Colorado State Model Evaluation System for Specialized Service Professionals
2013-14 Pilot Report

COLORADO
Department of Education

Introduction

Senate Bill 10-191, passed in 2010, restructured the way all licensed personnel in schools are supported and evaluated in Colorado. The ultimate goal is ensuring college and career readiness for all students, which is greatly impacted by the effectiveness of the educators in schools. To support this effort, the Colorado Department of Education (CDE) developed several model systems as an option for districts to use in implementing the new evaluation requirements for educators.

The Colorado State Model Evaluation System was developed to provide consistent and relevant feedback to all educators throughout Colorado. Model systems of evaluation are currently in place for teachers, principals and educators known collectively as specialized service professionals (SSPs). Currently, there are nine categories of SSPs which use specific rubrics for their annual evaluations:

- Audiologists
- Occupational therapists
- Physical therapists
- School counselors
- School nurses
- School orientation and mobility specialists
- School psychologists
- School social workers
- Speech language pathologists

The Colorado State Model Evaluation System has been designed to align with all requirements set forth in Senate Bill 10-191. By providing a new statewide model of evaluation for all licensed educators, SSPs are able to receive consistent, timely and actionable feedback to improve their professional practice. This report provides insight on the implementation of the Colorado State Model Evaluation System and initial evaluation scores reported by SSPs and is intended to complement teacher and principal pilot reports developed by CDE. For more information on the teacher and principal pilot reports, please visit: www.cde.state.co.us/educatoreffectiveness/smes-pilot

This report provides several analyses related to the evaluation of SSPs in Colorado. The two major areas of analyses pertain to SSP perception of their former systems of evaluation compared to the Colorado State Model Evaluation System, and SSP professional practice ratings resulting from the use of the Colorado State Model Evaluation System. Professional practice ratings contribute to 50 percent of an SSP's overall evaluation rating. Measures of student outcomes comprise the remaining 50 percent, as established by SB 10-191.

This report provides an *initial* look at the use of the Colorado State Model Evaluation System by SSPs, and caution should be exercised when interpreting the results. Specifically, the SSP population is much smaller than that of teachers and principals. Generalizing results to the entire SSP population based on the results of this small sample of SSPs is not advisable, not only because of the very small sample, but also because this data reflects the very first year of implementation

Key Findings

Many of the SSPs had **positive perceptions** of the Colorado State Model Evaluation System and noted that the system was designed to be more tailored to their specific role compared to previous evaluation systems.

Ninety-nine percent of SSPs received overall professional practice ratings of proficient or higher on their overall professional practice rating, representing the three highest areas of the five-point scale (basic, partially proficient, proficient, accomplished and exemplary).

SSPs performed the best on **Standard 1** (Professional Expertise), while **Standard 4** (Reflect on Practice) received the most below proficient ratings.

Additionally, there is evidence that the standards are **reliable measurements** of SSP practice. The standards are **strongly correlated** with one another and the overall professional practice rating, suggesting that the SSP rubrics capture multiple related measures of effectiveness.

February 2015

for SSPs. Another area to carefully consider is the interpretation of aggregate SSP data (all nine categories of personnel combined into one). Each category of SSP is unique and has had markedly unique experiences with the Colorado State Model Evaluation System. Finally, the implementation of the Colorado State Model Evaluation System may have been conducted differently across districts and Boards of Cooperative Educational Services (BOCES). Thus, SSPs of the same category may have been evaluated differently.

Background on Specialized Service Professionals and SB 10-191

SSPs are educational professionals who ensure that diverse student populations have equitable access to academic instruction and participation in school-related activities. In the 2013-14 academic year, 5,295 SSPs were employed in Colorado. In accordance with the requirements set forth in SB 10-191, all educators should receive sufficient feedback, support and opportunities for professional growth, to ensure each child has access to great educators.

In their recommendations to implement Senate Bill 10-191, the State Council for Educator Effectiveness identified the nine categories of specialized service professionals, and with help from nine working groups of these professionals, outlined high quality standards and elements that guided the creation of the Colorado State Model Evaluation System. All nine groups of specialized service professionals work from a common set of standards and elements approved by the State Board of Education, but each category has unique professional practices outlining the specific role and duties of each professional group. Recommendations from the State Council for Educator Effectiveness on the evaluation of SSPs can be found in the following report: www.cde.state.co.us/educatoreffectiveness/sceesspreportmay2013

SSP Functions and Details

The following contextual descriptions provide background on the role and function of each SSP group. It should be noted that these descriptions are generalizations, and that specialized service professionals may have specific responsibilities which deviate from these descriptions based on the specific needs of the students in their district.

Audiologists
Audiologists provide direct services to students by administering diagnostic tests and providing diagnostic tests and recommendations for hearing improvement services. They may also serve in a consultative role to districts by advising on how to improve the classroom environment for students with special audiology needs. Audiologists are often hired by a district or multiple districts and are evaluated by someone such as a Director of Special Education or Director of Health Services. There are approximately 77 audiologists in the state and about 10 percent work in multiple districts and/or schools. This report contains professional practice ratings from 13 audiologists. A more in-depth report on audiologists can be found here: www.cde.state.co.us/educatoreffectiveness/ssppilotreportaudiologists.

