

South Carolina Part C State Systemic Improvement Plan (SSIP): Phase II

Introduction:

South Carolina's Part C SSIP implementation schedule varies from that of all other states. This modification was a result of discussions between BabyNet state staff and the Office of Special Education Programs (OSEP) in late 2016. With OSEP's approval, the state made the decision to change the state identified measurable result (SIMR) to the following:

Families who have received BabyNet services for 6-12 months will be able to more effectively help their child develop and learn.

After successfully completing Phase I of the SSIP, South Carolina began working on Phase II and focusing on building the state's capacity to support early intervention programs and providers in implementing evidence-based practices (EBPs) that will improve the SIMR. The IDEA Part C early intervention system in South Carolina has undergone significant changes in the past several years. These changes include a new lead agency, a new Part C Coordinator/Director, new Part C Data Manager, restructuring of state staff within the program, a new fiscal process, and the addition of a voluntary Corrective Action Plan with the OSEP. The following deficiencies have plagued the IDEA Part C early intervention program for many years:

- The program is ineffective at the timely identification and assessment of children who may have developmental delays;
- The program's structural division between the lead agency and the South Carolina Department of Disabilities and Special Needs (SCDDSN) in the middle of the 45-day eligibility process results in impaired hand-offs that further result in service delays;
- The program's lack of core infrastructure across all domains including management, physical facilities, information technology, analytical capacity, and others has resulted in a fragmented system that is inconsistent, highly localized, and ultimately not accountable to a central authority (Baker).

Many of the program deficiencies are being addressed through widespread systematic changes. Policies and procedures are being revised and the intake and eligibility process for the program is being overhauled. As the IDEA Part C system addresses the requirements of the CAP, longstanding program deficiencies are being addressed and corrected.

One area of noncompliance for the state has been the program's lack of a formal process to conduct family assessments. Addressing this longstanding issue, as outlined in Phase II of the SSIP, is required to bring the program into compliance and should have a direct impact on early intervention programs and providers, and in turn, the state's SIMR.

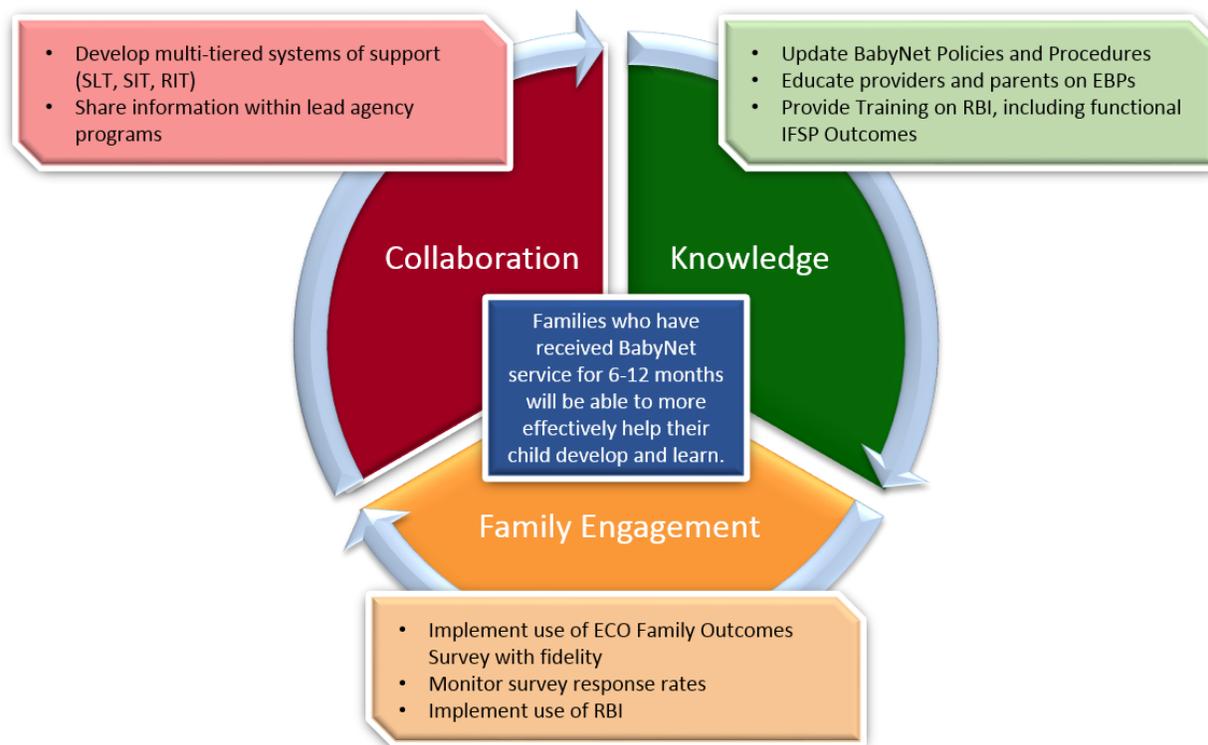
In Phase I of the SSIP, four coherent improvement strategies were identified. These strategies centered on family outcomes surveys, family assessment, public awareness, and implementation of recommended practices. Through additional work with stakeholders and technical assistance providers, the state has decided to consolidate the original four coherent improvement strategies and only focus on the Family Outcomes Measurement System (FOMS) and the family assessment process. The state has also shifted focus from changing just the family outcomes survey tool to the entire measurement system. The third

