

Got Evidence? Where to Find and How to Use It to Make Sound Decisions About Evidence-Based Practices

[Slide 1 – Got Evidence? Where to Find and How to Use It to Make Sound Decisions About Evidence-Based Practices]: Angela McGuire: Good afternoon and welcome to the second webinar in our series *Got Evidence? Where to find it and How to Use It to Make Sound Decisions About Evidence-Based Practices*. I am Angela McGuire from WestEd and I am presenting today with my colleague Taletha Derrington from the American Institutes for Research. In the background today, we have Monica Mathur-Kalluri from WestEd. And, I didn't see Virginia's name in the list but hopefully Virginia Buysse from AIR will also be joining us.

[Slide 2 – Got Evidence? Where to Find and How to Use It to Make Sound Decisions About Evidence-Based Practices]: We are all partners on this work under the National Center for Systemic Improvement. Monica and Virginia will be watching and posting in the chat as we proceed through our presentation today. So, please do feel free to chat. Our intention today; oh, sorry. Tanner do you want to advance?

[Slide 3 – Presenters]: There we are. There you see our names listed. You can go to the next slide Tanner.

[Slide 5 – Learning Objectives]: Our intention today is to continue the demonstration of the four steps to evidence-based decision-making that we initiated a couple of weeks ago during the first webinar. And today we will apply the three circles of evidence-based decision-making to address an example question. I will walk us through NCSIs Best Available Research Evidence or, BARE tool. And then, Taletha will delve into information that can be found on websites that provide information and guidance to various family and professional audiences. She'll discuss ways to appraise evidence using the FAIR test and go a little bit into selecting evidence-based practices collaboratively. So, Tanner do you want to give me control now?

[Slide 6 – NCSI Resources]: I'm watching for my screen to change as I get control of the cursor. Thank you. So, for those of you who were not able to attend the first Webinar and as a quick review for those of you who were. Here are links to the three resources that we've assembled into a suite of tools on evidence-based practices. The first tool up here, Got Evidence? Is an animated video explaining the whole evidence-based decision-making process in an engaging and easily digestible way and you're free to use the video on your website's and in trainings.

The second tool right here. Three Circles of Evidence-Based Decision-Making in Early Childhood. This is a downloadable PDF that you may print out and use as a guide to the decision-making process. It is; it's pretty much what we're going to be following for this

presentation. And the third is an online tool that we will demonstrate and explore in detail today.

And as we're talking, you see the links that have been posted in the chat. You can click on those links and check things out as we're going through the presentation. And you'll see that all of those resources are in the NCSI online library.

[Slide 7 – Steps of Evidence-Based Decision-Making – A REVIEW]: And there we go. Okay so, first a quick review of the whole process. Step one is to define your question and we covered that in the first Webinar. The question is foundational. It guides your search for the evidence which is the second step in the decision-making process.

There is evidence to consider in these three circles which you see on the screen. The best available research evidence is in the purple circle. Professional wisdom and values you see in that teal circle. And then family wisdom and values that you see in the green circle. We're going to spend a lot of time in these three circles today.

Step three is to appraise the evidence that you that you have found. And step four is to make a decision about an evidence-based practice.

[Slide 8 – Step 1: Define Your Question – A REVIEW]: During the first webinar in this series you may recall that we provided a question template that goes like this. For children and families with X characteristics, the children and families that you are working with. Where Y intervention, they type of intervention that you're looking for be effective in achieving Z outcomes? Or the outcomes that you hope to achieve.

[Slide 9 – Step 1: Define Your Questions – Example from Webinar 1]: We're going to use one of the questions that we defined in the first webinar to demonstrate the process together and collect some evidence. And that question is, for children birth to three years old and their families, what models of home visiting are effective for promoting children's developmental outcomes?

[Slide 10 – Preview of Step 3]: And a quick spoiler alert here. Under step three, we described the FAIT test to assist you in appraising the evidence that you've found. The acronym FAIR stands for feasibility, acceptability, impact and relevance. Ultimately you want to identify practices that meet these criteria. But, you don't need to wait until you've collected all of the evidence to apply the fair test. And we're going to highly as we go through this process how some sources of evidence call out some of these criteria for you.

[Slide 11 – Step 2: Consider the Evidence from Research – LET'S DIG IN!]: So, let's get started. So, the link to the BARE tool is right here on the slide and you see it in the chat. As we said in the first webinar, a good place to start is with the Best Available Research Evidence or BARE circle. The circle focuses on the latest research evidence and can help guide your search in the professional and family circles as well. By generating a manageable search of practices and their components.

You might not always start in this circle. Sometimes your professional expertise will suggest an approach or practice that you want to investigate. Or families may suggest an approach or practice that you want to start with. But, when you don't know where to start the available research evidence is a great place to go. And the BARE tool does some of the initial work for you by taking you directly to some of the most reliable sources for research evidence in early childhood.

If you click on the link in the chat or type it in as you see it in the slide you can go directly to the tool and then it will be a little easier maybe for you to see what we're going to be sharing with you. Three things before we get started. First is that the world of research evidence is always changing and so are the websites and links on those websites. So, hopefully the body of research evidence in early childhood is always growing. So, what you've found in the past may not be what you'll find in the future.