Occupational Therapists
Occupational therapists are typically employed at the district level and evaluated by a Director of Special Education Programs or Director of Health Services. They work closely with classroom teachers and parents throughout their district(s) to implement and reinforce services for students. There were more than 420 occupational therapists employed in the Colorado educational system in 2013-2014. This report contains professional practice ratings from 57 occupational therapists. Additional details can be found in the occupational therapist report here: www.cde.state.co.us/educatoreffectiveness/ssppilotreportot.

Physical Therapists
Physical therapists typically provide direct services to students and ensure classrooms are appropriate environments in which students may learn. In this sense they are sometimes called in to schools to provide consultative services. They are often employed by the district and typically evaluated by the Director of Special Education or Director of Health Services, or a similar position. There are more than 110 physical therapists employed in Colorado. This report contains

14 physical therapist professional practice ratings. Additional information on physical therapists can be found in the following report: www.cde.state.co.us/educatoreffectiveness/ssppilotreportpt.

School Counselors
School counselors are often school-based professionals and grouped with teachers for contract and professional development purposes. There are often differences in the scope and role of school counselors depending on the grade level(s) they serve. Counselors work closely with other SSP groups, such as psychologists and social workers. This is the largest group of SSPs, consisting of more than 1,700 throughout the state. This report contains professional practice ratings from 119 school counselors. Additional details on school counselors can be found in the following report: www.cde.state.co.us/educatoreffectiveness/ssppilotreportcounselor.

School Nurses
School nurses typically fall into two categories. Some are employed at the school level and provide direct services to students, others are district staff members who manage all health services while health assistances in each school provide direct services to students. Nurses make up approximately 10 percent of the SSP population, with 528 employed throughout the state. This report contains 29 professional practice ratings from school nurses. The detailed school nurses report can be found here: www.cde.state.co.us/educatoreffectiveness/ssppilotreportnurse.

School Orientation and Mobility Specialists
School orientation and mobility specialists typically serve a dual role – being both a specialist for students with orientation and mobility needs as well as a teacher of the visually impaired. Evaluation of school orientation and mobility specialists must be conducted carefully, since their time may unequally split between the two roles depending on the needs of students in their districts. School orientation and mobility specialists are the smallest group of SSPs – fewer than 50 school orientation and mobility specialists held Colorado school licenses during the 2013-14 academic year. This report does not contain any analyses specific to school orientation and mobility specialists due to their small population and sample size – only four school orientation and mobility specialists provided professional practice ratings.

School Psychologists
School psychologists tend to be employed at the district level rather than by schools. As such they are typically evaluated by a district level director. In some instances, the school psychologist may guide the development of specific educational plans, but would have little to do with the actual implementation of these plans – which could be carried out by district or school level personnel, teachers, or even parents. Additionally, school psychologists may perform narrowly focused duties, such as test administration, but typically have training in a breadth of areas related to educational psychology. School psychologists are the third largest group of SSPs with more than 800 employed throughout the state. This report contains 84 professional practice ratings from school psychologists. A more in-depth report on school psychologists can be found here:
www.cde.state.co.us/educatoreffectiveness/ssppilotreportpsychologist.

School Social Workers
School social workers are typically employed by the district and collaborate with other specialized service professionals, such as psychologists and counselors, to manage caseloads of students who require additional services or attention as it pertains to their social emotional health. Their evaluation is typically conducted by a district level director who may oversee other licensed professionals such as those in special education and health services. As of the 2013-14 academic year, there were 475 social workers employed in school districts. This report contains 22 school social worker professional practice ratings. The school social worker report can be found here:
www.cde.state.co.us/educatoreffectiveness/ssppilotreportsw.

Speech Language Pathologists
The speech language pathologist is generally considered to be the closest SSP to a traditional classroom teacher. They typically provide direct services to students rather than supporting professional programs which are in turn designed to support students. Depending on the needs of the school or district, the speech language pathologist may be school or district based, and could report to different evaluators as needed. Speech language pathologists represent the second largest group of SSPs. There are more than 1,150 providing student services in Colorado. This report contains 122 professional practice ratings from speech language pathologists. A detailed report on speech language pathologists can be found here: www.cde.state.co.us/educatoreffectiveness/ssppilotreportslp.

SSP Quality Standards

The Colorado State Model Evaluation System consists of five Quality Standards that outline the skills required of an effective SSP. Each standard has several associated elements that further detail the themes of the standard. Within each element are several professional practices that specify the routine behaviors that educators must accomplish to meet the expectations of proficiency. All school districts and BOCES shall base their evaluations of licensed classroom teachers on the full set of Quality Standards and associated detailed elements included below, or shall adopt their own locally developed standards that meet or exceed the Teacher Quality Standards and elements. School districts and BOCES that adopt their own locally developed standards shall crosswalk those standards to the Teacher Quality Standards and elements, so that the school district or BOCES is able to report the data required. The standards and elements of the Colorado State Model Evaluation System for SSPs are listed below and have been taken from the Colorado State Model SSP User Guide: www.cde.state.co.us/educatoreffectiveness/usersguide

Quality Standard I: *Demonstrate mastery of and expertise in the domain for which they are responsible.*
    Element a: Demonstrate knowledge of current developmental science, the ways in which learning takes place, and the appropriate levels of intellectual, social, and emotional development of their students.
    Element b: Demonstrate knowledge of effective services and/or specially designed instruction that reduce barriers to and support learning in literacy, math, and other content areas.
    Element c: Integrate evidence-based practices and research findings into their services and/or specially designed instruction.
    Element d: Demonstrate knowledge of the interconnectedness of home, school, and community influences on student achievement.
    Element e: Demonstrate knowledge of and expertise in their professions.