and fourth original strategies will not be completely forgotten, as many of the identified activities can be included with the final two strategies. The two final coherent improvement strategies are:

- If the state improves the Family Outcome Measurement System (FOMS), response rates and quality of feedback will improve, and the Part C system will have a better understanding of how families feel they are able to help their child develop and learn.
- If BabyNet System Personnel use effective practices in family assessment, then families will become more engaged in the identification of their resources, priorities and concerns and will improve their ability to help their child develop and learn.

The Theory of Action (ToA) was revised to incorporate the changes related to coherent improvement strategies. The ToA was also updated to reflect outcomes and activities necessary to address the SIMR. See figure 1.

Figure 1



Infrastructure

Family Outcomes Measurement System

South Carolina's Family Outcomes Measurement system has not been revised since its original implementation in 2006. The state will begin revising the FOMS by completing the S-FOMS Self-Assessment tool with stakeholders. This self-assessment tool will inform stakeholders of needed revisions to the current FOMS. Certain steps have already been identified by stakeholders, even prior to completion of the self-assessment. The state will review other states' Family Outcome survey processes

and procedures, as FOMSs vary from state to state. South Carolina will review work other states have completed in order to help make some additional decisions. The state will be particularly interested in dissemination practices and how practices correlate to response rates. The state will also begin sharing survey feedback (both qualitative and quantitative) with EIS programs to offer advisement on ways in which they can better serve families, specifically how providers can help families become better able to help their children learn and develop. The state will revise policies and procedures related to the FOMS no later than April 1, 2019 to ensure sufficient time for public participation. Revisions will be made a necessary based on comments.

Based on previous discussions with technical assistance providers, the lead agency has decided to transition from the NCSEAM survey tool to the ECO Family Outcomes Survey. Analysis of the ECO survey is more user-friendly and seems to provide very similar feedback to the NCSEAM. The state will monitor monthly survey response rates and target technical assistance in areas with lower rates first. As part of this technical assistance, the state will develop guidance for and train service coordinators on survey dissemination practices. Improved dissemination practices should lead to higher response rates. Through implementation of other evidence-based practices (i.e., the Routines-based Interview), the quality of feedback from families should also improve. This feedback will give providers a better understanding of how families rate the family outcomes and how they can in turn work to improve those outcomes. As regional FOMS trainings conclude, the lead agency will begin creating a working Frequently Asked Questions document that will be updated after each training session. This document will be a resource for training new staff, provide refreshers for current staff, and help maintain a level of consistency across the state.