Likewise, the thinks that we use today may not be the same links in the future. We've tried to make sure that the BARE tool is up to date. But as you know, people are always improving their websites and changing things. We just recently; as we were preparing for this presentation found that some of the links were different. We've tried to get all of those up to date for you by today.

Two, because the Internet can be unpredictable especially during live webinars we decided that we're going to do this demonstration using screen shots. And that brings me to number three. Which is as the non-researcher on this team, we thought that it would be a good idea if I tried out the BARE tool for the simulation so that; so, most of the screen shots that you're going to see come from what I was able to pull up initially when I tested out the BARE tool with our test question.

[Slide 12 – BARE Tool]: So, when you click the link for the BARE tool you see this Google document. And on the left, you see the long list of names and links of the research sites.

[Slide 13 – BARE Tool Organization]: The sites are grouped as sites with rigorous review standards up here at the top for evaluating evidence. Other aggregating sites up here in this like second section. These are without a highly rigorous vetting process so, some of these are lit reviews for instance. And then interventions with emerging research evidence. These are sites dedicated to individual intervention models where the sources of those models have posted related research.

So, you see things here like the Hanen Model and Positive Behavioral Interventions and Supports. This is not an exhaustive list. We just updated it as I said earlier because some of the websites had changed. But, it gives you an idea of what is out there.

[Slide 14 – BARE Tool Features]: The table also describes the types of research evidence that may be found on each site. So, the primary focus to help you to determine which site to maybe explore first. Then specific details of the websites are displayed by the checkmarks in the middle columns right here. And these include whether or not the sites have a searchable database, research syntheses, intervention summaries and effectiveness ratings. Which ages are included in the research; birth to two years, three

to five years or both. Whether the site includes research on family interventions, professional development and implementation and who sponsors the site.

[Slide 15 – Step 2: Consider the Evidence from Research – LET’S PRACTICE!]:

Since our question defined the intervention type as a home visiting model, we’re going to try the HomVEE site for evidence for our question about home visiting strategies. We can see from the table that HomVEE stands for Home Visiting Evidence of Effectiveness and that the site focuses on home visit models. So, that seems promising and we also see that the site has a searchable database and we can expect to find research summaries, intervention summaries and effectiveness ratings for models used on children from the age of birth through the age of five. We may also find descriptions of family interventions and intervention strategies.

[Slide 16 – Welcome to the HomVEE Site]: So, when you click on the link that says HomVEE you actually see; go to the HomVEE site. If you scroll down on this page which I’m not able to do because it’s a screen shot. But, when you scroll down on the page and if you’re kind of following along and you’ve click on the HomVEE link. You will see a table listing various home visiting models. And on the left are some filtering boxes.

[Slide 17 – Filter the Collection Based on the Question ...]: And the filtering boxes look like this. So, based on our question we can immediately filter the research by the age of the children. So, right here you click each of these boxes to get first through three years. And then we can also filter by outcomes that; by outcome. So, HomVEE reviews studies in eight outcome domains and those would be listed here.

You can’t see them all. But, they cover outcomes for families; such as family economics self-sufficiency and positive parenting practices and they include outcomes for children like child health and child development and school readiness. Child development and school readiness is the closest outcome to our desired outcome of promoting development. So, we’ll filter by that one. So, we’re going to filter by age and by child development.

[Slide 18 – HomVEE Model Report: Unsorted Results]: And we immediately get fourteen reports. So, again if you’re following along you should see fourteen reports if you filtered; if you filtered that way. So, the second column shows a green box with a white checkmark if the evidence meets criteria established by the U.S. Department of Health and Human Services or an evidence-based model and the green row shading provides additional visual cues.

[Slide 19 – HomVEE Criteria]: To meet the Health and Human Services criteria the model must meet at least one of these two; oops, I’m sorry. One of these two criteria. Did I skip ahead? I’m sorry. Nope, sorry. I’ve got my pages flipped around.

So, the models that have the green check marks that have met Health and Human Service criteria for an evidence-based model you can check out what that means on the website by clicking on this link here where it says HHS criteria for an evidence-based model.

[Slide 20 – HomVEE Criteria for an Evidence-Based Model]: To meet Health and Human Services criteria the model must meet at least one of these two criteria. There has to be at least one high or moderate impact study of the model that find favorable statistically significant impact to two or more of the eight outcome domains. So, as I mentioned those eight outcome domains are what appear in that filter on the left. There must be at least; or, there.

Tanner Petry: We lost audio.

Angela McGuire: We show this because sites with rigorous standards will provide these types of definitions about the evidence that appear there. If your program is a home visiting program under the Maternal Infant and Early Childhood Visiting Program, then you have to use a model that meets these criteria. Otherwise, you have more latitude. But, it's still good to know which programs meet the rigorous criteria.

[Slide 21 – HomVEE Model Reports: Results Sorted by Those That Meet Evidence Criteria]: So, if we go back to our list we can sort the original fourteen models by meets evidence criteria which is right here where the check boxes are. And if you're on the site and following along you will see that a total of twelve models meet the criteria. So, they are removing the ones that don't meet the criteria.