Quality Standard II: *Support and/or establish safe, inclusive, and respectful learning environments for a diverse population of students.*
    Element a: Foster safe and accessible learning environments in which each student has a positive, nurturing relationship with caring adults and peers.
    Element b: Demonstrate respect for diversity within the home, school, and local and global communities.
    Element c: Engage students as unique individuals with diverse backgrounds, interests, strengths, and needs.
    Element d: Engage in proactive, clear, and constructive communication and work collaboratively with students, families, and other significant adults and/or professionals.
    Element e: Select, create and/or support accessible learning environments characterized by acceptable student behavior, efficient use of time, and appropriate behavioral strategies.

Quality Standard III: *Plan, deliver, and/or monitor services and/or specially designed instruction and/or create environments that facilitate learning for their students.*

Element a: Provide services and/or specially designed instruction aligned with state and federal laws, regulations and procedures, academic standards, their districts' organized plans of instruction and the individual needs of their students.

Element b: Utilize multiple sources of data, which include valid informal and/or formal assessments, to inform services and/or specially designed instruction.

Element c: Plan and consistently deliver services and/or specially designed instruction that integrate multiple sources of data to inform practices related to student needs, learning, and progress toward achieving academic standards and individualized student goals.

Element d: Support and integrate appropriate available technology in their services and/or specially designed instruction to maximize student outcomes.

Element e: Establish and communicate high expectations for their students that support the development of critical-thinking, self-advocacy, leadership and problem solving skills.

Element f: Communicate effectively with students.

Element g: Develop and/or implement services and/or specially designed instruction unique to their professions.

Quality Standard IV: *Reflect on their practice.*

Element a: Demonstrate that they analyze student learning, development, and growth and apply what they learn to improve their practice.

Element b: Link professional growth to their professional goals.

Element c: Respond to complex, dynamic environments.

Quality Standard V: *Demonstrate collaboration, advocacy and leadership.*

Element a: Collaborate with internal and external stakeholders to meet the needs of students.

Element b: Advocate for students, families and schools.

Element c: Demonstrate leadership in their educational setting(s).

Element d: Contribute knowledge and skills to educational practices and their profession.

Element e: Demonstrate high ethical standards.

Analyses Background

The research presented in this report uses two datasets to produce the overall findings. The first dataset consists of responses to baseline and feedback surveys issued to the pilot districts and BOCES that were in the process of transitioning to the Colorado State Model Evaluation System. The second dataset consists of 464 finalized professional practice ratings from the 2013-14 academic year.

Baseline and Feedback Surveys

Nineteen districts piloted the SSP Colorado State Model Evaluation System. Each SSP within these districts was sent an e-mail containing a link to complete the perception surveys. Many of the questions were likert style and asked to what degree the respondent agreed with statements pertaining to their previous and current evaluation systems. Other questions consisted of multiple choice and open ended responses.

The baseline survey data was collected between October 2013 and January 2014. The follow-up feedback survey data was collected between May 2014 and June 2014. All data was collected via online survey. The surveys asked the respondents questions pertaining to their perceptions of their former evaluation system and their initial impressions of the Colorado State Model Evaluation System. The survey was issued anonymously; perception data cannot be linked to district information, any type of demographic feature, or the SSP professional practice ratings.

Professional Practices

This dataset consists of finalized professional practices data from the 2013-14 academic year. This report contains an analysis of specialized service professionals as a whole as well as individual SSP types. Nineteen pilot sites provided professional practice data on 464 SSPs. Each SSP was evaluated according to their specific rubric and a professional practice rating was developed. The primary goal of these analyses was to draw out overall, standard, and element level professional practice ratings and to describe the reliability and correlations associated with each.

Percent of Positive Responses Given by SSPs in Baseline and Feedback Surveys

Overall, the percent of positive responses on each item is higher on the feedback survey than the baseline survey, suggesting that the Colorado State Model Evaluation System is perceived as an improved tool to guide professional growth and improve performance (note that responses of "agree" and "strongly agree" are deemed to be positive responses; in contrast to "neutral", "disagree", and "strongly disagree").

