



Early Intervention
Leadership Team Guide

**Program-Wide Support for
Pyramid Model Implementation
Within Early Intervention Services**



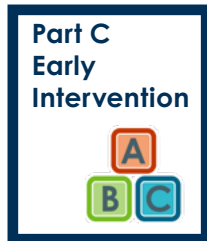
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Introduction

Program-wide support for implementing the Pyramid Model refers to a systemic effort within a program to implement the Pyramid Model with fidelity. In program-wide implementation, a leadership team guides the implementation of the critical elements or infrastructure of support necessary for implementing the Pyramid Model. The leadership team, with representation from program administrators, early intervention professionals, and families, engages in an ongoing process of supporting the implementation of the Pyramid Model and using data-informed decision-making to guide implementation efforts and monitor outcomes.



A program in Part C early intervention is defined as a local agency or program, districts, regional entities, or other organizational units that provide early intervention services through Part C IDEA.

We created this leadership team manual to provide the leadership team with resources, forms, and ideas to guide the program-wide implementation of the Pyramid Model. We encourage teams to bring this manual to every team meeting. Each section of the manual provides information about the critical components for program-wide implementation with ideas and illustrations to support leadership teams in building their implementation action plan. At the end of each section, we describe a case study — the Jones County Early Intervention program. This case study illustrates how one EI program began its implementation journey. We acknowledge the significant variability in providing EI services across districts, counties, and states. This case study aims to illustrate a potential implementation pathway but does not represent the sole approach. Leadership teams are encouraged to create implementation goals that support their contexts.

Implementing the Pyramid Model in early intervention services ensures that every family receives the support they need to understand and promote their child's social, emotional, and behavioral development and learning. The Pyramid Model provides a tiered framework of practices that includes universal practices for promoting social-emotional growth and development, targeted practices for children who need additional support in skills development, and individualized interventions for children with significant social-emotional or behavior intervention needs.

The Pyramid Model framework and [Seven Key Principles and Practices for Providing Early Intervention Services in Natural Environments](#)¹ emphasize collaboration among early intervention team members and families, focusing on building the capacity of families and professionals to support young children's social, emotional, and behavioral development and learning. Early intervention professionals implementing Pyramid Model practices use family coaching to help families understand and support their child's social and emotional development, create nurturing and responsive relationships with their young children, set goals and facilitate social-emotional learning, and implement interventions to prevent and address challenging behavior.

¹ <https://ectacenter.org/topics/eiservices/keyprinckeyprac.asp>

The Pyramid Model provides a framework for practices that enhance and supplement the approaches that an early intervention program or service agency might be using to support young children and their families. The Pyramid Model framework is specific to promoting social-emotional growth and learning and is intentionally aligned with the [Division for Early Childhood \(DEC\) Recommended Practices \(2014\)](https://www.dec-sped.org/dec-recommended-practices)² for delivering high-quality early intervention services. The five principles of Pyramid Model implementation within early intervention services illustrate this alignment.

Five Primary Principles for Using the Pyramid Model in Part C Early Intervention Services

1. Support practitioners in building collaborative partnerships with all families.
2. Use family coaching strategies to meet the needs of all caregivers.
3. Provide families with knowledge and skills related to responsive caregiving and nurturing, responsive relationships.
4. Build families' confidence and competence in promoting their child's social-emotional development.
5. Provide families with tools and strategies that address and focus on preventing challenging behavior.

Program-wide implementation is informed by implementation science and what is known about the effective implementation of evidence-based practices. There have been countless efforts in human services to train service providers to implement innovations or new practices with disappointing results. Often, this is because the effort has been primarily focused on teaching professionals how to do an intervention without building the implementation infrastructure to ensure they are supported in using those practices. In program-wide implementation, a leadership team is formed to guide the development of the implementation supports and engage in ongoing decision-making to ensure that all personnel providing early intervention services can effectively implement the Pyramid Model.

In this manual, we guide leadership teams on the critical elements necessary for supporting the implementation of the Pyramid Model approach. An overview of these elements is listed below:

Critical Elements of the Program-Wide Approach

1. Leadership Team – the team has broad representation and meets regularly to plan for implementation and examine progress and outcomes at a program level.
2. Staff Readiness and Buy-In – the team gains program staff's buy-in and commitment to implementing Pyramid Model practices in their service delivery.
3. Family Engagement – the team solicits the input of families, shares information with families about implementation, develops resources for service providers to use in their support of families, and develops strategies for family engagement and partnership. Importantly, communication with families is always intentionally multimodal and bidirectional.

2 <https://www.dec-sped.org/dec-recommended-practices>

4. Building Staff Capacity through Professional Development and Practice-Based Coaching – the team develops a plan to provide all service providers in the program with training and ongoing coaching in implementing the Pyramid Model practices. Coaching is provided using effective coaching practices, a sound fidelity tool, and ongoing data decision-making.
5. Providing Interventions to Children with Persistent Challenging Behavior – the team ensures that the development of behavior support plans occurs efficiently and effectively. The team establishes an effective process to provide interventions for children with persistent challenging behavior that includes training, procedures for developing behavior support plans, process guidelines, and methods for accessing mental health consultation and other services when needed.
6. Monitoring Implementation and Outcomes – the leadership team will collect data on the implementation of Pyramid Model practices and child and family outcomes and use data to make decisions to improve implementation fidelity and outcomes.

Pyramid Model Early Intervention (Part C) Benchmarks of Quality

The **leadership team** uses the [Pyramid Model Early Intervention \(Part C\) Benchmarks of Quality](#)³ to identify the critical elements to address in the implementation plan. This tool gives the team an initial assessment of their current implementation strengths and needs. After scoring the tool, the team develops an implementation plan.

Pyramid Model Resources

There are many resources on the Pyramid Model and program-wide implementation that will be helpful to the team as they begin their implementation journey. The [National Center for Pyramid Model Innovations](#)⁴ provides a variety of resources (e.g., fact sheets, guides, tools, webinars) that your team will find helpful as you continue this work. In addition, you might find this guide on [Infant and Early Childhood Mental Health and Early Intervention](#)⁵ useful for your systems improvement work.

[Download Your Pyramid Model
Leadership Team Resources](#)⁶



3 <https://challengingbehavior.org/implementation/data-decision-making/overview/#boqpc>

4 www.challengingbehavior.org

5 <https://ectacenter.org/topics/iecmh/iecmh-partc.asp>

6 <https://challengingbehavior.org/document/early-interventionist-leadership-team-packet/>

Glossary of Terms

Challenging Behavior – Challenging behavior can be defined as any repeated pattern of behavior or perception of behavior that interferes with or is at risk of interfering with optimal learning or engagement in pro-social interactions with peers and adults. Challenging behavior is thus defined based on its effects. For infants and toddlers, challenging behavior must be considered within the context of the child’s relationship with caregivers. Behavior that is challenging, for example, may manifest as attachment difficulties, sleeping and eating difficulties, excessive crying, and difficulty in soothing. Challenging behaviors may be defined as those that interfere with developing and maintaining reciprocal, positive, and nurturing relationships with the parent or caregiver. Challenging behavior, as a pattern of behavior, is noted by considering the relationship between the child and adult and the difficulties manifested in the dyadic exchange.

Culturally Responsive and Affirming Practices – Cultural responsiveness is an awareness of the various cultures represented by a program’s population and an effort to align practices with the values and beliefs of these cultures. Practices and products that are culturally responsive and affirming are communicated in a way that is respectful, supportive, understandable, and relevant to constituent groups.

Data-Informed Decision-Making – An ongoing process in which data are collected and analyzed to improve individual support or program functioning.

Evidence-Based Practice – Early childhood interventions or supports that have published research documenting their effectiveness. Practices that are considered evidence-based have been demonstrated as effective within multiple research studies and have shown similar positive outcomes.

Fidelity – Fidelity refers to the degree to which an intervention or practice is delivered as intended by the leadership team and achieves expected results. Fidelity can be measured and compared to previous or future efforts to deliver the intervention or practice.

Implementation Science – Implementation science refers to the “methods or techniques used to enhance the adoption, implementation, and sustainability” of a program or practice (Eccles & Mittman, 2006).

Infrastructure – The core mechanisms of an organization that are necessary to successfully support or use an evidence-based practice or program to build staff knowledge and skills (e.g., training, coaching) as well as organization processes (e.g., use of data for decision making, leadership practices). (Definition provided by the National Implementation Research Network).

Practice-Based Coaching – Coaching that is focused on the implementation of specified practices. Practice-based coaching occurs in the context of a collaborative partnership and uses a cyclical process of action planning, observation, reflection, and feedback to support practitioners’ use of recommended practices.

Program Benchmarks of Quality – The Pyramid Model Early Intervention (Part C) Benchmarks of Quality (EI BoQ) is a tool the program leadership team uses to assess their status in implementing the elements needed to support implementation and scale-up of targeted practices. The Benchmarks of Quality are used to evaluate initial status, plan activities, and monitor progress through all stages of implementation.

Program-Wide Leadership Team – A leadership team that is charged with ongoing guidance of program-wide implementation of the targeted practices in a program. This team includes administrators in the program and key stakeholders (e.g., early intervention service providers, family members). Other key roles on the team include the practitioner coach and data coordinator. The leadership team meets monthly to discuss program needs and program-wide implementation progress and to review data.

Program-Wide Implementation – Program-wide implementation refers to a systemic effort to support the implementation of targeted practices by all practitioners in the program. A program leadership team guides program-wide implementation.

Section 1: Leadership Team

The leadership team is the group of people in each program who will be responsible for guiding and monitoring the implementation of the Pyramid Model throughout the program. The team commits to monthly meetings as they develop processes to address all critical elements of program-wide implementation over the next 2-3 years. The team ensures the following are in place: an established leadership team that includes the right people, a process for bi-directional communication with staff and families about the initiative, a plan for family participation, professional development supports to build the capacity of early interventionists, a process for providing individualized behavior supports to children with behavior challenges, and using data to make decisions to guide implementation. The decisions leadership teams must address regarding the leadership team specifically include:

- The leadership team includes members who are representative of their program and community.
- An administrator is part of the team to support putting team decisions into action.
- The team has a plan for regular monthly meetings.
- The team has an established mission and purpose that team members can communicate.
- Supervision guidance, program materials, and procedures reflect the team's Pyramid Model efforts.
- The team uses data to guide the development of an implementation plan.

The [Leadership Team Implementation Plan \(EI\)](#)¹ provides teams with a place to identify team members and roles, note their team ground rules, write out their mission statement, and list their implementation plan goals and the steps needed to achieve those goals.

Team Members

The leadership team is comprised of individuals who represent key stakeholders in early intervention. It is important to emphasize that each team member has equal authority in their decision-making and contributions to the team regardless of their role in the program. Team members might serve in multiple roles (e.g., practitioner coaching and behavior support). Members of the leadership team include:

- Administrator
- Early Interventionist
- A person who will provide practitioner coaching
- A person with behavioral expertise or the infant and early childhood mental health consultant who supports the program
- Family member

The leadership team might function as a core team and have “supporting” members sit in on some meetings depending on the implementation activities they are working on (e.g., additional team members who help address activities related to family engagement or culturally responsive practices).

1 <https://challengingbehavior.org/document/leadership-team-implementation-plan-ei-editable/>

Leadership Team Members

Administrator: The administrator role includes a person in the program who can allocate resources, establish and change policies and procedures, and make programmatic decisions. This individual does not necessarily serve as a “team leader” or facilitator; instead, they help to put decisions made by the leadership team into action by providing administrative support.

Early Interventionist: The team must include at least one early interventionist as a consistent member. The term early interventionist includes any individual who provides direct services to families such as family support specialists, developmental specialists, service coordinators, and related services such as physical therapy, speech-language pathology, or occupational therapy.

Practitioner Coach: The practitioner coach is typically an early interventionist in the program who demonstrates an ability to implement high-quality Pyramid Model practices or strong practices that support adult learning and coaching. Sometimes, administrators fill this role, and it is recommended that they try not to coach the individuals they supervise or at least make it clear when interacting with a staff member in their coaching role versus a supervisory role. The role of the practitioner coach includes:

- Collaboration with interventionists to ensure the implementation of all Pyramid Model practices.
- Collaboration with the leadership team to ensure ongoing support of interventionists.

Behavior Specialist: The behavior support specialist does not necessarily have to be a board-certified behavior analyst (BCBA). Instead, this is someone with knowledge of positive behavior support interventions or someone interested in learning about them and fulfilling this role. An [infant and early childhood mental health consultant²](#) (IECMHC) might also fulfill this role. The behavior specialist:

- Supports practitioner coaches and early interventionists by facilitating the functional behavior assessment process with families.
- Supports the development and implementation of individualized behavior support plans.
- Provides consultation and coaching in the development and implementation of behavior intervention strategies.

Family Member: Includes a family member currently enrolled in the program. This can be a shared role among multiple family members to provide consistent availability during meetings. Family members on the leadership team:

- Support the team in understanding the diverse perspectives of families in the program.
- Promote the development of family engagement strategies and materials that match the needs of families represented within the program.

Use the [Family Engagement and the Leadership Team³](#) article, to learn more about including families on the leadership team.

² <https://challengingbehavior.org/document/what-is-infant-early-childhood-mental-health-consultation/>

³ <https://challengingbehavior.org/document/family-engagement-and-the-leadership-team/>

Leadership Team Member Meeting Roles

We recommend identifying roles for the leadership team members during meetings to keep the work focused. The team will need someone to agree to facilitate the team meeting. This role might be rotated once the team has established its norms for setting agendas, taking notes, and record-keeping. The role of the team **facilitator** is to develop meeting agendas, facilitate the discussion at meetings, and ensure that notes are recorded and shared. Teams might also rotate the role of **note-taker**. Two critical tasks of the note-taker are taking notes on major decisions made by the team and updating the team’s implementation plan. The team might also want to designate a **timekeeper** to support the facilitator in addressing each agenda item by keeping track of the allotted time. They will let the group know when time is running out, and the team can decide if they need more time to discuss or move to the next agenda item.

Data Coordinator: Any team member on the leadership team can fulfill this role. The individual who fulfills this role must be open to learning how to use the data spreadsheets and summarizing data for sharing with the leadership team. The data coordinator:

- Ensures program data spreadsheets are filled out correctly by practitioner coaches and team members.
- Prepares data reports for leadership team meetings.
- Ensures that data are brought to leadership team meetings and data decision-making is a standing agenda item.

Use the [Pyramid Model Program Leadership Team: Data Coordination Responsibilities⁴](#) resource for more information on data coordinator responsibilities.



Programs that have the support of an Infant and Early Childhood Mental Health Consultant (IECMHC) might include them as a member of the leadership team. The IECMHC might serve in the role of behavior specialist or practitioner coach. See these resources for more information on the role of [IECMHC in Pyramid Model implementation⁵](#).