[Slide 22 – HomVEE Model Report: Informative to Look at Models with Limited Evidence!]: If you scroll down to the bottom of the list you'll see a triple P which is a well known model and you'll see that it does not meet Health and Human Services criteria. There nothing there because, we've sorted all of those that don't meet, and they've dropped to the bottom. This is as informative sometimes as knowing which models have good evidence and meet effectiveness criteria. You'll also see models that you've probably heard about like Nurse Family Partnership and Parents as Teachers and you'll notice in the second column the number of studies rated as high or moderate. It's right there; twenty-four, twenty-four, seven. This is an important part of the effectiveness criteria and combined with the positive outcomes to define the model that is evidence-based.

[Slide 23 – HomVEE Model Report: Results Sorted by Those That Meet Evidence Criteria]: So, back to the list of models. If you sort the list again by meets evidence criteria descending, three models rise to the top. So, you'll see Safe Care which has the goal of preventing child abuse. You'll see Play and Learning Strategies or PALS and Attachment and Bio-Behavioral Catch Up. If you read the favorable results right here; information, I'm sorry right here. Before the model it will give you a better a clue as to how it will match your purpose.

The first one might not be the best match unless you're working with families involved in the child welfare system. Here's an example of where you might want to refine your question to be more specific about the characteristics that the children or families that you work with. But for our example, we wanted to keep it broad so, PALS; the Play and Learning Strategies model looks interesting. So, we're going to click into the PALS model and get more information.

[Slide 24 – PALS: In Brief]: On this page, the side navigation bar allows you to quickly navigate and that's right over here; to other content about this model. The model description gives you information related to the content, format and training required to implement the model. This will give you some idea of the feasibility and relevance of the model for your particular context. And remember that feasibility and relevance are a part of the FAIR test for appraising evidence. Here we see; if you can read the bold print in the screen shot right here. That if you were working with a tribal population that it does not meet effectiveness criteria as established by Health and Human Services.

[Slide 25 – PALS: Model Overview]: The model overview gives you more information about the feasibility and relevance in particular, that the model is conducted by a trained parent coach and that there are specific ages of children that the curricula target.

[Slide 26 – PALS: Summary of Findings]: It is important to look at the summary of findings if the site provides them. So, on the HomVEE Site, the summary of findings appears about mid-way down in the in-brief page for each model. This is where you'll find evidence on the impact or the I in FAIR. So, here we see a table for the PALS infant model and the top of the table; you can see that blue banner down at the bottom there. The top of the table for the PALS toddler model.

Again, this is interesting because as you can see there was only one study that showed a favorable effect when child development and school readiness was the primary outcome. But, there were fifteen studies showing no effect. However, we see not studies showing unfavorable or ambiguous effects. So, that's good.

[Slide 27 – PALS: Implementation]: The information providing under the implementation tab of the model overview further informs your appraisal process with more detailed information on pre-requisites for using the model like types of agencies, staffing requirements, technology requirements and that kind of thing and also what training is required to implement the model and the costs associated with the model.

[Slide 28 – PALS: Model Overview and More Information]: If you still need more information the model overviews give you a link to find it. But full disclosure, if you click this link it doesn't work. So, you can Google Children's Learning Institute PALS and go directly to the PALS program landing page which is what I did.

[Slide 29 – Children's Learning Institute – PALS Information]: Woops, sorry. My controls are not reacting as quickly as my fingers are. So, here's the Children's Learning Institute landing page. And the second paragraph on the PALS Program landing page reads the program is facilitated by a trained parent educator who presents each session to the parents and coaches the parents in using specific techniques. In coaching sessions, PALS uses videotaped examples of real mothers and children to demonstrate each concept and allows the parent to critique these examples before practicing the new skills with her own child. Guided practice opportunities during each session help parents move from watching, listening and talking, to doing. This information may help you to assess whether the approach would be acceptable to families and professionals in your program. The A in the FAIR test.

[Slide 30 – You May Continue Your Search]: So, that was a pretty deep rabbit hole on one of the; one model that we surfaced through the BARE tool. And of course, you could continue your search for home visiting programs at the various research sites. But, for now I'm going to turn it over to Taletha to explore the next circle of evidence.

[Slide 31 – Step 2: Consider the Family Wisdom & Values Evidence – Let's Practice!]: And I'm going to click in and I'm going to give control back over to Tanner.

Taletha Derrington: Okay, thank you. Am I unmuted successfully? Okay, great. So, just to let you know we will be posting this particular slide deck so that you can recreate the experience yourself later on. I mean it will be posted once we transcribe it etcetera to the website; to our NCSI resource library.

And another important thing, I just wanted to reiterate what Angela said and thank you Angela for taking us down that rabbit hole. As you can tell, you could have got a little bit deeper but, we don't have all day. So, the point that I wanted to make is that sometimes it might be good to quickly look at the other sites. Particularly those that have rigorous standards to see if the specific model that you've been more deeply researching on one site is listed on another site. Because, they often are cross-listed and there can be similarities and differences in what is presented about the model on each site.