The area with the largest gain between the baseline and feedback surveys pertained to the evaluation system's use of student outcomes to inform the final rating. This is highlighted as many of the previous SSP evaluation systems did not formally consider student outcomes in the evaluation process. The Colorado State Model Evaluation System, however, uses specific measures of student outcomes as part of the overall evaluation of SSPs. The feedback survey item with the most positive responses was regarding the evaluation system's ability to identify areas of strength. Two other areas that had very high levels of positive responses pertain to the new system's ability to identify areas that need improvement as well as guide professional growth. The areas in which SSPs gave the least positive responses pertain to the confidence that development of the Colorado State Model Evaluation System was based on current scientifically sound research and the ability of the new system to provide an accurate assessment of the SSPs' performance. However, these areas still had more positive responses on the feedback survey than on the baseline survey.

While this report looks at all SSPs in aggregate, it is important to note the distinct differences associated with the specific groups of SSPs and what their unique perceptions are of their former and current evaluation systems. The specifics regarding these differences can be found in each individual SSP report www.cde.state.co.us/educatoreffectiveness/smes-pilot.

It should be noted that school nurses had the greatest number of declines in positive ratings, while school counselors, school social workers, and speech language pathologists did not have any declines in positive ratings from the baseline to feedback surveys. School social workers had the greatest positive change across all items on the surveys, and only one item had a smaller increase in positive responses compared to the overall SSP population (this particular item pertained to the identification of areas of strength).

Otherwise, the change in percent positive responses on each item from school psychologists, speech language pathologists, and school nurses tended to be less than the change in percent positive responses compared to the other groups of SSPs. This would suggest that these three groups, compared to the others, were less sensitive to the change from their former evaluation system to the Colorado State Model Evaluation System. The survey item with the greatest variance in the amount of change of positive responses pertained to the fairness of the evaluation system (standard deviation = 0.27), suggesting that this item had the largest range in perceptions across the nine different types of SSPs.

Figure 1. SSP perceptions of their former evaluation system and the Colorado State Model Evaluation System

Survey Question	Baseline Fall 2013 (N = 268) The former evaluation system…	Feedback Spring 2014 (N = 202) The State Model Evaluation System…	Change in Percent Positive Response
Identifies areas that need improvement.	55.5%	78.7%	+23.2%
Identifies areas of strength.	67.3%	79.6%	+12.3%
Designed to guide professional growth.	46.3%	77.7%	+31.4%
Sets high standards for the person being evaluated.	34.1%	69.7%	+35.6%
Serves as a basis for improving service delivery and planning.	27.3%	60.4%	+33.1%
Provides actionable feedback to the person being evaluated.	31.8%	57.4%	+25.6%
Documents changes in professional practice over time.	16.8%	55.9%	+39.1%
Supports the improvement of service delivery and program development.	27.0%	57.9%	+31.0%
Is based on current scientifically sound research.	10.9%	34.3%	+23.5%
Results in improved student outcomes.	20.4%	40.1%	+19.7%
Provides an accurate assessment of my performance.	31.8%	37.3%	+5.5%
Encompassed all aspects of quality service delivery.	21.7%	40.1%	+18.4%
Provided a fair assessment of professional practices.	30.6%	45.3%	+14.7%
Provided timely feedback to the person being evaluated.	36.3%	51.5%	+15.2%
Used student outcomes to inform my final rating.	11.9%	55.2%	+43.3%
Was useful to me in making decisions about service delivery.	25.0%	50.7%	+25.7%
Influenced my practice as a specialized service professional.	32.5%	63.7%	+31.2%
I understand what information was used in my evaluation.	58.6%	65.8%	+7.3%