Timelines related to revision of the FOMS are as follows (see Table 1):

- 07/1/2018-4/1/2019: Draft and post for public comment new FOMS Policies & Procedures
- 7/1/2019-8/1/2019: Collect and review Information on EBPs related to survey dissemination
- 7/1/2019-8/1/2019: Receive TA related to Use of the ECTA Statewide Implementation Guide
- 10/1/2019-11/1/2019: Access to and Training on New Survey Tools
- 12/1/2019: Post list of frequently asked questions to use in developing guidance for Providers
- 1/1/2020: Begin frequent data analysis related to FOMS

Family Assessment

South Carolina has yet to implement use of a family assessment tool. The Routines-Based Interview (RBI) is useful for developing IFSP outcomes, for developing and maintaining strong relationships with families, and for assessing the needs of the family (Boavida 2015). In the fall of 2016, the BabyNet State Leadership team (state office staff and partnering agency program managers) participated in a weeklong Routines-based Interview (RBI) training offered by the Siskin Children’s Institute. Shortly after completion of this training, Governor Nikki Haley issued an executive order naming the South Carolina

Department of Health and Human Services (SCDHHS) as the new IDEA Part C lead agency. The lead agency change, along with Part C Coordinator and Part C Data Manager changes, impeded the RBI state certification plan. This impediment allowed the new lead agency to plan for a more appropriate implementation strategy. The State Leadership team realized they were not the appropriate group to train the state on RBI. Due to the rigorous certification process, it was almost impossible for these state-level staff to assess enough families to be able to administer the tool to fidelity. The SSIP seemed like a perfect opportunity to re-introduce RBI implementation, but offered a much more systematic and strategic method. It is important to note that throughout this phase, the state acknowledges that appropriate implementation of the RBI includes writing high quality functional IFSP outcomes. The state views writing IFSP outcomes as part of the RBI, and will not address this as a separate strategy or activity. As explained in Phase I of the SSIP, South Carolina has decided to introduce the RBI region-by-region. The state will begin implementation in Region 4 of the state and strategically scale up to full statewide implementation.

Part C policies and procedures were revised in early 2019 to include the use of the RBI. Because the Part C lead agency is now the South Carolina Medicaid agency, there has been a great deal of work completed across programs to ensure that family and child assessment are Medicaid allowable services. This collaboration has provided answers to questions surrounding billing for RBI that have been outstanding for years.

The first step of the implementation plan has been identified as forming a Statewide Implementation Team (SIT). This team should include representatives from all sectors of early intervention in the state. The primary purpose of the implementation team is to ensure support and resources are available to implementation sites so they can adopt and use the RBI with fidelity. This team will also assist with taking the plan into their respective communities to help create buy-in and dispel any misunderstandings. It will be the responsibility of this team to begin their work by reviewing RBI implementation plans developed by other states or entities. Two large providers of service coordination in the South Carolina implemented the use of the RBI within their own programs several years ago. Each of these programs completed training by nationally certified RBI trainers and developed their own personal or agency implementation plans. Each provider also employs at least one staff member who has earned national certification to train on the RBI. These programs are excited about this significant change and have offered assistance in the statewide implementation effort. As part of the state's contract with a certified RBI training team, the trainers will also assist with implementation planning. This will be a beneficial contribution as the trainers have vast knowledge of how other states have implemented us of this tool. They will provide information to the SIT that will assist in decision-making related to RBI implementation.

After the implementation team is formed, implementation sites will be determined based on criteria established by the SIT. Implementation sites will be determined based on current data and resources. Though the state has already decided that implementation will begin in Region 4, future sites will be determined by the SIT. The SIT will work with the contracted RBI training team to develop/identify training materials and fidelity checklists. As previously mentioned, the state has decided to contract with a nationally certified RBI training team. The training team will recommend a training plan that will be reviewed by the SIT and revised as needed. In addition to training service coordinators on RBI administration, the training team will also help to prepare service coordination supervisors as RBI coaches. At this time, the state does not have the resources to employ/contract with dedicated full-

time coaches. This model will be “piloted” in the initial implementation site and revised as needed. State office staff understand that this is not the most effective way to implement coaching, but believes with proper training and support, supervisors will be able to coach their staff in a manner that will lead to fidelity across programs and eventually the state.