Some sites have more information. You know; remember the check boxes on the BARE tool that indicate what each site provides. Another interesting thing is that the evidence criteria might be different. So, for example other sites don't use the HHS criteria for evidence-based program models. So, on another site it might; actually, might meet criteria. But again, it's just something to keep in mind.

So, moving to the next circle and again, you can start in any circle that you want to. We do suggest research because it's important to know; you could have found out that something has good evidence you know two years ago. Or it didn't have an evidence for a specific population. But then you; say you know a model and you've been using it but then you're like oh, let me check the evidence. And you can go back and say oh, there's a new study with you know a culturally and linguistically diverse sample of children for example.

So, we'll move on to the family circle. Actually, you can stay back on the prior slide thanks. You may recall from the first Webinar if you had a chance to attend or listen to it that it includes both the individual or particular family with whom the evidence-based practice is being considered as well as the collective wisdom and values of families in general. So, a search of collective wisdom and values would access information and evidence available from sites driven by family education, information and support such as Family Voice, Hands and Voices and Parent Technical Assistance Centers funded by OSEP.

Again, this is not an exhaustive list. There are probably other family resource sites. Head Start probably has some focus on head start but, we'll go with these. And again, what we're looking for is collective information about what families know about practices in general on home visiting models in particular to support developmental outcomes for their children. Sometimes families you know are not particularly experts at those areas and sometimes they are.

But, we want to know what's important to families about models in general. And then any other information that you can use to determine whether a specific practice is a good match. So, is it acceptable and relevant from our FAIR test for the families that you're going to be working with? Next slide please.

[Slide 32 – Family Voices]: So, I went to the Family Voices site and I tried filtering. As you see on this screen shot along the left side, there are some filters. So, I tried selecting again like Angela did options that came closest to what we had in our question specific to home visiting. And so, I looked for best practices, some with centered care, family engagement, family professional partnerships.

I also typed in home visiting into the search box that's at the top of that filter list. And nothing related to our search tended to come up; we didn't see things come up. But, the site focuses on health care related topics. So, it's not completely surprising. But, it's also something good to know if you are working with a family that has a need specific to health care for their child. Next slide please.

[Slide 33 – Hands & Voices]: So, then I tried the Hands and Voices site and under the resources tab; you see the orange banner with tabs in the top part of the thing; the site. So, you'll topics and then that will expand to a list that includes early intervention as highlighted by the blue arrow. Next slide please.

[Slide 34 – Hands & Voices]: So, if you click on that; here is a screen shot. It shows you the top of the expandable resources tab for early interventions that's indicated by the arrow. My computer is about to reboot itself so, let me make sure that it doesn't do that. Okay, next slide please.

[Slide 35 – Hands & Voices (continued)]: So, again if you click that and you scroll down you'll see this list of articles that are written for and about early intervention from birth to three for children who are deaf or hard of hearing. So, this site as you see; you might know it from the name focuses on this population. So, it might be especially good to look at this site if you're working with a child who is deaf or hard of hearing or if their parent is deaf or hard of hearing. And you know; however, although this is a specific site often times what parents in one group wants don't match what parents generally want. So, here we actually do see something that might be useful and it's a parent's wish list for early intervention that's indicated by that arrow. Next slide please.

[Slide 36 – A Parent's Wish List for Early Interventions: Attitudes]: So, you click into that and then you find; well there's a little bit more than just this. But, I wanted for people to be able to read it easily. So, there are these points about attitudes. Do I believe that families bring unique expertise to our relationships? Do I believe in the importance of family participation in decision making for early intervention? And then do I believe that family members' perspectives and opinions are as important as professionals? Next slide please.

[Slide 37 – A Parent's Wish List for Early Interventionists: Partnership]: Then it provides this list for points related to partnership. So, parents should drive the process. Early intervention ultimately comes down to relationships. The trust is established through a basic premise of respect toward the parents, their values and culture.

So, this wish list provides insight from a collective group of parents into characteristics of professional attitudes and practices in forming partnerships with families that they would like imbedded into an early intervention setting and within practices regardless of what the practice is. So, this list might be useful in assessing whether or not a particular practice is a good fit. So, again is it acceptable or relevant for families who will be receiving home visits? Assuming that the home visiting model can align with these wish list points. Next slide please.

[Slide 38 – Back to Collective Family Wisdom & Values]: So, the third site that we will look at today is the OSEP funded Parent Technical Assistance Centers. So, this is a site for parent information and resources. And it provides an essential hub or information and products created for the network of Parent Centers that serve children; that serve children with disabilities and their families. The link at the bottom of the slide and in the chat is for the resource library for CPIR. And on this screen shot, you can see a list of common search topics.

So, there's IDEA, laws, for parent centers, early intervention slash childhood, school aged and high school and beyond. You can also enter a search term directly into the box at the top. And you also see that there is a Spanish index to English resources and an English index to Spanish resources. So, that is helpful for families from that cultural and linguistic background. Next slide please.