Note. The heavy black line in the middle of the table is provided to distinguish items that appear in the 2012-13 Teacher System Pilot Report—Baseline and Feedback Survey Data. The items above this line can also be found on the teacher survey data report (for reference), while those below the line will not be found on that report, but are important to the SSP population. The 2012-13 Teacher System Pilot Report—Baseline and Feedback Survey Data can be found here: www.cde.state.co.us/educatoreffectiveness/teacherpilotsurveydata12-13
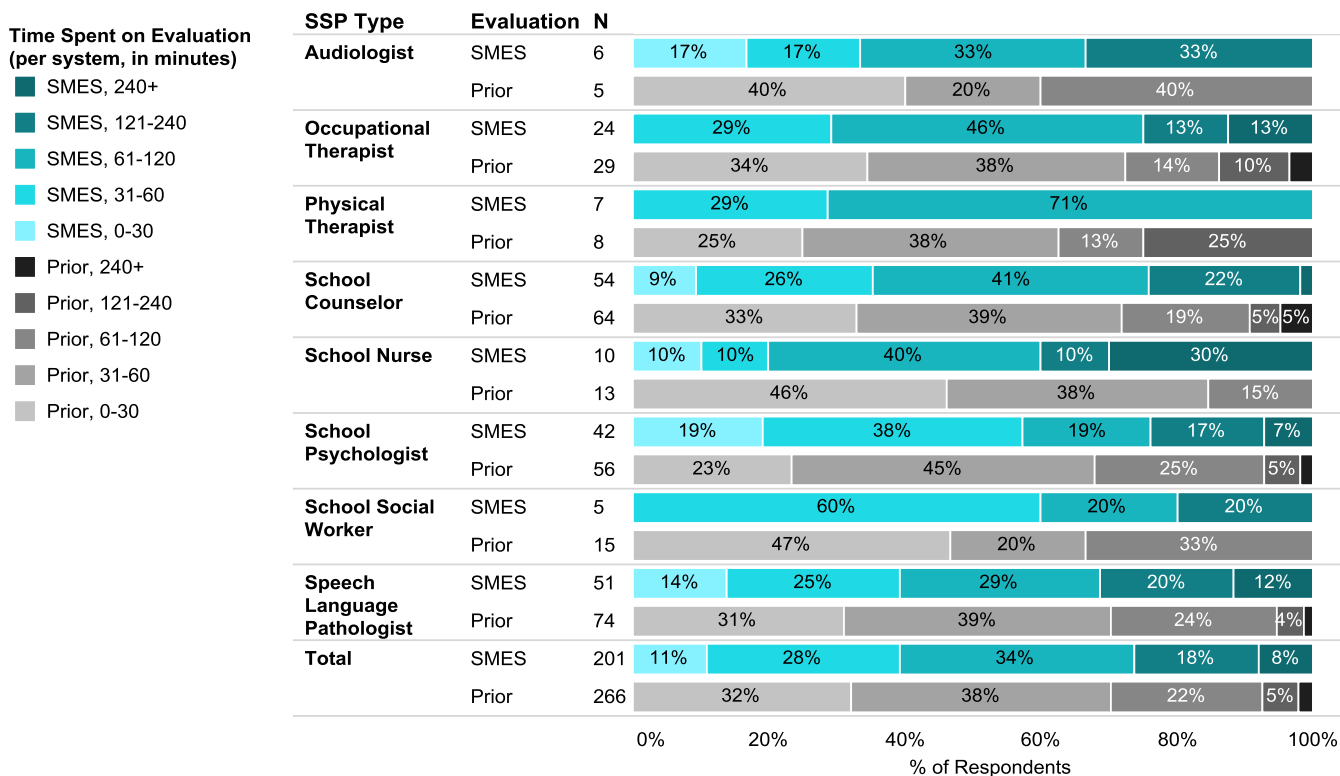
Implementation

This section considers various aspects of the former systems of evaluation and the Colorado State Model Evaluation System, comparing the time burdens, usefulness and effectiveness of both.

Estimated Time Burden of Evaluation

Each SSP was asked to estimate the amount of time it took to complete an SSP evaluation under their former evaluation system and under the new evaluation system. The graph below displays the amount of time each SSP type reported having spent on their former evaluation system and the Colorado State Model Evaluation System. Responses pertaining to the previous evaluation system are in shades of grey, while responses pertaining to the Colorado State Model Evaluation System are in shades of teal. Lighter shades represent less time being spent on the respective evaluation process, while darker shades represent more time being spent on the evaluation process. The sample sizes are also adjacent to the graph.

Overall, the Colorado State Model Evaluation System represents a perceived increase in time burden compared to the former systems used by the SSPs. Approximately one third of SSPs indicated spending more than one hour on the former evaluation system while more than 60 percent indicated spending more than one hour on the new evaluation system.

Figure 2. Time spent on evaluation processes

Time Spent on Evaluation (per system, in minutes)
- SMES, 240+
- SMES, 121-240
- SMES, 61-120
- SMES, 31-60
- SMES, 0-30
- Prior, 240+
- Prior, 121-240
- Prior, 61-120
- Prior, 31-60
- Prior, 0-30

SSP Type	Evaluation	N	Distribution
Audiologist	SMES	6	17% / 17% / 33% / 33%
	Prior	5	40% / 20% / 40%
Occupational Therapist	SMES	24	29% / 46% / 13% / 13%
	Prior	29	34% / 38% / 14% / 10%
Physical Therapist	SMES	7	29% / 71%
	Prior	8	25% / 38% / 13% / 25%
School Counselor	SMES	54	9% / 26% / 41% / 22%
	Prior	64	33% / 39% / 19% / 5% / 5%
School Nurse	SMES	10	10% / 10% / 40% / 10% / 30%
	Prior	13	46% / 38% / 15%
School Psychologist	SMES	42	19% / 38% / 19% / 17% / 7%
	Prior	56	23% / 45% / 25% / 5%
School Social Worker	SMES	5	60% / 20% / 20%
	Prior	15	47% / 20% / 33%
Speech Language Pathologist	SMES	51	14% / 25% / 29% / 20% / 12%
	Prior	74	31% / 39% / 24% / 4%
Total	SMES	201	11% / 28% / 34% / 18% / 8%
	Prior	266	32% / 38% / 22% / 5%

% of Respondents (0% to 100%)