Leadership Team Activities and Commitment

Leadership team members must commit to meeting monthly for a minimum of one hour to ensure implementation of the Pyramid Model with fidelity across the program. The leadership team is responsible for developing the following:

- Team mission statement related to program-wide implementation,
- Development of a written implementation plan,
- Monitoring the implementation plan,
- Regular communication with program staff,

⁴ <https://challengingbehavior.org/document/pyramid-model-program-leadership-team-data-coordination-responsibilities/>

⁵ <https://challengingbehavior.org/implementation/early-childhood-mental-health-consultation/>

- Designing and implementing family engagement strategies,
- Designing and implementing professional development strategies,
- Creating systems to support children with significant behavior concerns and their families, and Collecting and analyzing program data.

The leadership team members must commit to engaging in a 2 to 3-year implementation process to establish the systems and processes needed to support the sustained implementation of the Pyramid Model. Among other initial tasks, team members will develop a mission statement that will allow them to describe the purpose and desired outcomes of the initiative to all other stakeholders (e.g., other staff, families). The team will plan for implementation, professional development, and communication with staff and families. As the program progresses, the team will continuously monitor and evaluate data to make decisions throughout implementation.

Characteristics of Successful Teams

Team Members...

- **Are Committed to the Teamwork!** Are committed to the concept that working together leads to increased and improved outcomes.
- **Understand the Goals of the Team!** Have a clear understanding of the team's mission and goals. They work to keep all meetings focused and purposeful.
- **Understand their Individual Roles, Functions, and, Responsibilities!** Attend all team meetings, engage in action planning, and consensus decision making. Team members remain flexible and ready to share roles and functions including leadership. All members assist others to ensure successful completion of the team's goals.
- **Are Willing to Communicate!** They are willing to listen to one another and respect other's thoughts and ideas. Team members feel comfortable exchanging feelings, thoughts, and ideas with others.

Developing a Mission Statement

The mission statement communicates the values of the program related to the Pyramid Model the leadership team would like to publicize. The mission statement can be included in program materials. Examples of materials might include: the family handbook, social media pages, training slides, newsletters, or website. Leadership teams should consider revisiting the mission statement periodically to ensure it matches their program's values as they implement and interact with new staff and families. The [Leadership Team Implementation Plan](#)⁶ includes a place to record your mission statement.

⁶ <https://challengingbehavior.org/document/leadership-team-implementation-plan-ei-editable/>

The following table guides what components might be considered when creating a mission statement.

Considerations for the Pyramid Model Mission Statement

Who are we impacting?	What do we do (actions) to have an impact?	Why do we want to have this impact?	Where do we have an impact?
<ul style="list-style-type: none"> • Staff • Families • Infants and Toddlers 	<ul style="list-style-type: none"> • Program-wide implementation of evidence-based practices • Family coaching 	<ul style="list-style-type: none"> • Strengthen family and staff relationships • Promote healthy social and emotional development • Support lifelong skills and school readiness 	<ul style="list-style-type: none"> • In the home • In the community

The following are mission statements that other teams have used for their Pyramid Model implementation:

- It starts with relationships! We partner with families to promote young children’s social and emotional development.
- We help staff and families use effective strategies to promote children’s social and emotional development.

Leadership Team Activity for the Development of a Mission Statement⁷

Purpose: Leadership teams need to establish clear and equal communication opportunities among team members. The first time many leadership teams get to practice this skill is when creating their mission statement. Mission statements include shared values related to the team’s implementation of the Pyramid Model. Leadership teams can use this activity to allow each team member to communicate their values and motivations relating to their role or the Pyramid Model. Teams can look for shared values and motivations among members to inspire while creating their mission statement.

Materials: Sticky notes, Markers, Chart paper

List of values

- | | | | |
|---------------|-------------|--------------|-----------------|
| Advocacy | Competency | Growth | Meaningful Work |
| Authenticity | Confidence | Honesty | Openness |
| Autonomy | Connection | Independence | Optimism |
| Balance | Creativity | Kindness | Partnership |
| Choice | Curiosity | Knowledge | Relationships |
| Communication | Empowerment | Leadership | Respect |
| Community | Friendship | Learning | Teamwork |
| Compassion | Fun | Love | Trust |

⁷ Adapted from the Certificate Program in Implementation Practice Course One: Co-Creation and Engagement. (2023, February). Collaborative for Implementation Practice UNC School of Social Work.

Roles

Interviewer: Seek to understand motivations and identify shared values by asking questions:

- What led you to your role in early intervention?
- What values do you bring to your work?
- How does the Pyramid Model support you in addressing your “why”?

Interviewee: Share what led you to your work in early intervention. Identify how your work connects to your values.

Observers: Listen for values. Help to identify shared values/motivations among team members.

How to complete this activity:

- Encourage team members to sit in a group around a table. Invite staff to identify up to 3 values that shape their life or work experience.
- Choose 2 team members to start. One team member will be the interviewer, and the other will be the interviewee. All other team members will act as observers.
- The interviewer will begin the exercise by asking the questions listed above.
- Observers will listen for values or motivations shared by the interviewee. They can ask for clarification about values they heard the interviewee share that weren't explicitly stated and check with the interviewee for accuracy.
- The group will document the values on sticky notes (one value per note) and hang them on chart paper.
- The interviewee becomes the interviewer, and the person next to them becomes the new interviewee. Repeat until each team member has shared.
- As a group, pair repeat or similar values together. Discuss the similarities and differences you see.
- How can all values have a place within the leadership team?
- What values or motivations do you want to be reflected in your group norms or mission statement?

Establishing Meeting Ground Rules

Establishing meeting ground rules helps the leadership team know what to expect of each other so they can work efficiently as a team. Ground rules can help to address the following:

- Shared roles and responsibilities
- Problem-solving
- Team interactions or communication
- Membership (e.g., core vs peripheral members, attendance)
- Reporting or sharing information
- Team decision-making process

Examples of Ground Rules

- We will come to a consensus.
- Meeting notes will be posted in Sharepoint within 3 days of the meeting
- We will start and end on time.
- We will review data at every meeting.
- Everyone has an opportunity to share ideas.
- Be open to hearing new perspectives.

List your ground rules on the [Leadership Team Implementation Plan Form \(EI\)](#)⁸ and meeting agenda. In addition, decide when you will meet (monthly date and time) for the upcoming year and document on the Implementation Plan.

Completing the Benchmarks of Quality

Once leadership teams have created their mission statement and developed ground rules, they will need to assess what is currently in place within their program that supports the implementation of the Pyramid Model, using the [Pyramid Model Early Intervention \(Part C\) Benchmarks of Quality](#)⁹. To allow time to complete all items on the Benchmarks of Quality tool, leadership teams should plan for 1.5-2 hours when scoring the tool the first time.

[Pyramid Model Early Intervention \(Part C\) Benchmarks of Quality Spreadsheet](#)¹⁰

First, leadership teams will choose someone to facilitate the completion of the Benchmarks of Quality. The facilitator will guide the leadership team through consensus scoring each critical element:

- Leadership Team
- Staff Readiness and Buy-In
- Family Engagement
- Building Staff Capacity
- Providing Interventions to Children with Persistent Challenging Behavior
- Monitoring Implementation and Outcomes.

Next, team members will individually decide how to score each indicator within a critical element (0-Not in Place, 1-Partially in Place, or 2-In Place). Once team members have reflected on their scores, the facilitator will ask the group to share how they scored an item. The facilitator should invite team members to share their reasoning for why they scored the way they did. If there is disagreement about the score, the facilitator asks if anyone might want to shift their score after hearing others speak. If there is still disagreement, the facilitator might suggest that they do a vote and record the score offered by the majority. Teams might also want to record notes about the disagreement. Repeat the process until all items in each critical element are scored.

⁸ <https://challengingbehavior.org/document/leadership-team-implementation-plan-ei-editable/>

⁹ <https://challengingbehavior.org/document/pyramid-model-early-intervention-part-c-benchmarks-of-quality-boq-form/>

¹⁰ <https://challengingbehavior.org/document/pyramid-model-early-intervention-part-c-benchmarks-of-quality-data-entry-spreadsheet/>

Some reflective questions team members might ask themselves are:

- How has the team met these benchmarks?
- What benchmarks are strengths?
- What benchmarks need more work and attention?
- How do you know?

Benchmarks of Quality Scoring Tips

Tip 1: Prior to sharing group scores, teams can decide on a process for displaying their votes. This could be using index cards with numbers 0-2 listed, or using hand gestures (e.g., fist for zero, one finger for one and two fingers to represent two) as examples.

Tip 2: Prior to scoring, allow the team to define what consensus means. Do all team members have to agree? If scoring by majority, what does majority look like for the team? For example, 5 members out of 8 total members agree.

Tip 3: Time-saving tip. Once team members are familiar with the Benchmarks of Quality items, invite the team to score their Benchmarks prior to the meeting, and then plan to share scores as a group and discuss at the meeting.

Developing an Implementation Plan

Once leadership teams have completed their initial Benchmarks of Quality, they will use their observations based on the data to create a Leadership Team Implementation plan. Depending on how long it takes the team to score the Benchmarks of Quality, this process might occur during the same meeting time, or an additional meeting might be necessary to complete the action planning process.

Leadership teams will use the [Leadership Team Implementation Plan Form \(EI\)](#)¹¹ to document their plans for addressing the Benchmark of Quality elements, including action steps, individuals responsible, and a timeline to complete. Teams should plan to review their Implementation Plan at each monthly meeting to set new action steps and goals or adjust current goals or action steps as needed.

Some reflective questions teams might ask themselves are:

- Is everyone at the table who should be? Who are we missing?
- What main priorities do we want to address right now?
- What systems or protocols (e.g., data storage, changes to current materials or procedures) must we create to do the work?
- Is there any information we are missing? What data must we collect, and how will we do it?
- What activities will help us implement the Pyramid Model and address the needs of our staff, family, and community?

¹¹ <https://challengingbehavior.org/document/leadership-team-implementation-plan-ei-editable/>

Team Meetings

Keeping an organized agenda supports an efficient meeting. The ground rules developed by the team will help the teaming process during meetings. Teams might consider changing ground rules as the team learns through their implementation experience.

The team will review the Leadership Team Implementation Plan at each meeting, examine data, and evaluate their progress in meeting implementation goals. Meeting minutes should be stored in a place accessible to all team members and maintained for future reference.

Team Meeting Agenda Items

The following items might be included in the leadership team meeting agenda ([sample Program Agenda Template](#))¹².

1. Team roles: Review the current roles and make any changes to the roles as needed. Assign roles for next month's meeting.
2. Team Building Activity- a quick ice breaker, question, or poll to encourage relationship building among team members.
3. Agenda Review – review follow-up tasks with team members from the last meeting, what will be discussed, and the time for each item. Ask team members for any additional items.
4. Celebrations – start your team meeting with celebrations of program, teacher, child, or family outcomes
5. Implementation Plan – review current items and update with progress notes. Discuss items that need action steps and identify actions, persons responsible, and dates for completion.
6. Data Review – review data, engage in problem-solving discussions, identify action steps, persons responsible, and dates for completion.
7. Practitioner Coach Report – practitioner coach reports on coaching progress, discusses any issues or needs.
8. Behavior Specialist Report – behavior specialist reports on behavior support, discusses any issues or needs in supporting children, families, and early interventionists.
9. Upcoming Training- team members will share progress and needs related to training.
10. Follow-up Questions- List any follow-up questions for those not present at the meeting (e.g., program implementation coach, technical assistance, absent team members, or key stakeholders.
11. Next Meeting – confirm the day, time, location, and agenda item priorities for the next meeting.

Team Meeting Tools

These tools are used in every team meeting:

- Team Agenda
- Team Meeting Minutes
- [Leadership Team Implementation Plan](#)¹³

¹³ <https://challengingbehavior.org/document/leadership-team-implementation-plan-ei-editable/>

¹² <https://usf.box.com/s/hdzpriyi19zc9uvk4n1bqm5en0tf68hx>

Additional Resources for Leadership Teams

[Family Leadership Team Welcome Letter](#)¹⁴ – this is a sample used within early intervention programs. Consider developing one that is a fit for your setting or program.

[A Guide for Early Childhood Professionals to Support Young Children's Resilience](#)¹⁵

¹⁴ <https://challengingbehavior.org/document/leadership-team-welcome-letter-for-families-early-intervention/>

¹⁵ <https://challengingbehavior.org/document/the-pyramid-model-and-trauma-informed-care-a-guide-for-early-childhood-professionals-to-support-young-childrens-resilience/>

Case Study

Jones County Early Intervention

Jones County Early Intervention serves approximately 500 children. It is located in an urban area but also serves suburban and rural areas. The program provides early intervention services (i.e., family coaching) and consultation in child care settings. A primary early intervention provider delivers services in collaboration with team members from other disciplines and the family.

This program's leadership team includes administrators (Program Director and Assistant Director), two early interventionists, a mental health consultant, and two family representatives. Many of the interventionists have attended training workshops on some of the Pyramid Model practices. However, this is the program's first year developing a leadership team and initiating program-wide training. The program will receive consultation from a local technical assistance and training professional who will support them as their Pyramid Model program implementation coach. The leadership team completed the Pyramid Model Early Intervention (Part C) Benchmarks of Quality and developed the following plan during the initial Leadership Team Implementation Training.



Leadership Team Implementation Plan (EI)

Program Name: Jones County Early Intervention Date: 8.1.24
 Address: Anytown, USA Phone: 888-938-8888
 Administrator: Paul P. Email: paulp@jonesco.com
 Program Coach: Amaya J. Email: Ajeffries@stateTA.com

Team Roster

<i>Name</i>	<i>Team/Program Role</i>	<i>Email</i>
<i>Paul P.</i>	<i>Program Director</i>	paulp@jonesco.com
<i>Tonya S.</i>	<i>Data Coordinator/ Assistant Director</i>	tonyas@jonesco.com
<i>Jess V.</i>	<i>Behavior Specialist/ IECMHC</i>	jessv@jonesco.com
<i>Chris M.</i>	<i>Developmental Therapist</i>	chrism@jonesco.com
<i>Sara C.</i>	<i>Speech Language Pathologist</i>	sarac@jonesco.com
<i>Lucia M</i>	<i>Family Member</i>	lmiller@comcast.com
<i>Ron L.</i>	<i>Family Member</i>	rlewis@verizon.com

Meeting Dates

AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY
1	5	3	7	5	9	6	5	2	7	4	9
Meeting Time: 1pm - 2pm						Meeting Location: Main office room 1a/b Zoom link (let the facilitator know if you will be attending virtually or in person)					

Case Study

Meeting Ground Rules

<i>We will come to a consensus</i>	<i>We will be respectful of other's ideas.</i>
<i>We will share ideas.</i>	<i>We will honor confidentiality.</i>
<i>We will start and end on time.</i>	

Team's Mission Statement

Our leadership team will collaborate to support all children, staff, and families in implementing and maintaining positive practices that foster children's social and emotional skills.