An important component of the implementation plan will be to educate and support families in this change. For some families, RBI will be the only type of family assessment they will have experience, so it should be more natural. For families who have known (or had) other children who received Part C services prior to RBI implementation, it will take focused effort to make sure they understand the importance of family-centered services, including family assessment. The state will rely on the Family Connection of South Carolina (also part of the SIT) to lead the way in educating families on this new approach to assessment and eventually service delivery. If families understand the importance of family-centered services and know what the related EBPs look like, they will become more engaged in the assessment and service delivery processes. Families will be able to recognize appropriate practices by providers, and the state believes that this engagement will eventually lead to families feeling more confident in their ability to help their children develop and learn.

After initial training occurs, the SIT will help to develop local communities of practice. These communities of practice will be resources for implementers to share findings, concerns, successes, and any other useful information related to RBI implementation. SIT members will monitor these communities and provide assistance and resources as needed. With the assistance of the national RBI training team, the SIT will also determine fidelity measures and criteria for state certification. The team will need to determine how many RBIs staff will need to administer, the rating level that will constitute a successful RBI, and who will rate each RBI.

The State Leadership Team and SIT (if different) will meet periodically to review the progress of the implementers. During these meetings, decisions will be made related to what is working well, not working well, and what challenges may lie ahead as the implementation team moves on to the next region.

Timelines for activities related to RBI implementation are as follows (see Table 1):

- 4/16/2019: Secure RBI training location for Region 4 (first implementation site)
- 5/1/2019-6/30/2019: Review other states' policies, procedures, and implementation plans
- 5/1/2019-6/30/2019: Information from in-state early implementers
- 5/1/2019-6/30/2019: Access to families who have participated in administration of the RBI
- 5/1/2019-6/30/2019: Review training materials already developed by other states and entities
- 7/1/2019-8/1/2019: Receive TA related to use of the ECTA Statewide Implementation Guide
- 8/1/2019: Secure RBI locations for second regional training
- 11/1/2019: Secure RBI locations for third regional training
- 2/1/2020: Secure RBI locations for fourth regional training

Current Improvement Plans and Early Learning Initiatives

In order to build state capacity to support Early Intervention Service (EIS) programs and EIS providers with the implementation of evidence-based practices (EBPs) that will lead to measurable improvement in South Carolina's SIMR, the state continues to collaborate with various child serving agencies on several initiatives. Some were discussed during Phase I of the SSIP, while others have been added during Phase II of the state's plan. The South Carolina Part C early intervention program has continued to participate in work surrounding Infant-Early Childhood Mental Health as well as the State Pyramid Leadership team. One additional early childhood initiative that the BabyNet program has collaborated on includes:

Preschool Development Grant-South Carolina was awarded grant funding designed to increase access to quality early childhood programs and services for vulnerable children through:

- Child-serving agencies and organizations sharing a common vision, goals and outcomes for the state's birth to five system;
- Coordination, collaboration, alignment across the state's mixed delivery system that supports an increase in access for families;
- Shared recruitment and application processes;
- Coordinated efforts to maximize parents' knowledge of the ECE System and available services;
- Statewide activities to support transitions for children between various early childhood programs and into elementary school;
- Shared professional development to better meet the complex social and emotional needs of vulnerable children and families, include trauma-informed care;
- Expanded supports to providers to improve quality; and
- Improved data-driven decision-making.

In order to prepare for Phase II of the SSIP, stakeholder discussions with partnering agencies were held. During these meetings the IDEA Part C program learned of two additional initiatives that will be important in our SSIP work. Those include:

- A coaching framework that the Part B, 619 program has developed that can be shared with Part C Leadership staff.
- Ongoing collaboration between the state's Part B, 619 program and the Parent Training and Information Center (Family Connection) surrounding the Part B Indicator for Parent Involvement.

Finally, there are several initiatives within the lead agency which could impact infants and toddlers with disabilities and their families. Those include:

- Centralization of the IDEA Part C early intervention intake and eligibility process. This will allow children to move through the system much more efficiently.
- The integration and alignment of the IDEA Part C early intervention data system (BRIDGES) into the data systems that already exist within the SC Department of Health and Human Services.