Note. Adding the sample sizes for each SSP type will not add up to the total SSP sample size due to the exclusion of school orientation and mobility therapists.
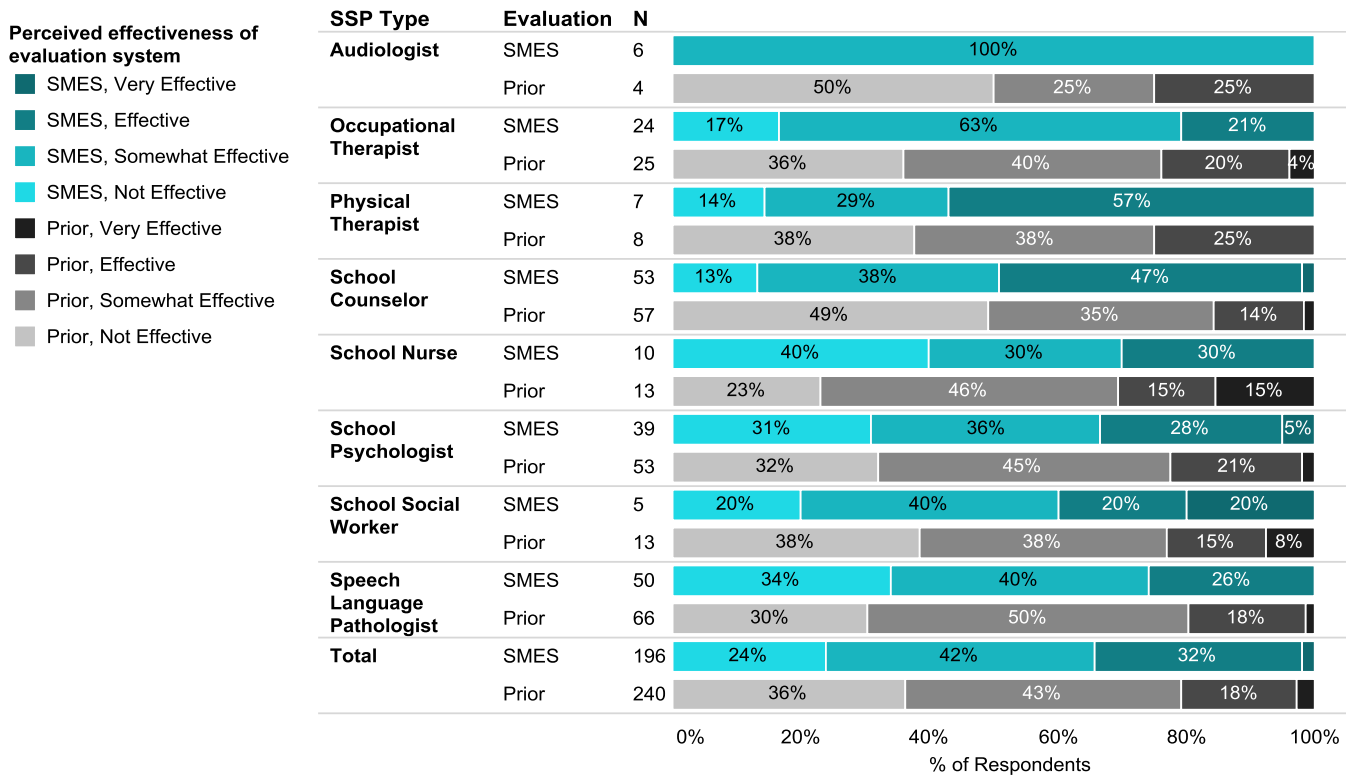
Effectiveness of Evaluation

The graph below displays the aggregated responses SSPs provided to questions pertaining to the effectiveness of the evaluation types in which they have participated. Again, note the small sample sizes with the subgroups of SSPs – particularly with the audiologists, physical therapists and school social workers. The baseline survey asked the

respondent how effective the former evaluation system was, while the feedback survey asked how effective the new Colorado State Model Evaluation System was.

Overall, approximately one third of respondents felt that the Colorado State Model Evaluation System was an effective or very effective evaluation system. However, audiologists, nurses and occupational therapists indicated that their former systems were more effective than the Colorado State Model Evaluation System.

Figure 3. SSP perceptions of effectiveness of evaluation systems

Perceived effectiveness of evaluation system

- SMES, Very Effective
- SMES, Effective
- SMES, Somewhat Effective
- SMES, Not Effective
- Prior, Very Effective
- Prior, Effective
- Prior, Somewhat Effective
- Prior, Not Effective

SSP Type	Evaluation	N	Chart
Audiologist	SMES	6	100%
	Prior	4	50% / 25% / 25%
Occupational Therapist	SMES	24	17% / 63% / 21%
	Prior	25	36% / 40% / 20% / 4%
Physical Therapist	SMES	7	14% / 29% / 57%
	Prior	8	38% / 38% / 25%
School Counselor	SMES	53	13% / 38% / 47%
	Prior	57	49% / 35% / 14%
School Nurse	SMES	10	40% / 30% / 30%
	Prior	13	23% / 46% / 15% / 15%
School Psychologist	SMES	39	31% / 36% / 28% / 5%
	Prior	53	32% / 45% / 21%
School Social Worker	SMES	5	20% / 40% / 20% / 20%
	Prior	13	38% / 38% / 15% / 8%
Speech Language Pathologist	SMES	50	34% / 40% / 26%
	Prior	66	30% / 50% / 18%
Total	SMES	196	24% / 42% / 32%
	Prior	240	36% / 43% / 18%

% of Respondents (0% – 100%)

Note. Adding the sample sizes for each SSP type will not add up to the total SSP sample size due to the exclusion of school orientation and mobility therapists.