Critical Elements: Establish Leadership Team; Staff Readiness and Buy-In, Family Engagement; Building Staff Capacity; Providing Interventions to Children with Behavior Concerns; Monitoring Implementation and Outcomes.

Critical Element	What is the problem/issue/task to be addressed?	Action Step/Activity	Persons Responsible	Follow-Up or Completion Date
Establish Leadership Team	The team has regular meetings.	Identify a regular day and time for monthly meetings.	All	Completed
	Team's effort to improve the implementation of the Pyramid Model is visible in supervision, guidance, materials, and procedures.	Add the mission statement to the family newsletter and website.	Tonya	November 7th
Staff Buy-In	Develop and implement a process to establish practitioner's buy-in. Practitioners are supportive of the need for program-wide implementation of the Pyramid Model	Brainstorm staff survey questions.	All	By September 16th
		Draft a staff buy-in presentation.	Sarah	Review at our next meeting

Case Study

Critical Element	What is the problem/issue/ task to be addressed?	Action Step/ Activity	Persons Responsible	Follow-Up or Completion Date
Family Engagement	The agency solicits family input	Brainstorm family survey questions to identify what families want to know about the Pyramid Model and supporting their child's SE development	All	By the end of October
	The agency uses multiple mechanisms- family handbook			
	Add Pyramid Model information to the family handbook.			
	Create a family handout introducing the Pyramid Model to provide to families when initially enrolled.	Lucia, Ron, Sarah, and Chris	To review by the November meeting	
Staff Capacity	Program develops a plan for providing ongoing professional development.	Identify training dates for practices training and review the EIPPI	All	During September meeting
	Practitioner coaches are identified and trained in practice-based coaching	Identify who will provide practitioner coaching	All	After practices training

Case Study

Critical Element	What is the problem/issue/task to be addressed?	Action Step/ Activity	Persons Responsible	Follow-Up or Completion Date
Providing Interventions to Children with Persistent Challenging Behavior	The agency provides professional development and coaching for practitioners focused on supporting parents and caregivers in responding to children's challenging behavior appropriately using Pyramid Model practices.	Order PTR-F materials	Paul	By October meeting
		Schedule PTR-F training workshop for early November	Jess	November
		Draft a flowchart for how early interventionists request the assistance of the behavior specialist and the steps of assistance that will be provided	Jess	

Case Study

Critical Element	What is the problem/issue/task to be addressed?	Action Step/Activity	Persons Responsible	Follow-Up or Completion Date
Monitoring Implementation and Outcomes	Leadership team collects data.	Create a shared folder to store data and Pyramid Model materials	Tonya	Complete
	Develop and implement a process for training practitioners to conduct regular social-emotional screenings.	Create a flow chart to inform staff of the ASQ-SE process at intake	Tonya and Paul	Review at January meeting

Section 2: Staff Readiness and Buy-In

Some of the most important work when starting program-wide implementation of the Pyramid Model is gaining staff buy-in. The leadership team provides information and support to all staff regarding program-wide implementation to ensure transparency and open communication. Effective, open communication with staff is critical to establishing buy-in, which includes sharing information and listening to staff questions, excitement, and concerns.

The leadership team will set goals in their implementation plan to address:

- sharing information with staff on the importance of social and emotional competence and the Pyramid Model,
- measuring staff buy-in,
- creating a process for supporting staff buy-in,
- sharing program-wide implementation goals, and
- establishing bi-directional and multi-modal communication systems to receive ongoing input and feedback from staff throughout the implementation process.

Introducing Staff to the Pyramid Model

The leadership team will plan an initial informational presentation or event (see sample agenda provided below) that informs all staff members on the critical features of program-wide implementation, describes their commitment, and allows staff to share and ask questions. The content might include video, family concerns, staff concerns, current child outcomes, training and coaching support to staff, anticipated child, family, staff outcomes, and leadership team goals. The event should conclude with a process for receiving staff feedback, such as a survey or ballot box. The feedback process allows for anonymity and informs the leadership team how on staff members perspectives about the program's effort to move forward with Pyramid Model implementation. This information is important for making decisions about training and coaching, and provides the leadership with insight on what staff need to feel included and informed throughout the process.

Please Note: If initial buy-in was conducted before establishing a leadership team, the informational meeting described below might not be necessary.

Resource to Use: Here is [a sample presentation](#)¹⁶ that the leadership team might use.

¹⁶ <https://usf.app.box.com/s/r88jt07xr3r15d3i2vhai10zd2zo79lm>

Sample Agenda for Initial Staff Informational Meeting

1. Why focus on social and emotional development in early intervention?
2. What is the Pyramid Model?
3. What does implementation involve?
 - Stages of Implementation
 - Data Collection
 - Training and Coaching
4. What are the benefits to your program?
5. Survey

Sample Poll Questions

Provide choice and allow staff to choose an option:

- I like the idea of implementing the Pyramid Model. I want to commit to doing this.
- I like what I have learned about the program-wide implementation of the Pyramid Model and want to know more.
- I have questions and concerns about the program-wide implementation of the Pyramid Model and want to know more before committing.

Staff polling tip - Use 3-5 questions when creating a buy-in survey.

Open-ended questions

- What strengths of our program do you see already in place as we consider Pyramid Model implementation?
- What challenges within our program might impact our ability to implement the Pyramid Model?
- Please list any concerns you have regarding the program or your involvement.

Likert Scale Options

- How do you rate our program's overall readiness to implement the Pyramid Model?
- How do you rate your personal interest?

Troubleshooting: If the initial survey does not yield the majority of staff willing to adopt the initiative program-wide, the leadership team can present additional information and resources to address staff concerns. The table below suggests how the leadership team might create additional pathways to buy-in.

We Don't Agree! Ideas for Next Steps

- Compile a list of staff concerns.
- Invite staff to brainstorm solutions with the leadership team to address specific concerns.
- Meet with individuals or small groups of staff to discuss goals of program-wide implementation.
- Consider reframing the information given in the initial presentation.
 - Highlight supports that will be provided to staff.
 - Communicate to staff their personal responsibilities (e.g., training time, coaching, EIPPEI practices) related to implementation.
 - Emphasize the team's commitment as creating a Pyramid Model lifestyle within the program- not just another new thing.
 - Create materials or resources that show staff how current program initiatives align with the Pyramid Model

Creating Ongoing Systems of Communication with Staff

After the initial staff introduction, the leadership team must create a system for sharing Pyramid Model program-wide implementation information with staff on an ongoing basis. To maintain buy-in, staff need to know what to expect as the leadership team rolls out their implementation of the Pyramid Model. They should also be updated on any progress related to implementation.

Ideas for Ongoing Communication with Staff

- Share data on implementation goals and progress in newsletters, bulletin boards, and staff meetings on a regular basis.
- Create a staff social media platform: share video, infographics, and resources that can support staff in their implementation.
- Embed Pyramid Model efforts and celebrations as a discussion item in staff meetings.
- Leadership team members provide random acknowledgements with a small token (e.g., notepad, flowers, magnet, or coupon for free breakfast).
- Provide easy access to resources and materials in a central location.

Staff Input and Feedback

In addition to providing systems of communication about ongoing Pyramid Model implementation efforts, the leadership team must develop a process for regularly checking in with staff to ensure consistency with implementation over time. All staff should have ongoing opportunities to examine the program's implementation plan, implementation and outcome data, and provide ideas to the leadership team. Staff should feel comfortable implementing all parts of the plan and can easily explain the importance of the Pyramid Model to families and outside observers.

Ideas to Co-Create Pyramid Model Implementation Efforts with Staff

- Invite staff to participate in leadership team meetings and share concerns and celebrations.
- Conduct buy-in surveys each year and discuss results at leadership team meetings to make needed changes.
- Invite staff to share personal, child, or family celebrations related to Pyramid Model efforts in newsletter announcements or in staff meetings.
- Hold meetings for staff to share their perspectives and ideas on a regular basis.
- Provide presentations on the program's effort and outcomes at local or regular meetings. Invite staff to co-present with leadership team members.

Supplemental Buy-In Activity¹⁷

The activity below might be used in an initial buy-in presentation or follow-up staff meeting. The purpose of the activity is to encourage staff to explore their personal perspectives and see how they align with the Pyramid Model.

Reflection on Personal Values

- Invite staff to identify up to 3 values that shape their life or work experience.
 - What led you to your role in early intervention?
 - What values do you bring to your work?
- Allow staff to discuss these values with a partner or in a small group.
 - What led you to your role in early intervention?
 - What values do you bring to your work?
- Invite staff to share back
 - What did you learn about your partner's/ small group's values?
 - Did you identify any shared values or motivations?
- Post values your leadership team identified as values related to your program's Pyramid Model efforts on chart paper or a virtual platform like Jamboard.
- Invite staff to place a sticker or emoji on any Pyramid Model values that align with the values they identified.
- Engage in a large group discussion about any similarities or differences the group recognized in this activity.
 - Where does Pyramid Model fit in with what staff shared?
 - Can staff see themselves in the program-wide Pyramid Model initiative?
 - Ask staff to share how they felt about this activity.

¹⁷ Adapted from the Certificate Program in Implementation Practice Course One: Co-Creation and Engagement. (2023, February). Collaborative for Implementation Practice UNC School of Social Work.

Case Study

Jones County Early Intervention

The Jones County Early Intervention leadership team is just beginning their program-wide implementation of the Pyramid Model. The team decided to do an overview presentation of the program-wide Pyramid Model to their entire staff during their August staff meeting.

The team developed an agenda for the overview, and each team member presented a section. Chris created a QR-code in the presentation for their staff poll and offered a paper version to provide multiple options for staff members to provide feedback to the team. After the presentation, staff were asked to complete their ballots on their phone or their paper copy and place their completed survey in a ballot box as they exited the room.

In addition to the [initial buy-in presentation](#)¹⁸ and staff poll, the leadership team plans to include the Pyramid Model as an agenda item for their monthly staff meetings, one-on-one and small group discussions with staff and used grant funds to purchase a “Pyramid Pieces” themed planner and T-shirts with the program’s logo with a handwritten note from a leadership team member to maintain buy-in over time. Their program implementation coach, Amaya, will help with training and resources to strengthen buy-in as needed.

Jones County Early Intervention Staff Poll Results

Please take a moment to give us input on how you feel about implementing the Pyramid Model program-wide.

- I feel very confident about program-wide implementation. Let’s commit to doing this.
 - 18 of 25 staff = 72%
- I like the idea of program-wide implementation and would be interested in learning more.
 - 4 of 25 staff = 16%
- I like the idea of program-wide implementation, but do not feel I can make a commitment to it at this time.
 - 2 of 25 staff = 8%
- I don’t feel that program-wide implementation will be beneficial and would rather not participate in the process.
 - 1 of 25 staff = 4%

¹⁸ <https://usf.app.box.com/s/r88jt07xr3r15d3i2vhai10zd2zo79lm>

Section 3: Promoting Family Engagement

Current principles of early intervention are guided by decades of research and practical experiences. A primary principle of early intervention establishes the critical role of families as the primary promoters of their children's early development and learning. The success of early intervention services in achieving positive outcomes for children and families depends on the service providers' capacity to involve the family actively. Early interventionists must assist family members in gaining confidence, acquiring effective strategies, and accessing resources. This support helps families to enhance their child's development and learning within the regular routines and activities of family life. The leadership team develops systems and strategies to foster responsive partnerships with every family and includes families in the planning, development, and evaluation of the implementation of the Pyramid Model.

For resources on recommended practices and the delivery of services using a family coaching approach, check out these links:

- [DEC Recommended practices¹⁹](#)
- [Using the DEC Recommended Practices²⁰](#)
- [Early Intervention Services: Key principles and practices²¹](#)

The leadership team's role is to set the culture and provide the program infrastructure so professionals delivering early intervention services can implement these critical practices. This section provides guidance, ideas, and reflective questions to strengthen the program's family engagement and partnership practices. We refer to parents, caregivers, guardians, and other trusted adults in caregiving roles as family members and recognize that each family member is uniquely determined by each family and should be respected by the program. We will use the generic term "family members" to refer to these valued collaborators and recipients of early intervention services.

The Pyramid Model in Early Intervention

Relationships are the foundation of the Pyramid Model. Building trusting and respectful partnerships with families that are sensitive and responsive to each family's unique culture, identities, lived experiences, and community is critical to implementing the Pyramid Model. As a program leadership team, reflect on the following questions about what families encounter as they are provided with services from your organization.

¹⁹ <https://www.dec-sped.org/dec-recommended-practices>

²⁰ <https://ectacenter.org/decpr/>

²¹ <https://ectacenter.org/topics/eiservices/keyprinckeyprac.asp>

Building Relationships with Each and Every Family

When families come to us for assessment or services, what is their experience?

- Are they greeted warmly using their preferred names or manner to be addressed?
- Is our signage in the languages that the families we serve speak?
- Is our décor and use of images reflective of the cultures and diversity of the families we serve?
- Do we provide family members with a comfortable space for private conversations?
- Do family members feel supported and respected and know how to ask questions and obtain resources?
- Do written materials use plain language to make information accessible to everyone?
- Are materials translated, and are interpreters provided for families with those needs?
- Do staff review written materials and provide time for reflection and questions?
- Do we commit to responding to questions that can be answered immediately in a timely manner?
- Do we assist families in their next steps, including connecting to other needed services?

What information is provided to families about policies, procedures, and ongoing communication?

- Do we share information on important policies and procedures with families in a manner that is clear and direct?
- Do we effectively communicate information about our mission, purpose, and goals to families?
- Do we share information with families about confidentiality?
- Are we asking families about their preferred methods of communication and sharing information on how to communicate with the program?

What have we done, program-wide, to ensure that we are implementing family-professional partnerships?

- How have we supported all program staff to build effective communication skills with families?
- How do we ensure that all program staff identify, honor, and respond to family priorities?
- How do we support all program staff to identify and build upon family strengths?
- What have we done to ensure that all program staff acknowledge and understand the unique cultural perspectives of the families they support and use culturally affirming practices in their interactions with families?
- Do all staff use a family-centered coaching approach to delivering early interventions services?