All initiatives outlined above are designed to improve communication with families, provide high-quality professional development to EIS providers and/or improve the service delivery systems for children and

families served in South Carolina. Improved communication, high-quality professional development and systems improvements all have the potential to directly influence South Carolina's SIMR.

Support for EIS Program and Provider Implementation of EBPs

Implementing EBPs

South Carolina has yet to appropriately implement the requirements in CFR 34 §303.321 (Evaluation of the Child and Assessment of the Child and Family) of the Federal Regulations. Although previous policies and procedures called for an assessment of the family's resources, priorities, and concerns, the guidelines did not go far enough. Currently, the state does not consistently use a family assessment tool to gather information on families' resources, priorities, and concerns related to their routines, activities, and places. Based on discussions with the BabyNet State Leadership team, lead agency executive management, and the State Interagency Coordinating Council (SCICC), South Carolina has opted to mandate use of the Routines-Based Interview tool in fulfilling the requirements of CFR 34 §303.321 and §303.344, specifically related to family assessment and contents of an IFSP. The state leadership team has the full support of the lead agency to take the steps necessary to bring the program into compliance and selecting an EBP around family assessment has been supported. The state sought feedback from outside agencies during stakeholder meetings, including EIS providers who are already implementing RBI (early implementers).

The state will be entering into a contract with an RBI nationally certified training team. The lead trainer was mentored by Dr. Robin McWilliam, author of the Routines-Based Interview tool (and intervention model). Initial conversations related to a contract, specific training plan, and use of the State Implementation Guide have occurred. The first regional training will be held the week of May 28, 2019, and additional regional trainings will occur during the process to scale up to statewide implementation. There will be additional training focused on supervisory practices to ensure fidelity to the model, including the use of coaching and observation.

Implementing Coherent Improvement Strategies

Poor communication across stakeholders in Part C has been a longstanding area of concern for the state. The state has identified strategies to combat this deficiency. These strategies include the following:

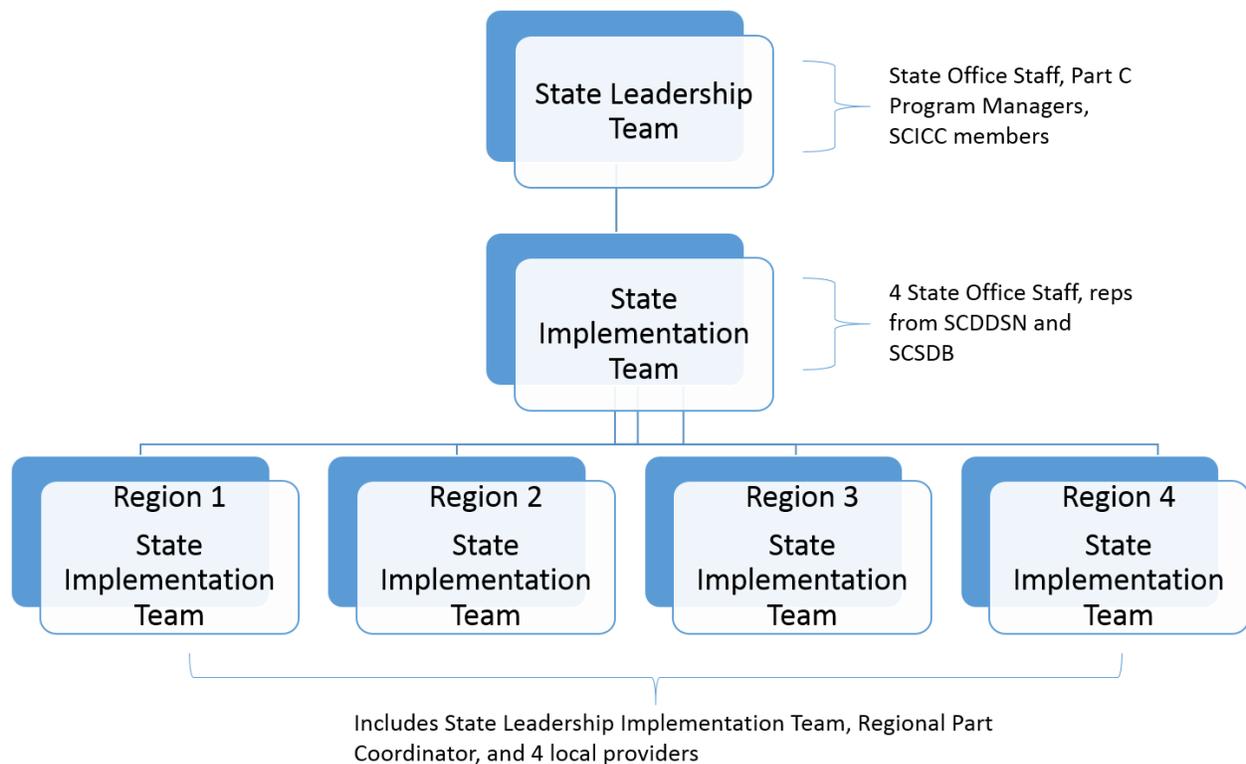
- Programmatic access to the Part C website for timely posting of resources and information
- Use of a listserv that reaches all levels of Part C personnel (participation is mandatory)
- More transparency from the lead agency with Part C Program Managers and the SCICC
- Better coordination and communication from the lead agency to local stakeholders during Local Early Intervention System (LEIS) meetings
- Access to share information through the SCDHHS Communications department