SSP Evaluation Process

Specialized service professionals typically report having only one evaluator involved during their evaluation under the Colorado State Model Evaluation System (83 percent). Nearly half of the respondents indicated having had only one observation contribute to their evaluation. Following the evaluation, three-quarters of SSPs had either one or two feedback conversations – the majority having two such conversations.

Figure 4. Number of evaluators, obversations, and feedback conversations

SSP Experiences with the State Model Evaluation System (N=201)
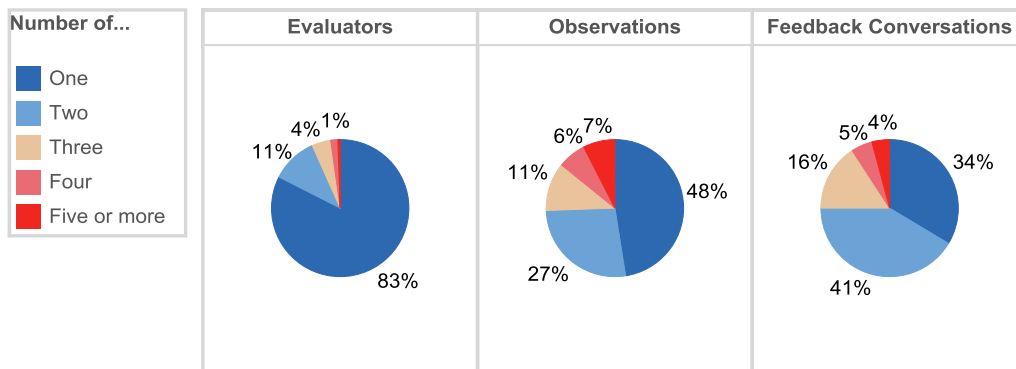
Overall SSP Professional Practice Distributions

Figure 5 displays the standard level and overall professional practice proficiency rating distributions across all SSP types. Based on the results, nearly all SSPs are proficient, accomplished or exemplary on the overall professional practice rating. Standard 1 (Professional Expertise) had the greatest number of proficient or higher SSPs, with only 1 percent of SSPs not receiving proficient or higher ratings. Standard 4 (Reflect on Practice) proved to be the most challenging for SSPs as 8 percent did not meet the standards for proficiency.

The following sections will also include descriptions of the correlations[1] and internal consistency[2] between and within the standards. A correlation is a measurement of how two variables, such as standards, change together. Internal consistency, on the other hand, is a measurement that describes how well multiple measures of related constructs score together. These two concepts, correlations and internal consistency, are important to this analysis since the Colorado State Model Evaluation System has been designed to measure related, but unique, aspects of educator effectiveness.

Standard 2 (Learning Environment) was most closely correlated with the overall professional practice rating, while Standard 5 (Leadership) was the least. Each standard was strongly correlated to the overall professional practice rating ($0.67 < \rho < 0.80$) as well as to one another ($0.51 < \rho < 0.65$). The five standards were internally consistent ($\alpha = 0.87$), and the elements within each standard also demonstrated acceptable internal consistency ($0.62 < \alpha < 0.84$).

---

[1] Correlations indicate the strength of the relationship between two measures; a value of 0 indicates no relationship and a value of 1 indicates a perfect positive relationship (a value of -1 indicates a perfect negative relationship). General guidelines for interpreting this value are: a correlation under 0.30 indicates a weak relationship, 0.30-0.49 indicates a moderate relationship, and a 0.50 and above indicates a strong relationship.

[2] Internal consistency is a measure of reliability. This report uses Cronbach's alpha (α) as a measurement of internal consistency for professional practice ratings. Typically, an item with an α score less than 0.50 is considered to have poor internal consistency, an item with an α between 0.50 and 0.69 is said to be acceptably reliable, and an item with an α of 0.70 and above has a high degree of internal consistency.