[Slide 39 – Center for Parent Information & Resources]: So, I used the topic filter for early intervention and it brought up this screen. And you can refine the results on the search bar on the right that provides additional filters. I selected highly rated which you can't see because it's covered up at the bottom. But when you select that you can see that this site; if you can see the small print that it shows seven hits that provide a few potentially relevant links to pages with additional resources that might inform us about the alignment of how components with collected family wisdom and values.

So, for example parent engagement in natural environments are relevant to the PALS component. You remember when Angela; I'm not sure if she was able to read them earlier. But, one of the components was that PALS is coaching the parents so that in the end he or she is the one practicing the skills with the child. And that this is done throughout the day during routine activities.

So, the enlarged screen shot at the bottom shows you a link to providing early intervention services in a natural environment which takes you to a collection of resources on that topic that you might want to explore further. In the interest of time, we're not going to do that together today. But again, the idea here today is that we're laying out a process by which you would identify evidence and resources that are potentially relevant to your question and can inform your decisions about the fairness of a given practice for your question. Next slide please.

[Slide 40 – Step 2: Consider the Family Wisdom & Values Individual Evidence]: So, going back again to think about the family circle, we want to consider the individual level. So, here you would want to know what families of the specific children that you are thinking of say about their priorities and preferences. And this was touched on in the animated video that we showed in Webinar one. So, we'd like to open it up for a brief

chat discussion here about how might you gather evidence from these families? And then also, how about looking with them together at the research evidence?

Does anyone have any experience doing that or ideas about it? Well, we'll continue discussing it. Feel free to put it in the chat as we move along. One of the things that you might think about is that this was an example of stakeholder engagement. And you know you want to know the specific child and family and their priorities and preferences.

If you're considering implementing the model across the whole program; either a local program or even across the whole state which might be the case for our home visiting model. Then you might want to gather evidence from a group of families who represent that program. Who are either currently or recently participated in those services. So, think about; if you don't already have ways to do that, we would encourage you to establish ways to do that as a part of this process. So, the next slide please

[Slide 41 – What About the Professionals? They will be Delivering the Model]: So, now we would turn to the third circle but not the last circle it's just third in the order in our presentation today. So, professionals; they will be delivering and implementing the model. So, just like the family circle you will want to consider evidence from the collective and the individual levels. Next slide please.

[Slide 42 – Step 2: Consider the Professional Wisdom & Values Collective Evidence]: So, the collective level includes white papers and policy statements and briefs from professional organizations. So, here we display a list of suggested organizations that are available our free services guide. Which a link was at the beginning of the Webinar in the chat. It's not exhaustive, we don't endorse any one in particular. We just wanted to give you an idea of what is out there and there are definitely more.

So, for example we have associations related to specific areas of practice. So, we have Pediatrics, Occupational Therapy, Physical Therapy, Psychology, Speech-Language-Hearing, the Division for Early Childhood, the Head Start Early Childhood Learning and Knowledge Center, NAEYC the National Association for the Education of Young Children, Social Workers, CDC, the National Head Start Association and Zero to Three etcetera. And I'm sure that there are more but, we picked these that are particularly relevant to you know the different disciplines that we; that work with young children and disabilities. Next slide please.

[Slide 43 – Step 2: Professional Wisdom * & Values from DCD and NAEYC]: So, today we're going to dig into two of those sites to see what we can find there. We'll look at the DEC recommended practices. And we'll look at NAEYC for their position statement. Next slide please.

[Slide 44 – DEC: Recommended Practices Resource Library]: So, here; this is actually the DEC's recommended practices resource library. And you can filter the library by the categories on the blue navigation bar in the middle of the web page. So, the options are by recommended practice by scope or level. Which means the level; is it just awareness building or is it building knowledge and understanding or is it actually building

skills and implementing the practice? The last two filters are by audience and by setting and age. Next slide please.

[Slide 45 – DEC: Resourced for Home Setting]: So, I chose recommended practices for the audience of practitioners and teachers. For the setting home and the site generated this list. You can see at the top that there is a DEC Decide Doctoral seminar, there's special interest group meeting. There's a whole bunch of learning decks in the middle. You can actually go directly to the practices themselves. And then also there's actually a monograph series and practice videos.

The learning decks are new or achieved presentations available for purchase from DEC at a discounted rate if you're a member. And; but they're available to everyone for purchase. And you can access if you can read it, right in the middle that fourth bullet down; Home Visiting in Early Childhood Special Education: Effective Strategies and Practices is right on the money in terms of our topic. So, you might want to access that to see what it says. Next slide please.

[Slide 46 – DEC Recommended Practices]: So, when you go into the recommended practices; here is the direct link and it should be in the chat for you. You can navigate from that library directly to this. And given the question that we've defined as; hopefully most people are familiar with these. But, the recommended practices cover areas such as assessment, environment, family, instruction, interaction, teaming and collaboration and transition. So, given our question I looked through the family practices, the instruction practices and the teaming and collaboration practices to see which ones might align with our question and also provide information about the fairness of PALS. Next slide please.

[Slide 47 – Specific DEC Recommended Practices]: So, I'll just provide you with two examples. So, these are relevant to the application of a home visiting model. So, the one on the left is Family Four. The practitioners and the family work together to create outcomes or goals, develop individualized plans and implement practices that address the family's priorities and concerns and the child's strengths and needs. So, if you think a little bit about family routines that might be a match.