Early implementers of RBI in the state will be important resources during the initial planning phase. Their input will be gathered as we begin development of the State Implementation Guide. The state hopes to receive feedback related to successes and struggles the early implementers experienced during their individual implementations. For SSIP, implementation will be carried out by a multi-tiered system

of support. The State Leadership Team (SLT) consists of Part C State Office leadership staff, partnering agency program managers, and members of the SCICC. This team is responsible for making high-level decisions, appointing State Implementation Team members, and sharing progress towards implementation with additional stakeholders. The State Implementation Team (SIT) will consist of four state office staff along with South Carolina School for the Deaf and the Blind and South Carolina Department of Disabilities and Special Needs representatives. Each of the four state regions will have a regional implementation team (RIT). These teams will consist of the Regional Part C Coordinator, representative from the Parent Training and Information Center (PTIC), and additional state office staff (if needed). See figure 2. The need for additional local teams may be necessary after implementation begins.

Coordination among the SLT, SIT, and RITs will be necessary at various levels to support EIS programs and providers during the scaling up period and in sustaining the implementation of EBPs and to ensure that the steps and specific activities occur within the timelines. The Part C State Office will work with other programs within its lead agency to share of knowledge related to RBI with executive staff, ensure mechanisms are in place to allow for reporting of time (Medicaid billing) for the RBI. Collaboration with The State Department of Education’s Office of Special Education Services (OSES) to learn more about their coaching framework. The SIT will work with the PTIC to disseminate information related to EBPs and FOMS to families. Through continued and consistent collaboration and partnerships, the multi-tiered system of support will help to ensure a successful implementation plan.

Figure 2



Evaluation

Theory of Action Alignment

Based on a narrowing of the original four coherent improvement strategies to two, the state has revised its Theory of Action (ToA) to reflect the work of Phase II. The revised ToA still demonstrates the relationship among collaboration, knowledge, and family engagement. It shows how the increase in collaboration and knowledge to support Early Intervention Programs and providers will effectively improve family engagement. The state believes these efforts will have a positive impact on the SIMR.

Given the various levels of systems change underway within the IDEA Part C system in South Carolina, staff from the state leadership team have had ongoing discussions with executive leadership at the lead agency regarding the SSIP and its implementation. Discussion focused on whether the state should consider conducting the SSIP evaluation internally or externally given the amount of resources the agency is expending on Part C system improvements. The additional required resources by the lead agency are directly related to the activities necessary to achieve compliance outlined in the Corrective Action Plan. Executive leadership made the decision to utilize an external evaluator with several factors influencing that decision. Those factors include a limited number of resources (staffing) within the IDEA Part C system. Current Part C state level staff do not have the time necessary to devote to such an important project. Although the lead agency has staff who are capable of completing this type of evaluation work, there is not sufficient time or resources to help bring them up to speed on the work surrounding the SSIP. The external evaluation team will work with the SIT to determine specific evaluation questions and their relationship to the ToA.