Family Members on the Leadership Team

We encourage you to have family members on your program-wide leadership team. Family members can help you think about how to communicate to other families about the Pyramid Model and identify strategies for gaining family input and feedback, practices that support and maintain family engagement, including families from diverse communities, and mechanisms for evaluating and strengthening your practice delivery. Many early intervention programs have staff members who had previously received services through early intervention. Their perspectives are highly valued and might seem like the natural choice for leadership team membership. We encourage you to recruit a family member(s) currently receiving services, as their experiences will be different and more relevant.

See the guidance below for information on recruiting and supporting family members to join the leadership team.

Introducing Families to the Pyramid Model

During the initial phases of implementing the Pyramid Model, consider how families might provide input about your mission statement, your goals for strengthening how you support families in promoting children's social-emotional development, and the resources families might need.

Introducing the Pyramid Model: Ideas for Family Input

- Use your newsletter to describe the initiative and include a link for family feedback
- Provide staff with a flyer to share with families and provide them with reflective questions to pose to their families for feedback.
- Reach out to cultural and community leaders to discuss your intention to gain their input on how to ensure your work will be culturally relevant and affirming.
- Host a family meeting (in person or virtually) to describe the importance of children's social-emotional development to their overall development and describe the approach. Ask for feedback about what families might need.
- Use your social media page to describe your effort with a link for families to share their reflections and feedback.

As you identify the strategies, consider how you reach all families within your program. Considerations might include offering materials in a family's primary language, connecting with community members who are trusted messengers of diverse cultural groups in the program, facilitating participation in program events and activities by having interpreters available for families or structuring events so they are engaging to the diverse families in the program. It would be best if you also used diverse strategies so that families can provide feedback to you in the manner that works best for them.

After the initial introduction of your implementation of the Pyramid Model to families currently enrolled in the program, you want to be prepared for how you will continually introduce the Pyramid Model to new families as they enroll in services. In doing so, the team should consider what they want families to know about social-emotional development and what to expect from the program to support their use of promotion, prevention, and intervention as their child develops. For example, it is probably less important that families recognize the Pyramid Model graphic and what it represents, and it is more important that they know to expect their early intervention provider to give them guidance related to fostering social-emotional development and addressing behavior as their child develops.

Some Ideas for Engaging Families in Pyramid Model Practices

- Create easy to consume materials such as infographics, video clips, or magnets to share important information with families.
- Develop materials that highlight the core principles and practices for fostering social-emotional growth (e.g., relationships, co-regulation, responsivity, play).
 - Provide the information via social media posts, newsletters, videos on the website, and handouts that service providers can review with families.
- Describe how the service providers will be continuously observing and supporting children's social emotional growth over time and the support that might be provided to families in your program handbook.
- Explain the use of ongoing developmental screening of social-emotional development and why that occurs at various age intervals in your program handbook, on a fact sheet or infographic, by posting a short video, and talking points that you give your service providers.
- Develop materials that list resources related to child guidance strategies that might be used at various ages. These can be provided to families when they have questions about their responses to child behavior they find challenging.
- Develop materials to describe the collaborative teaming process that will be used for developing a behavior support plan and how that process occurs in partnership with the families. These should be prepared in advance so that service providers are ready to explain the process as they support families on their caseload.

For materials to share with families, see these resources:

- [National Center for Pyramid Model Innovations](#)²²
- [Zero to Three](#)²³
- [Sesame Workshop](#)²⁴

Connect with your state Parent Training and Information Center and Community Parent Resource Center to access and collaborate on the development of resources. Use the [Parent Center Hub](#)²⁵ to locate your Parent Center.

²² <https://challengingbehavior.org/implementation/family-engagement/>

²³ <https://www.zerotothree.org/resources/for-families/>

²⁴ <https://sesameworkshop.org/topics/social-emotional-skills/>

²⁵ <https://www.parentcenterhub.org/find-your-center/>

Community Collaborations

You might be providing services to families with subsistence needs (e.g., housing, food, financial, transportation, employment), which affects family functioning and caregiving. You might also have families who experienced trauma, family members who have mental health concerns, and families with other complex stressors who might benefit from more specialized services and connections to other services (e.g., mental health care, dyadic treatment program). We encourage the leadership team to identify the needs of families in their programs and develop collaborative relationships with relevant agencies or service systems. This collaboration can effectively support families accessing the additional services required to meet their needs. As you identify these resources, ensure that all your service providers are prepared to assist families in making connections to these additional services and supports. Lastly, a system should be created to consistently update contacts and collaborations and stay informed about new resources as they are identified and developed.

Case Study

Jones County Early Intervention

The Jones Early Intervention Program Team developed the family flyer on the next page to introduce their families to their Pyramid Model implementation.



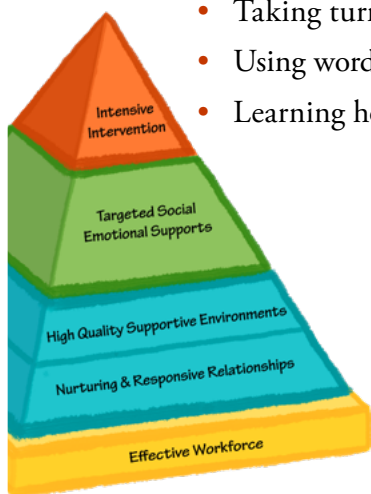
We have something important to share with you!

We are using the Pyramid Model in our program to help you support your child in reaching their developmental milestones. Research has shown that learning social and emotional skills is important to a child's future outcomes. The more socially skilled children are, the more likely they are to be successful in learning and their relationships with others.

What are Social-Emotional Skills for Children from Birth to Three Years Old?

Social-emotional development is one of the developmental areas that your early intervention provider and pediatrician monitor as your child grows. Social-emotional skills are connected to language development, learning, thinking, and problem-solving. Examples of these skills include:

- Building relationships with family members, teachers, and other children
- Following directions and expectations
- Taking turns
- Using words to express emotions, wants, and needs
- Learning how to handle their big feelings



What is the Pyramid Model?

The Pyramid Model is a framework of practices used to promote children's social and emotional development. Your early intervention (EI) provider will help you use the social-emotional practices from the Pyramid Model that match your family values and your child's needs. Your early intervention provider will help you to:

- Support your child in developing relationships with others
- Create predictability that will help your child interact with others and know what to expect.
- Address specific concerns about your child's behavior.

If you are facing more challenging situations, your early interventionist will provide additional support to you and your family.

Section 4: Building Staff Capacity

The Pyramid Model is a framework for organizing effective promotion, prevention, and intervention practices that support young children's social and emotional development and build adult's confidence and competence to address challenging behavior. The benefits of implementing the Pyramid Model are realized when all staff members are supported and actively engage in applying practices with every family.

The leadership team is responsible for providing professional development experiences and ongoing support to assist all early intervention staff in understanding and implementing the Pyramid Model practices during home visits. Several critical elements will require discussion, planning, and implementation by the leadership team:

1. All early intervention staff in the program should receive training and coaching in Pyramid Model practices.
2. New staff should be given an overview of the approach within the first few months of joining the program. Following the overview, new staff should receive coaching support and enroll in a Pyramid practices training workshop or the virtual early intervention training modules offered by the Pyramid Model Consortium.
3. The program should use the Early Interventionist Pyramid Practices Fidelity Instrument (EIPPF) to assess early interventionists' use of Pyramid Model practices. The leadership team should use these data to track growth in practice and determine professional development options, including what coaching delivery supports are needed for individual practitioners, identifying areas for additional training, and changes to the professional development plan as staff gain capacity.
4. The leadership team should include team members trained to provide practice-based coaching (PBC) to support early interventionists in becoming proficient in using Pyramid Model practices. The leadership team will determine a process for recruiting coaches, who will receive coaching, and the frequency of coaching sessions. They will also review implementation progress data (e.g., EIPPF scores and coaching data) gathered by the coach.
5. Although not all early interventionists might receive coaching simultaneously (due to coaching workload constraints), all early interventionists should have an individualized professional development plan that includes implementing Pyramid Model practices. This plan might be informed by EIPPF data or the [Early Intervention Implementation Checklist](#)²⁶ posted on www.challengingbehavior.org.
6. The leadership team should use EIPPF data, early interventionist needs assessments or self-assessments, child or family outcome data, and coaching data to plan group training events. Workshop and in-service training should be determined by identifying common areas of need identified on these tools.
7. In addition to these training events, the leadership team should plan training and coaching to support early interventionists providing services to families with complex needs that reflect the needs of the community they serve (e.g., maternal depression, disability diagnoses, local resources and programs, supporting families experiencing homelessness).

²⁶ <https://challengingbehavior.org/document/early-intervention-implementation-checklist/>

Staff Training

The leadership team must ensure all early interventionists in the program receive training in the Pyramid Model Practices. This includes creating a plan for onboarding new staff to the Pyramid Model and providing training. At monthly leadership team meetings, the team should review data (e.g., EIPFFI data, needs assessments, family and child outcomes) to plan group training events. Workshops and in-service training should be determined by identifying common areas of need that are identified on these tools.

Pyramid Model Practices Training for Early Intervention (Part C)

The Pyramid Model practices training provides staff with an understanding of the Pyramid Model practices in early intervention. Practices are linked to the EIPFFI, and participants will complete the EIPFFI as a self-assessment or to prepare for coaching. The Training Options table provides some suggestions for how leadership teams might plan for this training. The training is organized into the following modules:

Module 1: Overview of the Pyramid Model in Part C Early Intervention

Module 2: Building Relationships with Families

Module 3: Understanding Culturally Responsive Practices

Module 4: Effective Communication with Families

Module 5: Social and Emotional Competence in Infants and Toddlers

Module 6: Responsive Caregiving and the Dyadic Relationship

Module 7: Foundations of Family Coaching

Module 8: Family-Centered Coaching Practices

Module 9: Positive Parenting Practices

Module 10: Social and Emotional Assessment

Early Intervention Pyramid Model Practices Training Options

Training Option	Time	Delivery Options	Who should attend?
Option 1: All 10 modules of the Part C Practices training	2-day (12-14 hours total) 6-day (2-3 hours per session)	Virtual or In-person	Implementation site practitioners, practitioner coaches, leadership team members
Option 2: Use EIPPEI data, needs assessments, or family and child outcome data to deliver the parts of the practices training most relevant to staff.	1-3 hours per session, depending on topic		
Option 3: Use eModules from the Pyramid Model Consortium ²⁷ to deliver practices training and include group staff reflection sessions with a coach.	8 hours to complete modules 8-10 hours for group reflection		

²⁷ <https://www.pyramidmodel.org/online-courses-epyramid/>

Who provides the training?

Initially, this training might be provided by the program implementation coach, but as the program builds capacity, practitioner coaches and program leadership team members might provide this training over time. There might also be opportunities to receive this training through state-level events if your state implements the Pyramid Model in Part C.

How does this training align with family coaching in early intervention?

Early interventionists use family coaching practices as part of implementing the Pyramid Model. Some programs already use a family coaching framework such as Routines-Based Early Intervention (McWilliam, 2010), Family Guided Routines Based Intervention (Woods, 2000), or the coaching interaction styles outlined in Rush and Shelden’s *Early Childhood Coaching Handbook, Second Edition*. (2020). The Pyramid Model practices blend well with other evidence-based and developmentally appropriate family coaching frameworks. The Pyramid Model practices complement these family coaching practices by including a social and emotional lens and intentional focus on the dyadic relationship when working with families.

Team Tool - Staff training log sample

Below is an example of how a program might track the trainings that have been completed by individual staff members.

Staff

Name	Position	Pyramid Overview in Part C	Building Relationships with Families	Culturally Responsive Practices	Effective Communication	Social Emotional Competence
Paul P.	Program Director	9/6/23	9/13/23	9/27/23	10/11/23	10/18/23
Chris M.	EI/coach	9/6/23	9/13/23	9/27/23	10/11/23	10/18/23
Maria N.	OT	9/6/23	9/13/23	9/27/23	10/11/23	10/18/23
Emilie O.	PT	9/6/23	9/13/23	9/27/23	10/11/23	10/18/23

Using the Early Interventionist Pyramid Practices Fidelity Instrument (EIPPF)

The Early Interventionist Pyramid Practices Fidelity Instrument (EIPPF) Field Test Edition 1.0 provides a tool that programs can use to assess the early intervention providers' implementation of the Pyramid Model practices. The EIPPF is used to gain information on early interventionist strengths and needs related to practice implementation and to document early interventionist change in practices due to training, coaching, or other forms of professional development. Additionally, the EIPPF can be used by the leadership team to identify the overall status of the program (by examining EIPPF data across early interventionists) in the implementation of practices and the common needs for professional development.

A coach uses the EIPPF as they observe the early interventionist providing early intervention services to caregivers. The term caregiver refers to any individual who regularly interacts with the child and receives support from the early intervention practitioner during early intervention visits in the natural setting. This could be a parent, family member, other care provider, or child care provider. Ideally, the practitioner should be observed at least two times (e.g., two, 1-hour sessions) with different caregivers to ensure practices are used across sessions with caregivers. Not all practices will look the same with all caregivers due to caregiver preferences, beliefs, or priorities.

The EIPPF is used at the beginning and end of a program year or when an early intervention provider is new to the program. The initial EIPPF will be used by the practitioner coach in the identification of potential action plan goals that will serve as the focus of coaching activities. The leadership team will examine patterns across early interventionists' data to see if there are key practice areas that could be the focus of training events. Individual EIPPF data can also inform the leadership team what types of coaching support might be most effective for staff in their program. Leadership teams might also decide to conduct the EIPPF more frequently to observe any changes they see in practice that result as early interventionists receive professional development and coaching support.

Understanding the Structure of the EIPPF

The EIPPF is divided into six indicators by categories with a total of 48 items. Each indicator is aligned with the relevant [Division for Early Childhood \(DEC\) Recommended Practices](#)²⁸ (2014) and [Seven Key Principles and Practices for Providing Early Intervention Services in Natural Environments](#)²⁹. Examples to illustrate practices for each item are provided but should not be used to score the practitioner. The practices are expected to look different depending on context across families, caregivers, and early interventionists. Some leadership teams might decide not to score the entire tool. For example, if a program does not currently use social and emotional assessment, it can omit scoring that category of practices. The indicators are listed below:

Indicator Category	Number of Practices
Building Partnerships with Families (BP)	10
Social Emotional Development (SE)	5
Family-Centered Coaching (FCP)	7
Dyadic Relationships (DR)	12
Supporting Families with Children with Severe, Persistent Challenging Behavior (CB)	7
Social Emotional Assessment (A)	7
Total (if all categories scored)	48

Scoring Guidelines

The tool provides three scoring options for items. Items can be scored through observation, interview, or through documentation. If a scoring option is shaded in grey, the item cannot be scored with that option.