And then there's Teaming and Collaboration Two. Where practitioners and the families work together as a team to systematically and regularly exchange expertise, knowledge and information to build team capacity and jointly solve problems, plan and implement interventions. So, again remember the coaching aspect of PALS. Where parents were implementing the intervention. So, you can use these to determine whether PALS would be feasible, acceptable and relevant if there is or if there can be alignment between the practices and PALS components. Next slide please.

[Slide 48 – National Association for the Education of Young Children]: So, finally we'll turn to the NAEYC position statement site just to provide you with one more example. Again, there are many collective sites that you might want to search. So, this screen shot shows the site where I've entered home visiting into the search box which is indicated by the blue arrow to the magnifying glass on the top. And once I put that in there the search generates a list. And it may be refined again by the filters along the right as indicated by the bottom arrow.

So, I used infants and toddlers for age for the child. Teachers for the audience and child development for the topic. And that resulted in sixteen hits for links to other information. And for any NAEYP stuff it's available to members only and some are available to anyone. But you can see here that the article at the top of the hit list as it were would probably be informative for our search because it's about home visiting. So, you might want to access it and explore its contents further. Next slide please.

[Slide 49 – Step 2: Consider the Professional Wisdom & Values Individual Evidence]: So, as with the family circle the individual level for the professional circle includes considering your own wisdom and values and getting input from providers in your program specifically the teams; the provider teams working with a child or family and families. So, again if you're considering a practice that might be implemented across the whole program as might be the case for home visiting. Then you might want to get input from the whole; providers across the whole program and all of the teams.

So, again just the same question that I asked for families. How have people or might people consider both their own wisdom and values? And then also that of their team and discuss it together? And maybe even look at the research evidence and the family wisdom and values together? How might that work or have people tried it?

And so what Martha said. You're right. Survey focus groups or team meetings. Right, there's various ways. And you know if; ideally, this would be a part of a process that you would have kind of set up so that people get used to doing them. Because that's another sometimes challenging thing at the beginning.

Kristen said discussions about knowledge. Right, exactly. So, some of these things can be more formal or less formal. You can actually make them fun. That's important I think in our work. And I'm a research nerd so I think that all of this is fun. But; so, yeah Kathryn says pulling together an implementation team with diverse membership. Yep, that's a great idea.

So, think about those. You've got some great ideas. For the professionals, you can probably apply some of these strategies to the families too to collect their you know collective across the program evidence. And of course, directly talking to a family through an ISSP or an IEP meeting and during home visits is ideal. Okay so, we'll move along to the next slide.

[Slide 50 – Step 3: Appraise the Evidence You Gathered – The FAIR Test]: So, our review of the circles that we've done so far should provide you with an example of the process that we carry out in step two. And then we've been thinking about FAIR and the FAIR test as we've been collecting evidence. So, in step three is where you put it all together and use the FAIR test to appraise the total; the sum total of the evidence that you've collect. Again, from research, from family professional; from family wisdom and values and from professional wisdom and values.

So again, we're looking to see if it is feasible and accessible for the families and professionals working with the child and family. If it's effective in producing a positive impact. And if it's relevant for your identified context. Next slide please.

[Slide 51 – Step 3: The FAIR Test – Let’s Practice]: So, before we do this step it’s important to realize that there might not be perfect alignment across the circles or strong evidence in each circle. So, keep in mind to not let perfection be the enemy of the good when you’re deciding whether a practice is FAIR. So, keep that in mind and this is especially an issue in early childhood with the research. The research body is increasing but, it might not have been done with your specific population in your specific setting. That doesn’t mean that you can’t use it because you might have evidence from the other circles to suggest that it’s something that you might want to try.

So, thinking about the evidence that we’ve gathered today and thinking about the feasibility. So, some items to think about are the costs, complexity and the training required. For the acceptability it would be you know what do families and professionals think about it collectively and individually? In impact again, is there evidence of positive results and how much evidence is there? And we didn’t put on the slides but, the quality of a study is important.

There are a lot of studies out there that are not high quality and that basically means that you can’t really trust the impact evidence because that’s a basic practice property of research. And finally, there is the relevance. Was the intervention used with the children and families similar to those with whom you work?

So, I’ll pause here for moment and ask this question. Based on what we’ve gathered, what do people think about the feasibility of PALS to address our question? And you can put it in the chat and let us know where you got that information from. And we have a spoiler alert. We’re going to do a poll here shortly to find out if you think it’s FAIR or not FAIR or if you need more information.

But you know, the first thing would be the feasibility. Do you; we didn’t go into it but, remember Angela talked about the implementation information on home visiting that talked about cost and training? So, assuming that your program can afford it and can do the training. Then it would be feasible.

So, how about acceptability? What would we say about; based on our review of all the evidence about whether it would be acceptable to the families and professionals? And again, you might be; right, you might need to tailor it to the community exactly. So far, I mean what we’ve showed you anyway so far shows you is some alignment. It might not be perfect alignment. But again, we don’t really have that information yet of what the individual families and professionals know.

