainings were</p>

				completed October 14 and October 22, 2025. Virtual training is on the Part B and Part C websites.
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