Scoring Options:

- **Observation (O):** Refers to items scored through observation. Ideally, two 1-hour observations should be conducted with various caregivers to ensure the practitioner uses practices across caregivers.
- **Interview (I):** Refers to items scored via an interview with the observer and practitioner. Items scored by interview usually occur when the observer would like clarification on what was observed or if a practice wasn't observed to allow the practitioner to talk through their use of a practice.
- **Documents (D):** Refers to items scored using practitioner or program documentation that could be used to support the use of the practice. Examples of documentation might include resources provided to caregivers, log notes, child and family goals and outcomes, family coaching agreements, or information provided to the caregiver from the program.

²⁸ <https://www.dec-sped.org/dec-recommended-practices>

²⁹ <https://ectacenter.org/topics/eiservices/keyprinkeyprac.asp#:~:text=The%20early%20intervention%20process%2C%20from,needs%20and%20family%2Didentified%20priorities.>

Observers should choose only **ONE** option to score each item. Score a YES (Y) or NO (N) for each item under observation, interview, or documents. A Yes indicates the practitioner uses this practice across multiple families and sessions when appropriate. A No indicates the practitioner has not demonstrated the use of this practice across multiple families and sessions and is working on developing competency with this practice. Coaching and feedback should be provided to support increased use of the practices scored with a NO, and to support the maintenance of the practices scored with a YES.

Practice-Based Coaching

The leadership team should include team members trained to use Practice-Based Coaching (PBC) to support staff in becoming proficient in using the Pyramid Model Practices. PBC refers to a cyclical process of coaching that includes three major components: shared goal setting and action planning, focused observation, and reflection and feedback. These components are delivered in the context of a collaborative partnership between the practitioner coach and the early interventionist.



PBC Coaching Delivery Options

Not every early interventionist will need one-on-one coaching with a practitioner coach. PBC allows for different delivery options based on the program’s and staff’s needs. Leadership teams should use the summarized EIPFFI data to determine the types of coaching support that their staff needs. This [resource from the National Center on Early Childhood Development, Teaching, and Learning](https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/abc-choosing-coaching-format.pdf)³⁰ offers guidance on choosing a delivery method.

Format & Delivery Option	Description
Self-Coaching	<p>Staff use self-guided materials to structure an observation of their practices, including video-recording in-person visits or recording their telehealth meetings with families or caregivers.</p> <p>The Early Intervention Implementation Checklist or the Early Intervention Pyramid Practices Fidelity Instrument can be used to create an individualized professional development plan and evaluate progress.</p> <p>Monthly check-in with a practitioner coach.</p>

30 <https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/abc-choosing-coaching-format.pdf>

Format & Delivery Option	Description
Peer Coaching	<p>The practitioner coach supports two early interventionists to set their practice goals through shared goals and action planning.</p> <p>Peers exchange their action plans with each other before the video-recorded observation.</p> <p>Early intervention provider records themselves and give the video observation to their peer. In turn, they conduct a focused observation on their peer's recorded early intervention session.</p> <p>Peers meet with each other to share feedback and reflect on observations.</p> <p>Monthly check-in with a practitioner coach.</p>
Individualized Coaching	<p>The practitioner coach and early interventionist set goals through shared goals and action planning.</p> <p>The Practitioner coach observes the early interventionist in-person or virtually during an early intervention session with the caregiver or family.</p> <p>The practitioner coach meets with the early interventionist to provide feedback on the action plan goal observed. Feedback might also be provided at a distance through email or a virtual coaching platform.</p> <p>Early interventionist and practitioner coach meet 1-2 times a month.</p>
Group Coaching	<p>Multiple early interventionists focused on a similar set of EIPPII practices meet in a group setting with a practitioner coach to set goals and review recorded video that each early interventionist submits for feedback and reflection from the group.</p> <p>Monthly individual check-in with the coach.</p>

Ideas for Universal Coaching and Training Supports

- Post EIPPFPI practices on a bulletin board for staff to take on visits to try and share back during the next staff meeting. Provide an incentive for staff who attempt the most practices.
- Embed learning about a new EIPPFPI practice at each staff meeting. Encourage staff to use it and share results at the next meeting. Provide incentives for staff members that complete the activity.
- Create a Pyramid Model staff newsletter.
- Provide monthly lunch and learns. Survey staff to find a time that works. If providing a virtual option, record and share with staff to watch at a time that is convenient. A brief 15-30 minute workshop on a specific practice or set of practices identified from program-wide EIPPFPI data and staff surveys.
- Plan office hours with a coach. Early interventionists can plan to meet with a coach when specific situations happen where they would like support.
- Consider “Make and Take” workshops where staff can create visual schedules, social stories, or other materials they might use with families.
- Host a Watch Party series for families and early interventionists to watch Netflix “Babies”. Prepare a discussion topic.
- Create a book club for coaches and early interventionists to unpack practices and plans for crisis situations with families. Some books you might consider include:
 - *Tackling the Tough Stuff: A Home Visitor’s Guide to Supporting Families at Risk* by Angela M. Tomlin & Stephan A. Viehweg
 - *The Attachment Theory Workbook* by Annie Chen
 - *Optimistic Parenting: Hope and Help for You and Your Challenging Child* by V. Mark Durand
 - *Pause & Reflect: Your Guide to a Deeper Understanding of Early Intervention Practices* by Dana Childress
 - *Prevent, Teach, & Reinforce for Families: A Model of Individualized Positive Behavior Support for Home and Community* by Glen Dunlap, Phillip S. Strain, Janice K. Lee, Jaclyn D. Joseph, Christopher Vatland, & Lise Fox.
 - *Essentials of Practice-Based Coaching: Supporting Effective Practices in Early Childhood* by Patricia Snyder, Mary Louise Hemmeter, & Lise Fox
 - *The Early Childhood Coaching Handbook* by Dathan D. Rush & M’Lisa L. Shelden

Creating a Culture of Coaching in Your Program

Practitioner coaching is one of the systems the leadership team must create to support the implementation of the Pyramid Model in their program. As leadership teams make operational changes, it is common for staff to voice concerns. Being proactive in communication and building support systems for staff will help make the transition smoother. The following sections provide the leadership team guidance on how to build a thriving coaching system in their program.

Communicate the Purpose of Practice-Based Coaching

Practice-based coaching is a form of professional development meant for staff to have ownership and voice in the process. Similarly, to establish staff buy-in for the Pyramid Model, the leadership team should have a system for communicating the purpose of coaching and receiving feedback from staff when implementing the PBC process.

Create a Staff PBC presentation to present at a staff meeting. An overview of PBC can be included in your initial staff buy-in presentation, and the initial presentation or follow-up survey could be an excellent opportunity to identify staff interested in coaching. Some leadership teams might do a separate presentation as they roll out the coaching process. Regardless of the leadership team's decision, this presentation should communicate the purpose of coaching and provide more specific information about coaching activities and expectations. This might include options for coaching delivery formats, the EIPFFI process, estimated time spent in observations and reflection and feedback, frequency of coaching cycles, and expected outcomes of the coaching process.

Create two-way communication systems. Use surveys or focus groups for staff to share their excitement, concerns, and implementation ideas. Surveys are also an excellent way for the leadership team to gain insight into individuals interested in becoming a practitioner coach or joining an initial cohort of early interventionists who will receive coaching.

Create templates and materials to support coaching. The leadership team can partner with practitioner coaches to create templates for coaching agreements, family agreements, and materials to communicate PBC to staff and families.

Identify key talking points to communicate the benefits of coaching during staff meetings and one-on-one interactions with staff members. The leadership team might discuss the values and outcomes supporting staff buy-in for coaching and the Pyramid Model. Even the best practitioners have coaches. The provision of coaching is not performance-based or punitive. The value of practitioner coaching will be more apparent as the coaching and learning culture is established and nurtured within your program. Coaching is a personalized approach to professional development that can support staff in their personal and professional development goals. For example, staff now have an internal resource where they can go to receive support in problem-solving a situation with a family.

Make connections to the parallel process with children and families. Many early interventionists find engaging in the PBC process similar to their experience providing family coaching support to families and children. Whether a new practitioner coach providing PBC support or an early interventionist receiving coaching support, early intervention staff report writing action plans, observation, or engaging in reflective discussion around practice implementation feels natural based on their current work experience.

Acknowledge Staff as they Implement Practices. The leadership team also develops strategies to support staff in implementing the Pyramid Model practices. Implementing the Pyramid Model with fidelity by all staff is an ambitious effort and takes time and commitment. The leadership team needs to provide support, acknowledgments, and incentives to staff as they continuously improve the implementation of Pyramid Model practices.

Ideas for Staff Acknowledgment and Incentives

- Create a recognition board. Program administration, coaches, behavior specialists, and early interventionists can use pyramid shaped notes to write a note about another staff member's effective use of a Pyramid Model practice. The notes remain posted for a month, and the process begins again. The board is meant to be inclusive of all staff accomplishments. This could also be accomplished through a staff social media platform for staff on the go. Examples of notes might be:
 - “Feeling proud of the early interventionists who shared their ideas for teaching families about emotional literacy during last staff meeting.”
 - “Congrats to Kalani for successfully coaching a family through their behavior support plan.”
 - “I love the visuals Stephanie posted in our shared folder to help families create visual schedules for their routines at home!”
 - “Way to go Marcus! He has successfully maintained his practice for asking open-ended questions during problem-solving discussions with the families on his caseload for 5 coaching cycles!”
- Invite staff to share their weekly wins. A program director or leadership team member can ask staff to email Pyramid Model success stories at the end of the week if they have one to share. This might include an interaction with a family that went well, the use of an EIPPFPI practice that went well, use of skills by children, child or family progress, etc. The program director or leadership team member compiles what is sent and uses them in their Monday Morning Message to all staff.
- Write a gratitude note. Whenever a coach or administrator joins the early interventionist on a home visit, they leave a note with the practitioner that provides praise or gratitude related to EIPPFPI practices, the visit, or children and family's engagement.
- Create a Pyramid “Show and Tell” standing staff meeting agenda item (5 minutes). A staff member is invited to share how they incorporate an EIPPFPI practice or materials that support Pyramid Model implementation during their home visits. The practitioner coach identifies who is selected to do the show and tell.
- Acknowledge Pyramid wins in staff and family monthly newsletters. Highlight a practitioner with their picture, bio, favorite things, and how they are implementing the Pyramid Model in their home visits.

Selecting Coaches and Caseloads

One step in building a system to support coaching in the program is identifying who will fill the role of practitioner coach. Individuals selected as practitioner coaches will still have their caseload of families. The leadership team will need to consider coaching caseloads and staff capacity when making coaching decisions. Leadership team members must also consider the time necessary for coaching (e.g., travel time, observation time, resource sharing, reflection and feedback planning and debrief time). Some solutions that programs have used are listed below.

Tier coaching efforts. Not all early interventionists will require one-to-one individual coaching as part of their professional development plan. EIPFFI data and staff preferences can be used to match practitioners to the coaching delivery model that best fits their current professional development goals. For example, four practitioners might receive 1:1 support from a coach, eight engage in peer-to-peer coaching, and two enroll in self-coaching. Setting a check-in timeframe with staff (e.g., every 3 months) will be important to ensure their current support matches their need. This allows staff to communicate bi-directionally as their professional development needs change as they build capacity.

Use coaching cohorts to allow more one-to-one attention. Some programs might choose to inform staff that they will all receive one-to-one coaching at some point, but it will be done by cohorts. Leadership teams will need to determine the number of coaches, number of early interventionists being coached per cohort, time frames for cohorts (e.g., every four months), and any universal coaching support that can be provided while staff wait for coaching to start. This is also a great way to recruit future coaches and PBC and Pyramid Model champions when staff engage in coaching and wish to share what they learned with other staff members.

Use technology to maximize coaching time. Some early intervention programs require a lot of travel time for visits, or coaches might not have time to travel to visits on top of their current caseload. Use video or recorded virtual meetings for observations. Allow coaches to provide feedback through email, text, or a coaching platform like [Head Start Coaching Companion](#)³¹ or [Torsh Talent](#)³². Program leadership teams will need to discuss and plan for privacy considerations and provide staff and families with video consent when preparing for this option.

Separate Supervision from Coaching. It is recommended that the practitioner coach role is filled by a staff member who is not a supervisor. However, there are some situations where this might have to occur. For PBC to be effective, coaches need to establish coaching as a safe place for learning through the collaborative partnership with the early interventionist. Supervisors who must fill the coach role must communicate on an ongoing basis when interacting with a staff member as a coach vs. a supervisor. Another solution is, if supervision is shared by multiple staff members, to assign coaching activities to staff members they are not directly overseeing in their supervisory role.

Use community resources to support coaching. Some programs might be part of a state effort that is implementing the Pyramid Model across multiple programs. Leadership teams might partner with other early intervention programs to share practitioner coaches. Additional resources for coaches might be connections to universities with staff and students trained in Pyramid Model and PBC and other grant-funded local organizations (e.g., Early Head Start, CCR&R) with similar training.

Sample Coaching Assignment Form

EI Provider	Coach	Start Date	End Date	Notes
Maria	Chris	11/8/23		Monthly individual; re-visit coaching delivery after 2 nd EIPFFI
Jasmine	Chris	11/13/23	2/14/24	Bi-weekly individual; move to group coaching

31 <https://eclkc.ohs.acf.hhs.gov/professional-development/head-start-coaching-companion/head-start-coaching-companion>

32 <https://www.torsh.co/>

EI Provider	Coach	Start Date	End Date	Notes
Thomas	Erin	1/10/24	3/27/24	Group coaching-dyadic relationships
Julia	Erin	1/10/24	3/27/24	Group coaching-dyadic relationship
Alanna	Erin	1/10/24	3/27/24	Group coaching-dyadic relationships
Sammi	Cheyenne	2/7/24	5/8/24	Peer coaching w/Joyce- monthly check-in
Joyce	Cheyenne	2/7/24	5/8/24	Peer coaching w/Sammi-monthly check-in
Yolanda	Cheyenne	2/7/24	5/8/24	Peer coaching w/Karen-monthly check-in
Karen	Cheyenne	2/7/24	5/8/24	Peer coaching w/ Yolanda-monthly check-in

Considerations When Planning for Coaching

- Have we prepared coaches to communicate their role, the PBC process, and goals and purpose of coaching to early interventionists?
- Have we prepared staff members for coaching (e.g., communication, time in their caseload, materials, and technology support)?
- How are we sharing coaching information with families?
- Are all staff members aware of our program coaching expectations and roles?
- Have we provided time for coaches to meet and build collaborative partnerships with staff members?
- How do we plan to use data to share and evaluate coaching data?
- Are there specific EIPPEI practices we would like to focus on coaching or training?
- Are staff provided opportunities to share their successes?
- When will coaching begin??
- Have we identified potential community resources to support coaching and training?
- How often are coaches expected to meet with early interventionists?
- Are there any other technology or resources we need to support coaching implementation?
- How and when will focused observations and the debriefing sessions for reflection and feedback occur?
- How will we identify what coaching supports individual staff members need?