But so far, I would say that it’s looking good personally. How about impact? So, is there positive evidence that it has a positive result? So, remember again we go that from the Home VEE site? And again, remember when Angela showed you the research summary? We found that there is one summary that shows a positive impact on child development.

So, there’s not a whole lot of evidence about it. But, at least none of the studies showed; there’s been many studies and out of fifteen or so outcomes or studies that looked at it. They didn’t show any negative impacts. But, one thing that Angela didn’t highlight is that

there is actually several positive impacts on parenting practices. So, as we all know in early childhood it takes a while to see the effect on a child's developmental outcomes.

But, an important way to get to get to a good child developmental outcome is to help the family. So finally, what about the relevance of the practice? So, we know if it was used with children and families similar to those with whom we work? Or you know; those that are in our question? So, there's a home visiting model but we really didn't dig into the sample.

So, going back to what Angela said earlier. In that overlapping Home VEE sample, you have two groups on child development that don't overlap. So, that they are completely independent. So, the Home VEE site basically has to have one high quality study that shows two or more of the eight outcomes that they're looking at; positive impact. Or, two studies looking at one of the outcomes that don't overlap.

And if you go into that research evidence, you can often find descriptions of who was in the child sample. Obviously, we know the age. But, you can know whether they included children with disabilities. Whether they included culturally and linguistically diverse groups, socio-economic diversity, regional diversity etcetera.

Angela McGuire: Taletha, you'll see that Cindy Weiggle from Iowa posted a comment.

Taletha Derrington: Right yeah, so I was just seeing that. Yes, thank you. Yeah, so in Iowa; she says that in Iowa she says that in Iowa the idea is that they practice that same home visitation as we learned via PALS. Right, of course. So, there's always the question of you know; blending, rating and funding. Sometimes you can't do it.

We chose PALS today because sometimes we might have more than just early intervention that's in Pre-School Special Educators on our line today. And also, often in natural environments that these children; ideally will be served at home or in a community setting such as a Head Start. So, it's a process to; you know you could pick the ABC Intervention. Attachment; Attachment and Behavioral Catch-Up intervention might be a little bit more specific to do to what you would do in early intervention.

But again, the idea is to look at a process and to try to get a little bit of agnostics about the specific content. But, as we all know in early intervention and in early childhood in general; the more that we can work together across systems; you know, maybe we can push the powers that be. To be able to you know, braid our funding at least for Professional Development or for systems infrastructures such as this type of infrastructure for selecting Evidence-Based Practices.

So, let's just give it a quick shot. Overall do people think so far with what we know if this is FAIR? If its not FAIR? Or do we need more information? And go ahead and enter your guess or your vote and then hit submit.

Tanner Petry: Alright, it looks like we've plateaued. So, I'll go ahead and close the poll and share the results.

Taletha Derrington: Okay so, most of you said need more information. Nobody said it's not FAIR. And almost the majority but a large minority said it was FAIR. Yeah again, there's no right answer here you know based on what we know. And you know maybe you were applying your own professional wisdom and values and so, we don't have that; the benefit of that for the group.

But, for me I would want to get a little bit more information to get those specific points in feasibility, acceptability and relevance. But, I didn't see anything that suggested that we shouldn't be using it. So, it was leaning towards the FAIR side. Great, thank you Tanner. You can close that poll and we can move to the next slide.

[Slide 52 – Step 4: Make an Evidence-Based Decision]: So, the last step. Step four is where you make an evidence-based decision. So, it could be that we need more information. So, we're not quite ready to make a decision. It all; it might be that if it doesn't meet the FAIR test to your satisfaction that you would want to go back and look at another practice. Or it could be decided that yes, you're going to go with this practice.

And so, if so, you will need to think about the infrastructure and activities needed for implementation and evaluation. And then, create an action plan to do so. So, again Martha Doolittle talked about tailoring it to the community. But, that might be something that you need to do in your implementation.

So, remember that the BARE tool indicates whether a site provides information about implementation and Professional Development around the practices that are presented on that site. So, that is a good resource to get information on that. In addition, when you involve professionals and families in the search process which is basically and intricate part of the three circles. Especially the individual knowledges of families and professionals.

It can also help increase staff buy in. For example, they might have been using a practice for years. But they see that the research shows that it has no effect or even worse maybe it has negative effects. Or it doesn't align with family wisdom and values or the wisdom and values of other professionals. Maybe they never talked about it before.

So, it might inspire them to re-evaluate a practice and on the other side, it might introduce people to new practices that they've never considered that would be good to have in their tool box. So, in terms of evaluation it's really important to monitor the implementation and ensure that the practice is being implemented with fidelity or as intended. And some of the sites on the BARE tool provide again the implementation information. It provides links to fidelity checks or articles about fidelity checks. So, that's a resource for that.

In addition, just because research shows that there is a positive effect doesn't mean that it will be relevant or impactful in your specific setting. Especially if you have to adapt the practice to fit your community or the specific group of children and families that you work with. It doesn't mean that you cannot use the practice. But you only; you know especially if it meets the other BARE components. But here like anything we always want to evaluate what we're doing.