Once an external evaluator is selected, the SIT will be key in communicating the steps necessary to build state capacity to support early intervention programs and providers with the implementation of evidence-based practices that will lead to measurable improvement in the SIMR. The resources necessary to address both coherent improvement strategies include:

- New policies and procedures
- The use of the new ECO family survey tool
- The capturing of data regarding response rates
- Research around evidence-based practices related to survey dissemination
- Working with a nationally-certified trainer to develop an implementation plan to take RBI statewide
- A way to capture feedback from families who participated in the RBI process

In order to show progress towards meeting the coherent improvement strategies and ultimately the SIMR, the following activities will need to be conducted:

- A review of other states' tools used for family outcomes
- South Carolina will need to change its survey tool from the NCSEAM survey to the ECO Family Outcome Survey
- Monitor response rates in each region of the state
- Develop an implementation structure to provide professional development
- Form a statewide implementation team
- Educate families about the ECO Family Outcome survey and the RBI process

Short-term goals of this work include:

- Survey response rates will increase statewide
- Families are better able to identify functional IFSP outcomes based upon their resources, priorities and concerns

The long-term goal is that families who have received BabyNet services for 6-12 months will be able to more effectively help their child develop and learn.

Evaluation Stakeholders

The stakeholders identified in Phase I were very similar to those who participated in stakeholder sessions in Phase II with a few exceptions. During Phase II, the state leadership team invited staff from early intervention agencies who had already begun implementing RBI and employ nationally certified trainers to join the group. Given the coherent improvement strategy of *“the use of effective practices in family assessment,”* it was important to have input and buy-in from staff at these agencies.

Other stakeholder input was received from partnering agencies who participated during Phase I, including representatives from the state’s Parent Training and Information Center (Family Connection of South Carolina), the State Department of Education-Office of Special Education Services (619 Preschool Coordinator), the Interagency Coordinating Council (Chairperson), and Local System Point of Entry staff.

Early RBI implementers in the state who participated in stakeholder meetings will be valuable in assisting with creation of evaluation questions due to their level of experience that other stakeholders cannot provide. Additionally, the State Department of Education, Office of Special Education services has developed a coaching framework that could provide insight into additional evaluation questions. It will be important for the state leadership team to build an implementation structure that provides stakeholders with ongoing opportunities to provide input and feedback on the evaluation process and/or results. Keeping the lines of communication open across partnering agencies and sharing updates with the South Carolina Interagency Coordinating Council will ensure stakeholders stay informed. Building a mechanism for Family Connection to collect parent feedback on the change in survey tools or the implementation of the RBI process will be important.

Evaluation Methods

During Phase I, the state identified three common deficiencies in the infrastructure overview that have been previously mentioned in this report. All three deficiencies are currently being addressed as follow-up to the corrective action plan. Many of those initiatives will put the state in a better position to implement the coherent improvement strategies that will ultimately lead to the intended improvements in the SIMR. The direct enrollment of providers from the South Carolina Department of Disabilities and Special Needs as Medicaid providers will ensure a direct line of authority to hold these providers accountable for the activities necessary to address the coherent improvement strategies. Effective professional development activities are a crucial component of development of a revised FOMS and implementation of the Routines-Based Interview process.

Infrastructure changes within the lead agency will also support the state’s work towards measurable improvements in the SIMR. Changes to the 45-day process will allow young children who are referred to

be evaluated for program eligibility much more quickly. More time in the IDEA Part C program as well as a more coordinated, consistent service delivery system at all levels, should result in staff who are more confident in their work. Relationships have also begun to be repaired with many partnering agencies and referral sources, which will should result in those agencies being more receptive to supporting the work of the SIMR. The state also believes that improved relationships with partnering agencies will improve child find and referral efforts. Referring children at a younger age, implementing RBI and, educating families on the importance of family assessment will help to foster higher levels of family engagement at a younger age and positively affect the SIMR.