The leadership team should determine the content of the early interventionist-coach agreement and the family coaching agreement, and how the agreements will be presented to staff and families (a sample is provided in the Leadership Team Resource File). List your decisions on the Leadership Team Implementation Plan.

Coaching Tools

At least one staff member must be trained to use PBC and should track their activities using the coaching log. Tools and forms that the practitioner coach will use are as follows:

Tool	Description
<u>Early Interventionist-Coach Agreement</u> ³³	A written agreement between the coach and the early interventionist is recommended. The agreement allows the early interventionist and coach to discuss mutual expectations of the coaching relationship and make a commitment to collaborate.
<u>Practice-Based Coaching and the Pyramid Model Family Agreement</u> ³⁴	PBC will occur in the settings where early interventionists work with families or other caregivers. This might include videotaping in-person sessions, recorded virtual meetings, or in-person sessions where a coach attends a home visit with their early interventionist. Families should be asked if they consent to participate. A written agreement between the program and families is recommended. The agreement helps to communicate the purpose of PBC as a form of professional development for their provider, what the coaching context will look like during a home visit, the family's role, and their options to participate in coaching and video recording.
<u>Early Interventionist Checklist for Reviewing Practice-Based Coaching with Families</u> ³⁵	This checklist accompanies the Practice-Based Coaching (PBC) Family and Caregiver Participation Agreement. The checklist will help the early interventionist communicate the purpose and process of PBC to families while providing families with the choice to participate. The checklist offers actions for early interventionists to consider in preparing for engaging conversations with families around PBC and early intervention.
<u>Early Interventionist Pyramid Practices Fidelity Instrument (EIPPF)</u> ³⁶	Used by the coach to assess early interventionist strengths, needs, and growth in implementing Pyramid Model practices.
<u>Early Intervention Coach Action Plan Goals Planning Form</u> ³⁷	Used by the coach to record information about strengths, needs, and potential focal areas for coaching after completing the EIPPF. Coaches can use this form to guide discussion during shared goals and action planning.

33 <https://challengingbehavior.org/document/early-interventionist-coach-agreement/>

34 <https://challengingbehavior.org/document/practice-based-coaching-and-the-pyramid-model-family-agreement/>

35 <https://challengingbehavior.org/document/early-interventionist-checklist-for-reviewing-practice-based-coaching-with-families/>

36 <https://challengingbehavior.org/implementation/data-decision-making/eippfi/>

37 <https://challengingbehavior.org/document/early-intervention-coach-action-plan-goals-planning/>

Tool	Description
<u>Early Intervention Implementation Checklist</u> ³⁸	This tool aligns with the EIPFFI. Coaches and early interventionists can use this tool to support early interventionists' self-reflection on their implementation of Pyramid Model practices. This tool can help early interventionists determine their strengths and needs to prepare for shared goals and action planning with their coach. Early interventionists have an opportunity to complete the checklist during the practices training.
<u>Early Interventionist Goal Planning Form</u> ³⁹	Coaches can provide early interventionists with this form to document their reflections on their strengths, needs, and focal areas for coaching after completing the Early Intervention Implementation Checklist. Early interventionists can use this form to guide discussion with their coach during shared goals and action planning.
<u>Action Plan Template</u> ⁴⁰	Used by the coach to record coaching goals and guide coaching activities. Early interventionists and coaches collaboratively determine goals and steps that are included in the action plan.
<u>Action Plan Quality Checklist</u> ⁴¹	Practitioner coaches and early interventionists can use this checklist to write quality action plans during shared goals and action planning.
<u>Early Interventionist Focused Observation Notes</u> ⁴²	A note template that the coach might use to document observation data during the focused observation. Observations are linked to the goal determined collaboratively with the coach and the early interventionist.
<u>Conducting a Focused Observation with Early Interventionists</u> ⁴³	This tool provides coaches the information they need to prepare for and conduct quality-focused observations with early interventionists.
<u>Conducting a Reflection and Feedback Meeting with Early Interventionists</u> ⁴⁴	This tool provides coaches with the information they need to provide reflection and feedback during debriefing meetings with early interventionists following the focused observation.

38 <https://challengingbehavior.org/document/early-intervention-implementation-checklist/>

39 <https://challengingbehavior.org/document/early-interventionist-goal-planning-form/>

40 <https://challengingbehavior.org/document/action-plan-form/>

41 <https://challengingbehavior.org/document/action-plan-quality-checklist/>

42 <https://challengingbehavior.org/document/early-interventionist-focused-observation-notes/>

43 <https://challengingbehavior.org/document/conducting-a-focused-observation-with-early-interventionists/>

44 <https://challengingbehavior.org/document/conducting-a-reflection-and-feedback-meeting-with-early-interventionists/>

Tool	Description
Early Intervention Practitioner Coaching Log with Definitions ⁴⁵	The coaching log provides information and data on who receives coaching, duration of coaching, frequency of coaching, and the coaching strategies used during focused observations and debriefing meetings. The coach can use this log to determine coaching supports needed for individual early interventionists. This version includes definitions and illustrations for each coaching strategy.
Early Intervention Practitioner Coaching Log (Excel) ⁴⁶	This log is designed for use by one coach who might be coaching multiple early interventionists. Similar to the paper version, the excel spreadsheet indicates the time spent on duration and frequency of coaching, and the strategies used. Data can be viewed across all practitioners (coach summary) or by individual practitioners (EI summary) to help coaches plan coaching time.
Unpacking Coaching Webinar Series ⁴⁷	This webinar series hosted by the National Center for Pyramid Model Innovations includes topics relevant to program and practitioner coaching and practice-based coaching.

References

McWilliam, R. A. (2010). *Routines-based early intervention: Supporting young children and their families*. Paul H. Brookes Publishing.

Rush, D., & Shelden, M. (2020). *The early childhood coaching handbook*. Paul H. Brookes Publishing.

Woods, J. (2000). *Family Guided Routines Based Intervention (FGRBI) and Caregiver Coaching*. <http://fgrbi.com/>

⁴⁵ <https://challengingbehavior.org/document/early-intervention-practitioner-coaching-log-with-definitions-of-practitioner-coaching-strategies/>

⁴⁶ <https://challengingbehavior.org/document/early-intervention-practitioner-coaching-log-excel/>

⁴⁷ <https://challengingbehavior.org/training/webinars/upcoming-webinars/>

Jones County Early Intervention

The Jones County Early Intervention leadership team surveyed staff to identify their preferences for the Pyramid Model practices training. The poll results shared that staff preferred six 2-hour virtual training workshops on Friday mornings. The training sessions were scheduled weekly and provided by the program implementation coach.

After completing the practices training, the leadership team introduced their coaching plan with staff at the first staff meeting. Part of their communication strategy was to let staff know they would start slow and collect data, including opportunities for staff feedback to inform coaching decisions. The leadership team provided a survey at the end of the meeting to identify anyone interested in serving the role of practitioner coach or receiving coaching. They identified Chris and Sara as coaches.

The Jones County Early Intervention program has 20 early interventionists, two practitioner coaches, and five leadership team members, not including the coaches. The leadership team decided to attend initial trainings with the practitioner coaches to support initial EIPFFI data collection. The program implementation coach provided Chris, Sara, and leadership team members with Practice-Based Coaching (PBC) training, and asked them to practice conducting the EIPFFI on each other and with a volunteer staff member. They worked together to conduct 2-3 EIPFFIs each over a month to review the data to determine next steps for coaching support.

The leadership team decreased Chris and Sara's caseloads by two families each to allow them time to each coach a volunteer early interventionist (coachee) as they built their capacity using Practice-Based Coaching, and to allow time to collect coaching log data to determine how much time coaches and early interventionists needed to engage in PBC. The leadership team asked Chris and Sara to draft coaching and family agreements and professional development plans they could review and finalize to use with early interventionists. The leadership team drafted a video consent form, and the practitioner coaches and volunteer coachees received technology training on their selected coaching platform to allow coachees to post videos from their home visits to limit travel time for coaches.

The leadership team used their EIPFFI data to look for patterns across the early interventionists and noticed they needed the most support in family coaching and dyadic relationships. They used this information to start embedding EIPFFI practice challenges within their monthly staff meetings specific to family coaching and supporting dyadic relationships. They also decided to offer a book club opportunity to unpack family coaching practices. They plan to conduct another EIPFFI after six months to look for changes in practice. They also plan to use the EIPFFI, coaching log data, and feedback from the practitioner coaches and volunteer coachees to inform which coaching delivery model(s) they want to implement.

Case Study

Finally, the leadership team discussed how they could begin to acknowledge staff for their implementation efforts. They decided on two strategies to implement immediately and agreed that they wanted to ask staff for their ideas after the initial months of implementation. The strategies they decided to implement immediately were: 1) Adding a show and tell agenda item to their monthly staff meeting by asking an early intervention provider to present (making sure all eventually have a turn; and 2) Providing early interventionists with a small token of acknowledgment (handwritten note, flower, free coffee) when they observe a practice (e.g., during a coach or supervisory visit), or hear someone share success with a Pyramid Model practice (e.g., in a staff meeting or conversation).

Section 5: Providing Interventions for Children with Persistent Challenging Behavior

Interventionists need to respond immediately and effectively when families have concerns about their child's behavior. Sometimes, the concerns are about developmentally expected behaviors for infants and toddlers (e.g., crying, tantrums), and families might need guidance about understanding, preventing, and responding to the behaviors that challenge them. However, an individualized behavior support plan is necessary for children with persistent challenging behavior that is disruptive to the child's interactions with others and engagement in family life.

Providing Professional Development Related to Behavior

The Leadership Team should ensure that all early intervention providers have training on the meaning of challenging behavior, responding to behavior, and how to support families when they have concerns. In addition, they should all receive training in the collaborative teaming process used to develop a behavior support plan for children with persistent, challenging behavior.

Reflections for the Leadership Team: Professional Development on Children's Behavior

- Do all of our early intervention providers understand the meaning of challenging behavior and how to prevent and address behaviors that families identify as challenging?
- Do all of our early intervention providers have the skills to address a family member's use of harsh or harmful responses to behavior in a family-centered, strengths-based, and supportive manner?
- Do all of our early intervention providers have the capacity to guide family members in responding to child behavior in a nurturing, responsive, and developmentally appropriate way?
- Do all of our early intervention providers know the procedures for initiating the process of obtaining support from someone within the program and developing a behavior support plan with the family?

Individualized Interventions for Persistent Challenging Behavior

Intensive individualized interventions are used with children with persistent and severe challenging behavior who do not respond to the typical preventive practices, child guidance procedures, or social-emotional teaching strategies that are effective with most children. These children have challenging behavior patterns of the nature, frequency, duration, or intensity that exceed what is developmentally normative and are disruptive to the family's functioning.

Behavior Specialists

The early intervention program should develop a system so that when there is a need for individualized interventions, a plan can be developed with expediency. The process for developing the individualized intervention is typically guided by a professional with training in infant and early childhood mental health, behavior analysis, developmental psychology, or social work and explicit training to convene a collaborative team to develop a behavior support plan in partnership with the family. In the Pyramid Model, we refer to the facilitator of the behavior support planning process as the **Behavior Specialist**.

Identifying a Behavior Specialist

- Identify a professional with:
 - a background and training in behavior, child development, or infant early childhood mental health
 - knowledge of trauma and the impact of trauma on the developing child and family systems
 - proficient in the use of family-centered and culturally affirming practices
 - strong skills in facilitating team processes
- Experienced in:
 - process of functional assessment and individualized positive behavior support
 - coaching families to implement behavior intervention strategies
 - collaborative teaming with professionals from multiple disciplines

Individualized Intervention Process

The process for developing and implementing an individualized intervention follows the steps listed below.

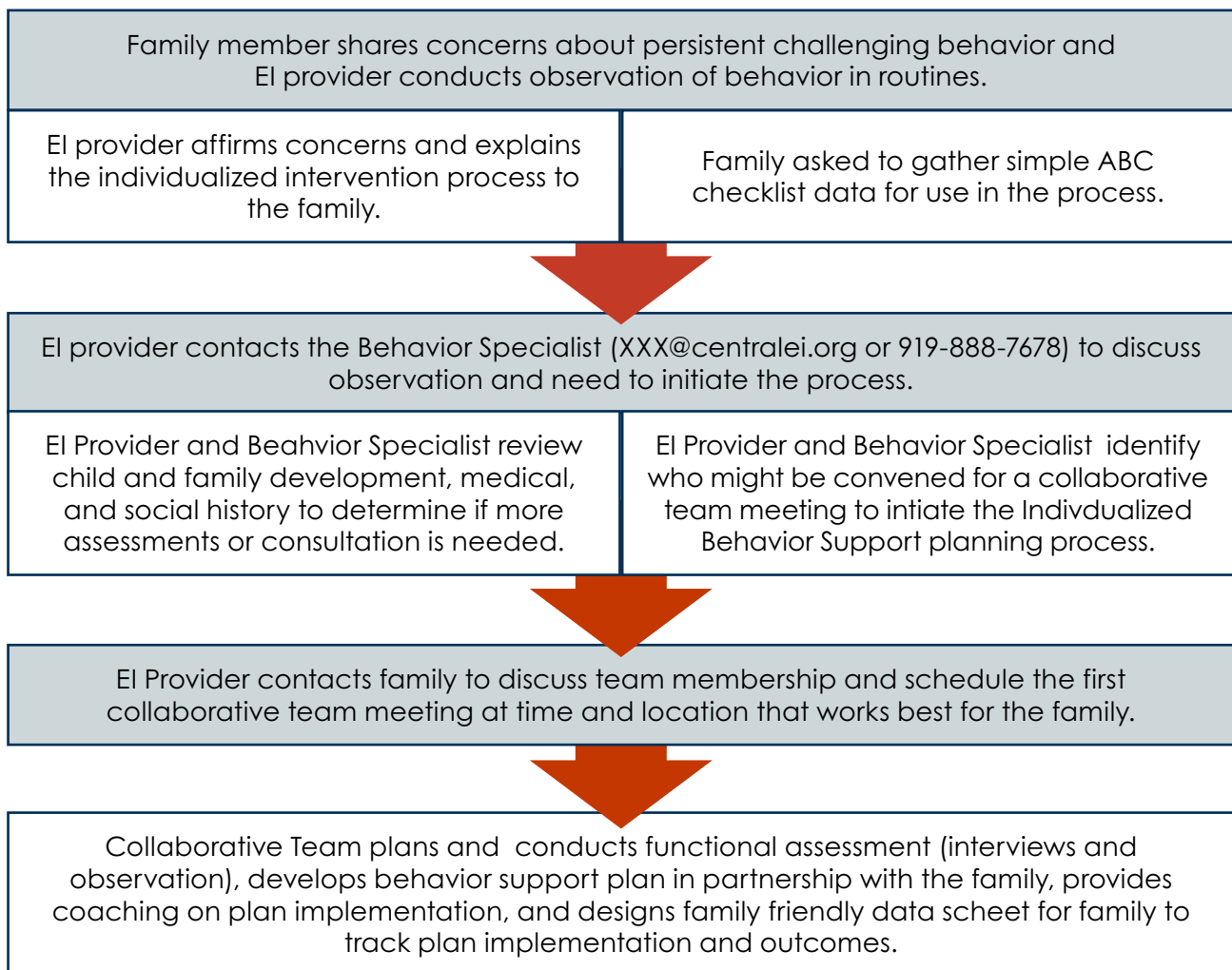
Developing and Implementing a Behavior Support Plan