Whenever you have to tweak a practice a little bit it's important to make sure that number one it's being implemented correctly and number two that it's having the intended positive effect that you are looking for. So, beyond those kinds of guidelines it's beyond the scope of our Webinar today to provide you with implementation and evaluation action planning resources. But, they do exist especially in relation to the State Systemic Implementation Plans for Early Intervention and Pre-School Special Education. And so, OSEP centers like the National Center for Technical Assistance, the National Center for Systemic Improvement which is our center has information and can connect you with that.

So, feel free to reach out to any one of the four of us. Our e-mails are at the end of the slide deck which we will post. And think that we can also post them in the chat here too. There we go, thank you Monica. So; and Head Start also has a lot of resources on that. So, I just encourage you to reach out to us or if you already have a relationship with another Technical Assistance center per se, reach out to them and get connect that way. Next slide please.

[Slide 53 – Discussion]: So, before we open it up for final discussion. I wanted to just encourage everyone to just please fill out our evaluation survey for the Webinar. I believe Monica my chat extraordinaire lady or partner is putting the link in there so, thank you. We will use that information for our own continually improvement. It also let's us know what worked and what didn't.

So, with that I would like to open things up, take a drink of water and let you all talk about you know facts, questions. These are some guiding questions for you but, you don't have to address them if you don't want to. But again, we're interested and what we're hoping is that people think about implementing this evidence appraisal strategy, setting up a collective decision-making process and then of course what supports you might want to develop these practices so that you can use these tools most effectively.

So, with that I will open it up. You're welcome Cindy. We were hoping that it would allow people to follow along a little bit more easily. So, earlier we had the ideas about. Yeah, Martha said maybe considering implementing the strategy in a small-scale pilot. Yeah and then evaluating it before going to large scale implementation. Sure, yeah that's definitely following along the idea or principles of good implementation plans and improvement plans.

And earlier we talked about surveys and focus groups and team meetings. You know just to remember that you don't have to; I mean you know some families really like to search the Web. So, I'm sure you know that and so you might say hey, go crazy on the BARE tool and come back and show me what you find. And you know it would be a way to engage them and you know it would be informative to everybody by spreading the work around I would say.

Are there any other ideas about collective decision-making or what else you would need to; from us or centers like ours to help support you in using this?

Angela McGuire: So, Taletha do you have any thought on; or does anybody on the line? Do you have any thoughts on the; on persuading decision makers around the use of family or professional wisdom?

Taletha Derrington: That's a great question and that's; for me I would think that when you can find alignment between a research-based practice; well, between something that you find in the research and then you can demonstrate how that aligns to a family and or professional ideal or value or piece of wisdom. Then that kind of puts a number shall we say behind something that might be seen as touchy feely nice but qualitative. And actually, I remember one person in their registration talking about the de-valuing of qualitative evidence. So, basically this process is a way to show that actually the qualitative evidence.

Like the family and professional wisdom and values circles a lot of that stuff is based on research. Some of it is quantitative research and some of it is qualitative research. And it's also the perspective of the families. In fact, it it's just the family's point of view that is fine. So, I think it's a good way to kind of combine the numbers and the qualitative part of it to maybe convince the powers that be.

Well thank you Cindy and thank you Angela for the questions. That was a good question actually. Does anybody else have any other thoughts before we let you go out from school a little bit early on a Friday afternoon?

Angela McGuire: I wanted to share something Taletha that occurred to me as I was driving in this morning. I have a young friend who is expecting a baby and she was freaking out a little bit about something that she'd seen on Facebook recently. That I think probably some of you have seen. Has anybody seen I think it's called the MoMo Challenge? And she; it's very strange.

Anyway, it's a hoax but she is; she's not wanting to let it go. She just wants to dive in and she's really afraid of this ridiculous thing that's been posted. And I was thinking that I'm going to use the FAIR test to pose some questions to her to help think a little bit more deeply about what she's seeing in front of her that she thinks is evidence. And maybe it will kind of help her parse out why it's probably not real. What she sees before her.

So, I think that we can apply many of the steps and the tools that we've generated here for our Evidence-Based Practices to other elements or instances of our life. And get better with that practice. And just maybe help people not be so easily persuaded by things that aren't necessarily true.

Tanner Petry: Yeah, that's a great point. And I have my own; my own personal anecdote is that my Godchild is in the Kindergarten and he's Reading at the third-grade level. So, you know he's very bright. But, as might be expected; well maybe not. But, he's having behavioral challenges and basically what it amounts to is in-school suspension.

So, I actually have gone to the BARE tool to get links for my best friend to share with the school to try to get them to do something. Instead of just you know sending him into the Principal's office. So, it can be something that you use individually. It can be something

that you use on a program-wide level. It can be something that you use regionally or your whole state. There are applications at multiple levels.

Alright, you all are quite today. So, either you're exhausted or excited or you're still reading the links. But, we appreciate your attention and feel free to reach out to us if you have any further questions. And Tanner I believe will; either Monica and I or Tanner or somebody. There will be a message to you indicating when all of these are archived on our NCSI site in the resource library.

Angela McGuire: Thanks everybody.

Taletha Derrington: Okay, thank you.

[End of Transcript]

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