The SIT will establish the criteria for successful implementation and how it will be measured. The state leadership team feels that an increase in the Family Outcome survey response rates, quality of feedback from families, and increased rates on the survey responses related to outcome 4C of the ECO survey tool, would be a few important measures to consider. For RBI implementation, the SIT will determine the criteria for service coordinators to earn state RBI certification. The criteria will include number of required RBI administrations and scores on the RBI Implementation Checklist. This will also include a plan for periodic follow-up trainings and additional support for supervisors/coaches.

Data Collection

The SIT will work with the external evaluation team to determine a system for collecting implementation data and data applicable to the SIMR that yields valid and reliable data collected at regular intervals. The evaluation team will determine if sampling will be used, and if so, will ensure that the sample is representative of all the infants and toddlers receiving EBPs or impacted by coherent improvement strategies. The evaluation team will work with early implementers to compare data collected during their implementation and how it may influence statewide data collection.

Evaluation Data:

Once the SIT and external evaluation team have developed the evaluation plan, it will be important to consider the effectiveness of the implementation, assess the state's progress towards achieving intended improvements and make modifications to the SSIP as necessary. The following considerations should be part of that plan:

- How often the data will be captured?
- How often the data will be reviewed and analyzed?
- Who will be responsible for reviewing the data?
- How often the data will be shared with stakeholders?
- How the data captured will influence the activities being carried out around the state?
- How will the state evaluate the effectiveness of the professional development being delivered and if/when there are concerns about its effectiveness how will the state make adjustments?
- How will the state determine if changes need to be made to the state's SSIP?

Technical Assistance and Support:

In order to support early intervention programs and providers in the implementation of EBPs, the state will need support at various levels. First, the IDEA Part C program will need the support of the lead

agency and key stakeholders. These stakeholders include providers currently implementing some of the activities that are part of the SSIP, partnering agencies serving young children and their families, and statewide early intervention programs and providers. Secondly, the state will need the assistance of OSEP and National Technical Assistance providers. It will be helpful as the state moves to establish an evaluation plan that we have data and information on how other states (with similar structures to South Carolina) addressed barriers to improving their results and how they overcame those barriers. Information on areas in which other states achieved success, would also be helpful to have while moving to establish an evaluation plan. The state will need assistance in linking to states who have changed their FOMS process to help avoid pitfalls and other potential challenges.

South Carolina will also work closely with nationally certified RBI trainers who have committed to help the state develop an implementation plan using the ECTA Statewide Implementation Guide. The national training team will lead the regional RBI trainings in one region of the state as well as slowly scale up to statewide implementation over the next few years. The training team will assist in preparing the early intervention programs and providers to support the work of the RBI, including coaching.

Table 1

SSIP Phase II Gantt Chart											
RBI Activity	Apr-19	May-19	June-19	July-19	Aug-19	Sept-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20
Secure RBI training location for Region 4 (first implementation site)	4/16/19										
Review other states' policies, procedures, and implementation plans		5/1/19-6/30/19									
Information from in-state early implementers		5/1/19-6/30/19									
Access to families who have participated in administration of the RBI		5/1/19-6/30/19									
Review training materials already developed by other states and entities		5/1/19-6/30/19									
Receive TA related to use of the ECTA Statewide Implementation Guide				7/1/19-8/1/19							
Secure RBI locations for second regional training					8/1/19						
Secure RBI locations for third regional training								11/1/19			
Secure RBI locations for fourth regional training											2/1/20
FOMS Activity	Apr-19	May-19	June-19	July-19	Aug-19	Sept-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20
Draft and post for public comment new FOMS Policies & Procedures	4/1/19										
Collect and review Information on EBPs related to survey dissemination				7/1/19-8/1/19							
Receive TA related to Use of the ECTA Statewide Implementation Guide				7/1/19-8/1/19							
Access to and Training on New Survey Tools							10/1/19-11/1/19				
Post list of frequently asked questions to use in developing guidance for Providers									12/1/19		
Begin frequent data analysis related to FOMS										1/1/20	

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