1. Establish a collaborative team that includes the family
2. Gathering information – Observations, developmental information, additional assessments
3. Developing behavior hypotheses
4. Designing the behavior support plan that includes prevention strategies, skills to teach, and responses to behavior when it occurs.
5. Coaching family members and other caregivers in plan implementation
6. Monitoring and refining the plan

Resources for the Implementation of the Individualized Intervention Process

- [Facilitating Individualized Interventions to Address Challenging Behavior Manual](#)⁴⁸
- [Prevent-Teach-Reinforce for Families Manual](#)⁴⁹
- [Family Behavior Support App](#)⁵⁰

As a leadership team, you must identify how the individualized intervention process will be initiated and who will be involved. You will want these steps to be clearly defined with all the information needed by an early intervention provider so that developing a plan and supporting the family happens as quickly as possible. See the flow chart example below for one program's process:



48 <https://challengingbehavior.org/document/facilitating-individualized-interventions-to-address-challenging-behavior-toolkit/>

49 <https://products.brookespublishing.com/Prevent-Teach-Reinforce-for-Families-P1006.aspx>

50 <https://www.drbartonconsulting.com/dr-erin-barton-1-1>

The Development and Implementation of the Behavior Support Plan

A high-quality behavior support plan will be developed collaboratively with the family and always include four components:

1. Behavior hypotheses – A statement that identifies when the behavior is most likely to occur, the potential trigger for the behavior, what the behavior looks like, what happens immediately after the behavior, and the possible function of the behavior. Often, the team develops several routine or activity-specific hypotheses (e.g., tantrums at mealtimes).
2. Prevention strategies – Strategies to change the triggers to challenging behavior and reduce the child’s need or likelihood to engage in challenging behavior.
3. Replacement skills – Identification of skills that will be taught to the child to support the child in using a new behavior that serves the same function (i.e. communicates something similar to the challenging behavior), but is more appropriate and relevant for the family.
4. New Responses – This includes how the adult will respond to the challenging behavior to make it less likely to occur and how to use reinforcement strategies to ensure the child learns the replacement skills and desired behaviors.

An important concept in developing the behavior support plan is contextual fit. The plan must fit the families’ values, experiences, activities, and culture. As the plan is developed, the facilitator should continuously check in with the family to ask if the strategies that are being proposed are ones they are comfortable trying and will work for their family routines and activities. Plans that are technically sound but not a fit for families might not be used accurately or sustained over time. Once the behavior support plan is developed, families and other caregivers will need coaching and ongoing support to implement the plan within everyday activities and routines. During coaching, more might be learned about the plan’s fit to family preferences and routines, and adjustments might be made.

Once the strategies for the plan are identified, the family should be provided with the written plan in their home language and or within an audio recording or video (whatever means will work best for them to use and review). When the plan is activity-specific (e.g., bedtime routine, meals), a visual display of the steps the adult will use can be posted in the activity area. The behavior support plan often involves using materials such as visuals or environmental arrangements such as changing where materials are placed or what is available. It is crucial that the team identify who will make those materials and assist the family with any needed environmental arrangements prior to implementing the plan.

Collaboration with Mental Health and Social Services

For some children and families, the nature of the behavioral concerns or family situation might require the expertise of a mental health professional on the collaborative team. Adding a mental health professional (e.g., social worker, family counselor, psychologist) or someone trained or endorsed in infant mental health to the team can enhance the team’s ability to understand the behavioral concerns and additional interventions that might be needed. They might bring additional expertise related to understanding the parent-child relationship, psychosocial stressors, and trauma that are contributing to the social-emotional and mental health issues of the child. In addition to the need for a behavior support plan for families to support the child in their family routines and activities, other services might be needed to address concerns, such as trauma, abuse or neglect of the child or siblings, interpersonal/domestic violence, mental health, or substance use disorder affecting parenting ability.

Section 6: Monitoring Implementation and Data-Informed Decision-Making

Leadership teams collect program-level data to evaluate the efficacy of the systems and processes established for Pyramid Model implementation. They use data to oversee coaching and practitioner implementation within the framework of the Pyramid Model. This data-informed approach aids in decision-making at various stages of the implementation process and facilitates the measurement of outcomes for both children and families. The leadership team uses data to monitor their progress towards implementation fidelity, make changes as needed through action planning, and efficiently pinpoint where resources and efforts should address staff and family needs. The leadership team meeting agenda should always include time to review program-level data for decision-making. The [Roadmap #7 - Data Decision-Making and Program-Wide Implementation of the Pyramid Model](#)⁵¹ will provide further information to leadership teams.

Early Intervention Pyramid Model Data Tools

The tools listed in this guide are for implementing the Pyramid Model in early intervention service programs. This section briefly describes each tool with links to access each tool. NCPMI has posted all tools, data entry spreadsheets, and data resources on the [Early Intervention Webpage](#)⁵². Each data entry spreadsheet includes a tutorial link to demonstrate completion of the form.

Pyramid Model Early Intervention (Part C) Benchmarks of Quality v1.0 (BoQ) ([BOQ Form](#)⁵³ and [BOQ Data entry Spreadsheet](#)⁵⁴) guides agencies and programs in evaluating their progress toward implementing the Pyramid Model program-wide. The BoQ is a team tool that is scored by capturing the consensus opinion about the extent to which critical elements of program-wide implementation are in place. Once the BoQ has been scored, the leadership team can use the information to guide action planning. The tool can be used as often as the leadership team desires but should be updated regularly (e.g., 2x a year) for teams to use for data-based decision-making and action planning. **Early Intervention Coaching Log (Both Excel version**⁵⁵ **and Paper version**⁵⁶): This tool allows coaches to track their time spent coaching, the types of coaching strategies used, the number of cycles completed, and the number of action plan goals created and completed. Coaches can use this information to plan coaching time and adapt coaching supports. The Excel file is meant to be used by one coach who is coaching multiple early interventionists. Coaches will submit their coaching logs monthly to the data coordinator to organize for leadership team meetings.

51 <https://challengingbehavior.org/document/roadmap-7-data-decision-making-and-program-wide-implementation-of-the-pyramid-model/>

52 <https://challengingbehavior.org/implementation/early-intervention/#data>

53 <https://challengingbehavior.org/document/pyramid-model-early-intervention-part-c-benchmarks-of-quality-boq-form/>

54 <https://challengingbehavior.org/document/pyramid-model-early-intervention-part-c-benchmarks-of-quality-v-1-0-data-entry-spreadsheet/>

55 <https://challengingbehavior.org/document/early-intervention-practitioner-coaching-log-excel/>

56 <https://challengingbehavior.org/document/early-intervention-practitioner-coaching-log-with-definitions-of-practitioner-coaching-strategies/>

Program Summary of Early Intervention Practitioner Coaching (Excel⁵⁷): This tool is used by the data coordinator to combine data for all program practitioner coaches. It provides a summary of coaching data (e.g., time spent, number of cycles, types of coaching strategies used, and number of action plan goals) for the leadership team to review and make decisions around coaching caseloads, time provided for coaching, professional development for coaches, or program expectations for frequency of coaching contacts.

Early Intervention Pyramid Practices Fidelity Instrument (EIPPF): is used to assess the implementation of Pyramid Model practices by early interventionists when coaching family caregivers. EIPPF practices are aligned with the Division for Early Childhood Recommended Practices and the Principles of Early Intervention. The EIPPF organizes practices within six practice categories: 1) Building Partnerships with Families; 2) Social Emotional Development; 3) Family-centered Coaching; 4) Dyadic Relationships; 5) Children with Challenging Behavior; and 6) Social Emotional Assessment. Leadership teams can use EIPPF data to help guide professional development decisions, including coaching, and provide information on the number of early interventionists within the program using Pyramid Model practices at fidelity.

You can access the EIPPF package, which includes the tool, spreadsheet, and Look-Think-Act, on the [Challenging Behavior website⁵⁸](#).

In the table below, we summarize the data tools used with the Pyramid Model implementation and provide information on the frequency of data collection.

Pyramid Model Data Tools

Data Tool	Suggested Frequency of Collection	Who Collects the Data?
Pyramid Model Early Intervention (Part C) Benchmarks of Quality	<p>Initial implementation: Pre-implementation and annually</p> <p>Ongoing: Annually</p>	Program leadership team
Early Intervention Practitioner Coaching Log	<p>After each coach visit</p> <p>Monthly (to data coordinator on the leadership team)</p> <p>Data collection begins after the initial EIPPF is completed, an action plan is developed, and coaching is initiated.</p>	Practitioner Coach
Early Interventionist Pyramid Practices Fidelity Instrument	<p>Coaching: Bi-annually (e.g., pre-coaching and then six months later)</p> <p>On-going: Annually</p>	Practitioner Coach

⁵⁷ <https://challengingbehavior.org/document/program-summary-of-early-intervention-practitioner-coaching/>

⁵⁸ <https://challengingbehavior.org/implementation/data-decision-making/eipffi/>

Data Tool	Suggested Frequency of Collection	Who Collects the Data?
<p>Child or family outcome data using program-adopted tools such as:</p> <ul style="list-style-type: none"> • <i>Ages & Stages Questionnaires: Social-Emotional, Second Edition (ASQ-SE2)</i>, Jane Squires, Ph.D., Diane Bricker, Ph.D., & Elizabeth Twombly, M.S. • <i>The Parenting Interactions with Children: Checklist of Observations Linked to Outcomes (PICCOLO)</i>, Lori Roggman, Ph.D., Mark S. Innocenti, Ph.D., Sheila Anderson, Ph.D., Gina A. Cook, Ph.D., Vonda Jump Normal, Ph.D., & Katie Christiansen, Ph.D. • <i>Individual Growth and Development Indicators (IGDIs) for Infants and Toddlers</i>, Judith J. Carta, Ph.D., Charles R. Greenwood, Ph.D., Dale Walker, Ph.D., & Jay Buzhardt, Ph.D. • <i>The Social Emotional Assessment/Evaluation Measure (SEAM)</i>, Jane Squires, Ph.D., Diane Bricker, Ph.D., Misti Waddell, M.S., Kristin Funk, M.A., LCSE, Jantina Clifford, Ph.D., & Robert Hoselton • <i>Assessment, Evaluation, and Programming System for Infants and Children, Third Edition (AEPS)</i>, Diane Bricker, Ph.D., Carmen Dionne, Ph.D., Jennifer Grisham, Ed.D., JoAnn Johnson, Ph.D., Marisa Macy, Ph.D., Kristine Slentz, Ph. D., & Misti Waddell, M.S. • Completed IFSP goals. 	TBD by program	Early Interventionist

*All data should be submitted to the program data coordinator when collected.

Confidentiality

The leadership team will examine program data and make decisions regarding professional development and implementation support based on their analysis of the data. The leadership team must discuss the importance of confidentiality in all data decision-making activities. This becomes particularly sensitive when early interventionists and family members are included on the leadership team. Leadership teams may wish to address the importance of confidentiality as one of their ground rules. Additionally, when discussing data collection processes with staff, leadership teams should communicate the purpose of the data tool, how it will be used, and how the confidentiality of staff will be protected.

Leadership teams should use unique identification codes (IDs) instead of names and other identifying information for data collected through the EIPPEI and coaching log. For specific information on creating a system for using unique identification codes, please refer to this [Pyramid Model Data: Assigning Unique Identification Codes tipsheet⁵⁹](#). Please note for programs submitting data to a state leadership team, the state data coordinator will share a program ID that should be combined with the coach or early intervention IDs, depending on which data tool is being submitted.

Examples of Unique IDs

Practitioner Coach IDs

Practitioner Coach Name	ID	Notes
Charlie M.	C01	
Sofia R.	C02	Started coaching in Cohort 2

Practitioner Coach IDs (with Program ID for state submission)

Practitioner Coach Name	ID	Notes
Jasmine P.	100C01	
Daniela T.	100C02	

Early Interventionist IDs

Early Interventionist Name	ID	Notes
Alex F.	EI01	
Kiesha N.	EI02	New to program June 2023

Early Interventionist IDs (with Program ID for state submission)

Early Interventionist Name	ID	Notes
Jenn D.	101EI01	Left program December 2022
Jadilsa G.	101EI02	Started coaching in Cohort 2

⁵⁹ <https://challengingbehavior.org/document/pyramid-model-data-assigning-unique-identification-codes/>

Child and Family Outcome Data

We strongly encourage programs to collect child and family outcome data that measure infants' and toddlers' social and emotional outcomes. This data can come from collecting information on the social-emotional domain in a curriculum, a social-emotional assessment, and a social-emotional curriculum, as well as tracking IFSP goals created and completed.

Family Engagement and Data Decision-Making

Leadership teams should consider how they can collect information on family-engagement efforts with the implementation of the Pyramid Model and family perspectives about:

- a. the support they receive
- b. the benefits of the Pyramid Model
- c. ways families would like to be supported
- d. cultural responsiveness of the program
- e. the quality of communication between the program and families, and
- f. family participation in program decision-making.

The leadership team should consider the various mechanisms available to gain family perspectives and input and remember that not all families will be comfortable with all approaches for collecting information. For example, some families might prefer completing an online survey, while others are comfortable with answering a few questions posed by their early interventionist during a home visit. Some families might feel comfortable sharing their perspectives with other families in a group setting. You might consider surveying family preferences to identify multiple pathways to engage families in sharing their feedback. The information you gain from families, whether quantitative (e.g., a response to a survey) or qualitative (e.g., shared in a focus group), is all data the leadership team can use to assess the program's progress in meeting their family engagement goals and outcomes.

Team Process of Data Decision-Making

Determining how data will be collected and who will enter data is a major task of the leadership team. However, this is only the first step needed for data decision-making. Each data tool should be summarized so the leadership team can use it to identify trends or patterns that might inform their decision. NCPMI has provided spreadsheets with a graphic summary of the major data elements.

Each month, the data coordinator should ensure the data are summarized and ready to be reviewed at the leadership team meeting. The leadership team facilitator should create space in the monthly agenda to examine the data summaries. While data for the Benchmarks of Quality and the EIPPF are used two times a year, data from coaching logs and child and family progress monitoring will be ongoing and can be examined at every meeting. In initial leadership meetings, data discussions can center on action planning from the Benchmarks of Quality and decisions for setting up data systems within the program, such as determining the frequency of data collection for each tool and assigning unique identification codes. Additionally, as goals and action plans are completed, the team should revisit the Benchmarks of Quality and other data tools to determine the next steps.

The visual summary of the data can be reviewed by the leadership team using a process of identifying patterns (e.g., change in trends across time, specific activities that are working or problematic), interpreting what might be learned from the patterns, and what other data might be needed for interpretation, and determining action steps. This process is best conducted by a team as multiple perspectives enhance the process. NCPMI has provided some worksheets that the team might use as a guide for their review of the various data tools. These worksheets use a three-step procedure for data analysis called Look-Think-Act.

1. Look- Examine data for trends and meaningful associations
2. Think- Ask questions related to the data that might help with interpretation
3. Act- Make decisions as a team and identify the action plan needed to put the decisions in place

Resources:

- [Look! Think! Act!](#)⁶⁰ Using data for program improvement learning module
- [Look-Think-Act Early Intervention \(Part C\) Benchmarks of Quality](#)⁶¹
- [Look-Think-Act Early Interventionist Pyramid Practices Fidelity Instrument](#)⁶² (EIPFFI)
- [Look-Think-Act Coaching Early Interventionists](#)⁶³

The Role of the Data Coordinator

The leadership team data coordinator will collect and summarize data to be used by the leadership team in their meetings. For programs reporting data to a state leadership team, the program data coordinator will ensure all data are complete and de-identified to share with the program implementation coach or state data coordinator, depending on the system the state team has created. Any member of the leadership team may fill this role. However, the role is best filled by someone interested and knowledgeable about data, proficient in using Excel workbooks, and with strong organizational skills.

Resources for the Data Coordinator

- [Pyramid Model Leadership Team: Data Coordination Responsibilities](#)⁶⁴ This resource outlines the data coordination responsibilities at programs implementing the Pyramid Model.
- [Pyramid Model Data Collection Frequently Asked Questions](#)⁶⁵ This resource answers some of the most frequently asked questions about the collection and summary of Pyramid Model data.
- [Evaluation of State and Program Implementation of the Pyramid Model](#)⁶⁶ Suggested Data Elements (pg. 5-6): This resource describes the data elements that might be included in different evaluation reports in state systems and programs implementing the Pyramid Model.

60 <https://dasycenter.org/look-think-act/>

61 <https://challengingbehavior.org/document/look-think-act-pyramid-model-early-intervention-part-c-benchmarks-of-quality/>

62 <https://challengingbehavior.org/document/look-think-act-early-interventionist-pyramid-practice-fidelity-instrument/>

63 <https://challengingbehavior.org/document/look-think-act-coaching-early-interventionists/>

64 <https://challengingbehavior.org/document/pyramid-model-program-leadership-team-data-coordination-responsibilities/>

65 <https://challengingbehavior.org/document/pyramid-model-data-collection-frequently-asked-questions/>

66 <https://challengingbehavior.org/document/evaluation-of-state-and-program-implementation-of-the-pyramid-model-suggested-data-elements/>

Program Summary of Early Intervention Practitioner Coaching:⁶⁷ This excel spreadsheet includes a data tutorial link for using this tool. This spreadsheet is to be used by the data coordinator to combine data from the early intervention practitioner coaches in the same program to summarize coaching data for the leadership team, and the state team if applicable.

Sharing Data with Others

Part of the process of program-wide implementation is creating data systems to collect data to inform decision-making. Additionally, the program should identify how they will communicate summaries of the data to staff and families. The leadership team should use their data summaries to provide program staff and families with a report about program-wide implementation and outcomes. The leadership team might wish to collect additional data that help them share their program's progress and the impact of their efforts, such as family satisfaction surveys, staff perspectives, or perspectives of other key stakeholders (e.g., board members, community members).

The leadership team will want to carefully consider how to share data and the data that will interest different audiences. For example, staff members will be interested in seeing growth in program-wide implementation, changes in child social and emotional outcomes, family perspectives, and growth in early interventionist use of Pyramid Model practices. Family and community members might be interested in child development progress from the program's curriculum measures and parent and staff perspectives about the value of the program-wide approach. Lastly, teams should remain vigilant to protect confidentiality and ensure no information might identify individual staff, children, or families.

The Evaluation of State and Program Implementation of the Pyramid Model: Suggested Data Elements document provides leadership teams with descriptions of data elements that might be included in different evaluation reports in a state system implementing the Pyramid Model.

Additional Resources

- [DaSy Data Visualization Toolkit](#)⁶⁸
- [Data Equity Walk Toolkit](#)⁶⁹

Considerations for Monitoring Implementation and Data Decision-Making

The leadership team provides time monthly for each team member to share their perspective and interpretation of the patterns identified in data summaries.

- The leadership team provides multiple pathways (e.g., interview with a translator present, focus group, survey) and preference for collecting additional data from staff and families that are responsive to the needs of multilingual individuals, education level, ethnicity, gender, etc.

⁶⁷ <https://challengingbehavior.org/document/program-summary-of-early-intervention-practitioner-coaching/>

⁶⁸ <https://dasycenter.org/datavis-toolkit/>

⁶⁹ <https://west.edtrust.org/data-equity-walk-toolkit/>

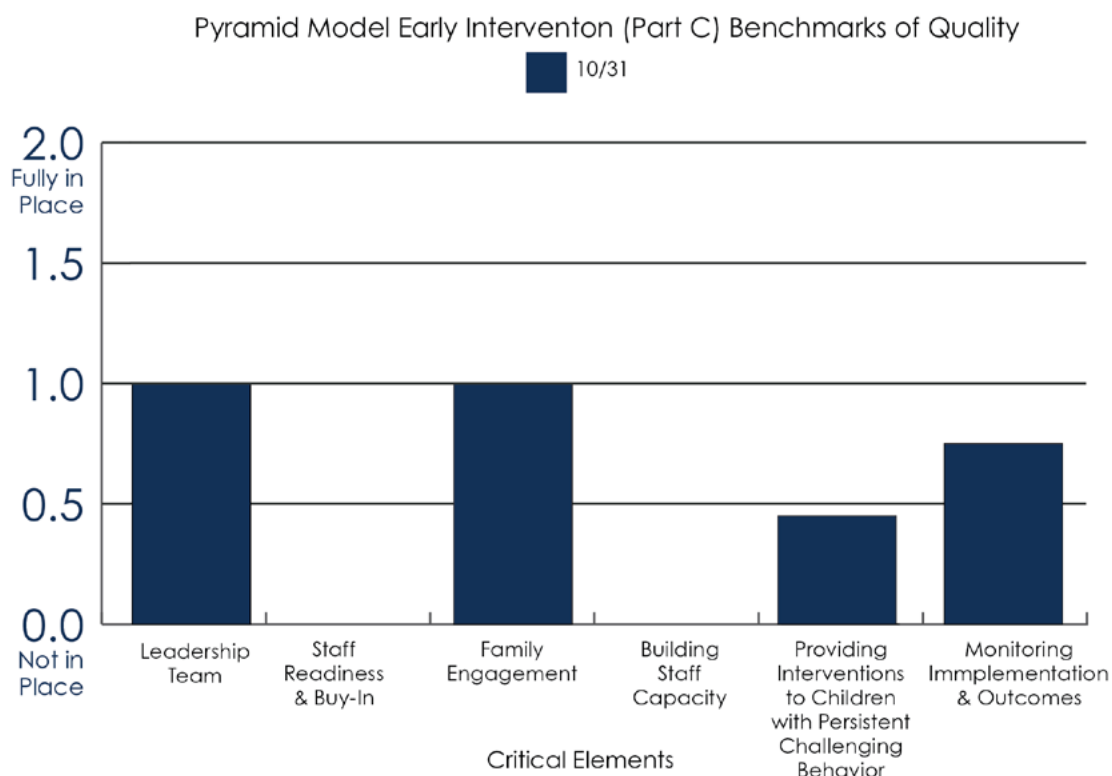
- The leadership team collects and presents data in formats understandable to a variety of staff and families (e.g., free of jargon, presented in multiple modes of communication).
- The leadership team solicits feedback from staff and families on the data collection and decision-making process.
 - Do staff and families feel they are represented in the data?
 - Do staff and families think the data collected and the decision-making process are responsive to the community's culture and needs?
- Data are used to support implementation instead of providing correction to staff or families (e.g., shaming staff for lack of implementation).
- Fidelity measures include considerations for the culture and learning needs of staff, as well as the community served.

Case Study

Jones County Early Intervention

October

The Jones County Early Intervention Program conducted its initial Pyramid Model Early Intervention (Part C) Benchmarks of Quality during the program-wide leadership team training they attended in October. They were excited to see how easy it was to use the spreadsheet and that their data were graphed automatically. The data on the Benchmarks aligned with their perceptions about their strengths (leadership team, family engagement, and monitoring implementation and outcomes) and identified the areas that needed to be addressed in their Leadership Implementation Plan.

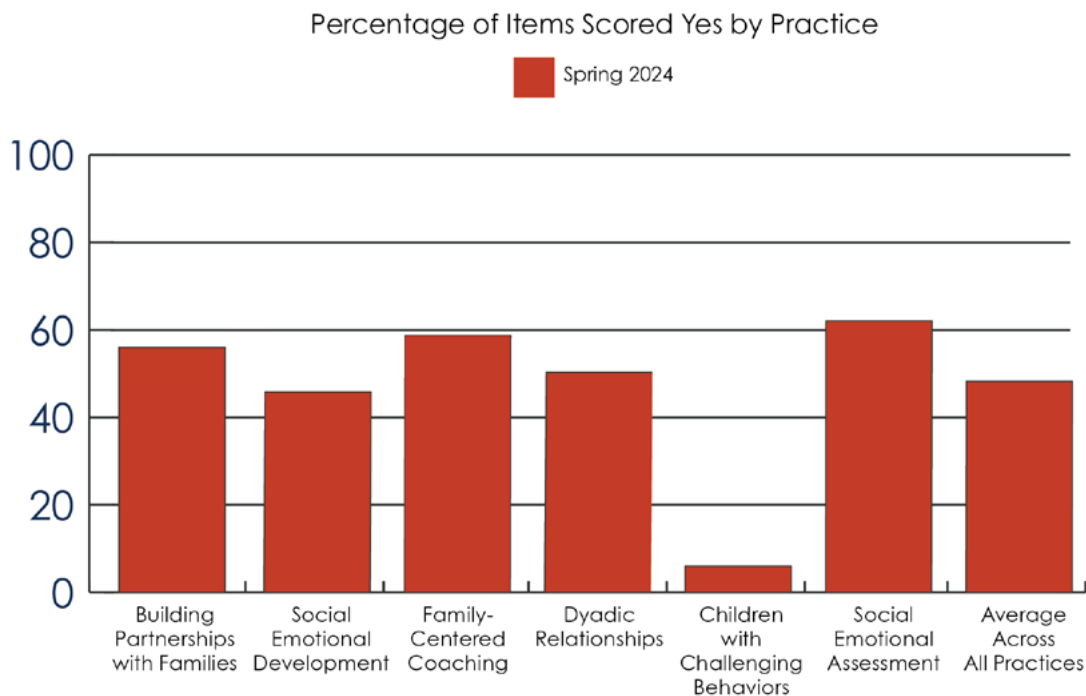


The leadership team had trained their staff the previous spring on a social-emotional assessment screening tool they used during the intake with families. The team was anxious to put the additional data systems in place to use more data sources for decision-making. They discussed identifying two practitioner coaches after their scheduled Early Intervention Pyramid Practices training so they could get them trained in Practice-Based Coaching and ready to conduct EIPPFIs with staff. Their goal was to have EIPPFIs data to review for their April leadership team meeting. Their program implementation coach, Amaya, will give the data coordinator and the practitioner coaches instructions on the Excel spreadsheet so the coaches know how to fill it out and the data coordinator knows what to look for to ensure data are complete. She also agreed to review the spreadsheet if the data coordinator or practitioner coaches had questions.

Case Study

April

In February, Amaya provided the Jones County Early Intervention Leadership Team, and the practitioner coaches practice using the EIPPFi with each other before using it with the 20 early interventionists in their program. Three leadership team members decided to receive training to support their practitioner coaches, Chris and Sara, with the initial EIPPFi data collection. They conducted 2-3 EIPPFis monthly to be ready to review the data during their April leadership team meeting. The graph below shows the average score on the EIPPFi across all 20 early interventionists across the program.



Practices	Spring % of Items Scored Yes
Building Partnerships with Families	56%
Social-Emotional Development	46%
Family-Centered Coaching	59%
Dyadic Relationships	50%
Children with Challenging Behaviors	6%
Social Emotional Assessment	62%
Average Across all Practices	48%

Case Study

The leadership team looked for trends and was pleased to see the high scores on the social-emotional assessment practices reflected the training they provided to staff using the new social-emotional assessment tool. Amaya showed the team how to use the spreadsheet's Item-by-item analysis tab to look for trends within each practice area. The team plans to use this information to provide further training on specific groups of practices during staff meetings. The team set a goal to administer the EIPFFI again in 6 months to evaluate the impact of coaching and extra support during staff meetings.

August

The team provided time for Chris and Sara to each coach one volunteer early intervention provider to collect data on coaching time and frequency before expanding their coaching efforts. Chris and Sara met with their coachees twice a month for three months starting in May and reviewed the Program Summary of EI Practitioner Coaching at their August leadership team meeting.

Program Summary	# of Coaching Cycles Attempted	# of Coaching Cycles Completed	% Completed Cycles	Total Duration Across Focused Observations	Average Duration Across Focused Observations
Across Coaches	12	11	92%	327	31.0

Total Debriefing Duration	Average Debriefing Duration	Total # of Goals	Total # Goals Completed	% Goals Completed
400	36.7	7	5	71%

In a review of the coaching log data, the leadership team saw their coaches met the bi-monthly frequency to complete coaching cycles and decided to add one more coachee to each coach's caseload to know if they could maintain a 2-coachee caseload in the upcoming months. They are interested in seeing if the average observation and debrief time will remain similar, and they will review it again at next month's leadership team meeting. They are excited to look for patterns in the coaches' strategies for the observation and debriefing meetings.