**Figure 5. Standard and overall ratings distributions**
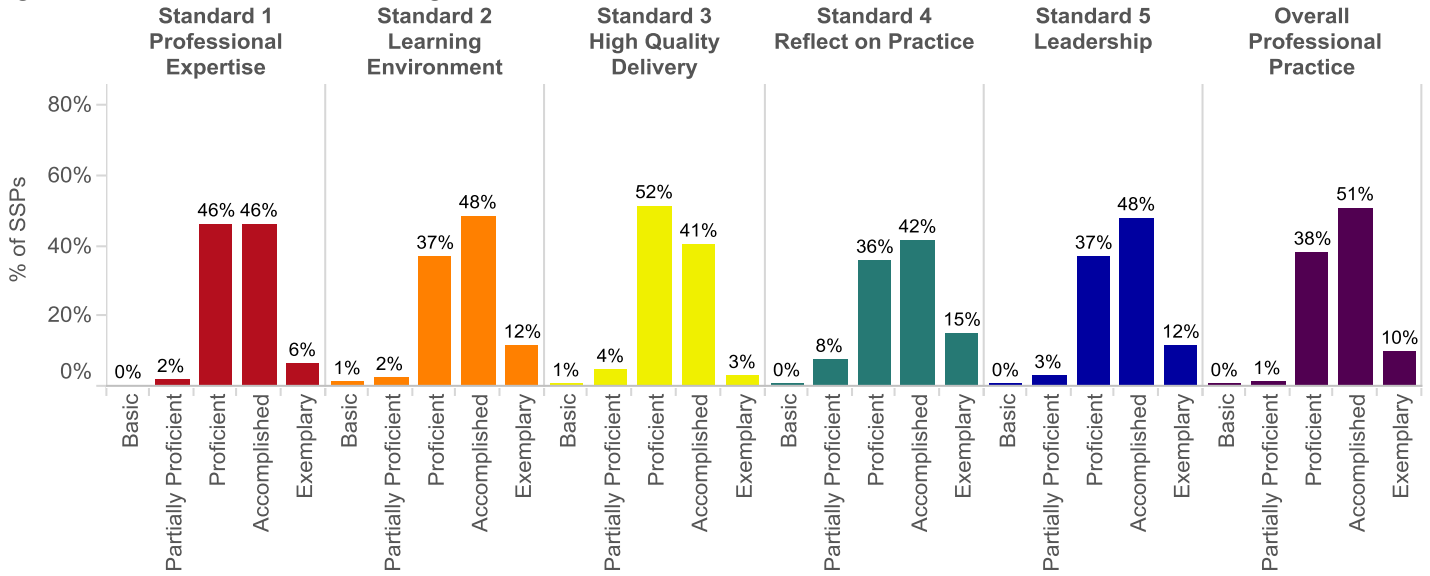
Note. Percentages may not add to 100 percent due to rounding.

Professional Practice Distributions by SSP Type

Audiologist

One hundred percent of audiologists in the pilot (N = 13) were evaluated as proficient or higher for the overall professional practice rating. Standard 1 (Professional Expertise) and Standard 4 (Reflect on Practice) both had all audiologists evaluated as proficient or higher. On Standard 3 (High Quality delivery), however, 15 percent of audiologists did not achieve proficiency. The internal consistency of the standard level ratings was high (Cronbach's α = 0.92), while the ratings within each standard are considered to have an acceptable to high degree of internal consistency (0.63 < α < 0.88). All standards are strongly correlated with one another (0.53 < ρ < 0.81) as well as with the overall proficiency rating (0.67 < ρ < 0.90).

Figure 6. Standard and overall ratings distributions of audiologists
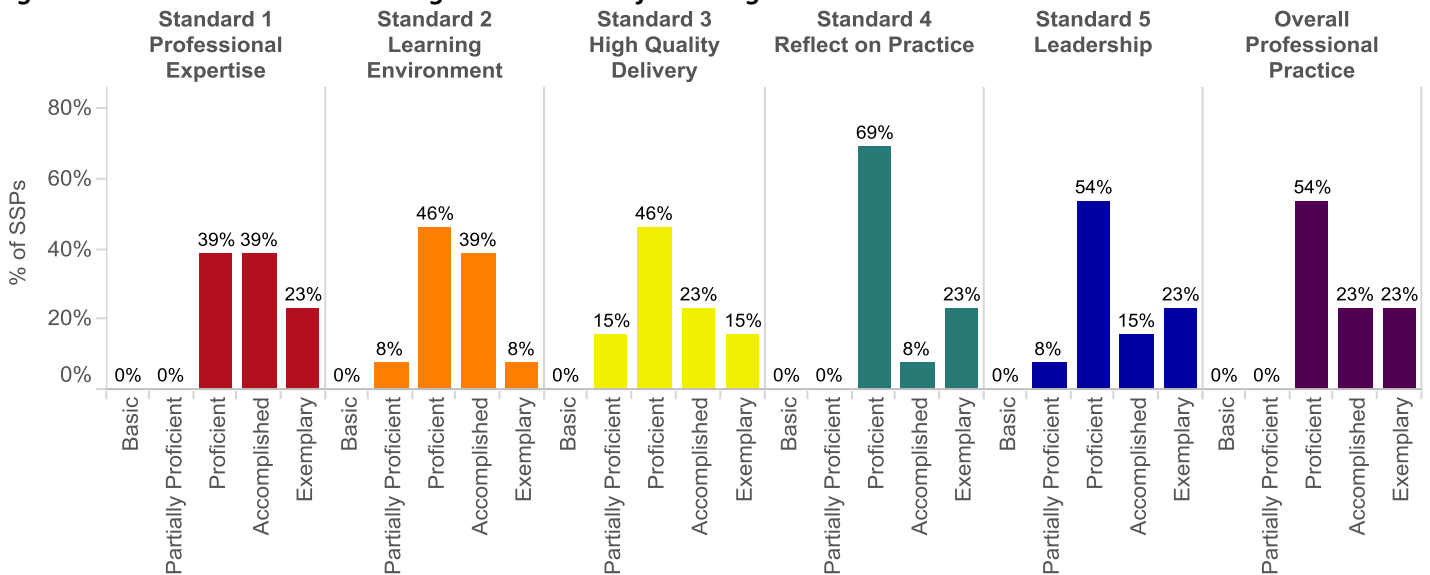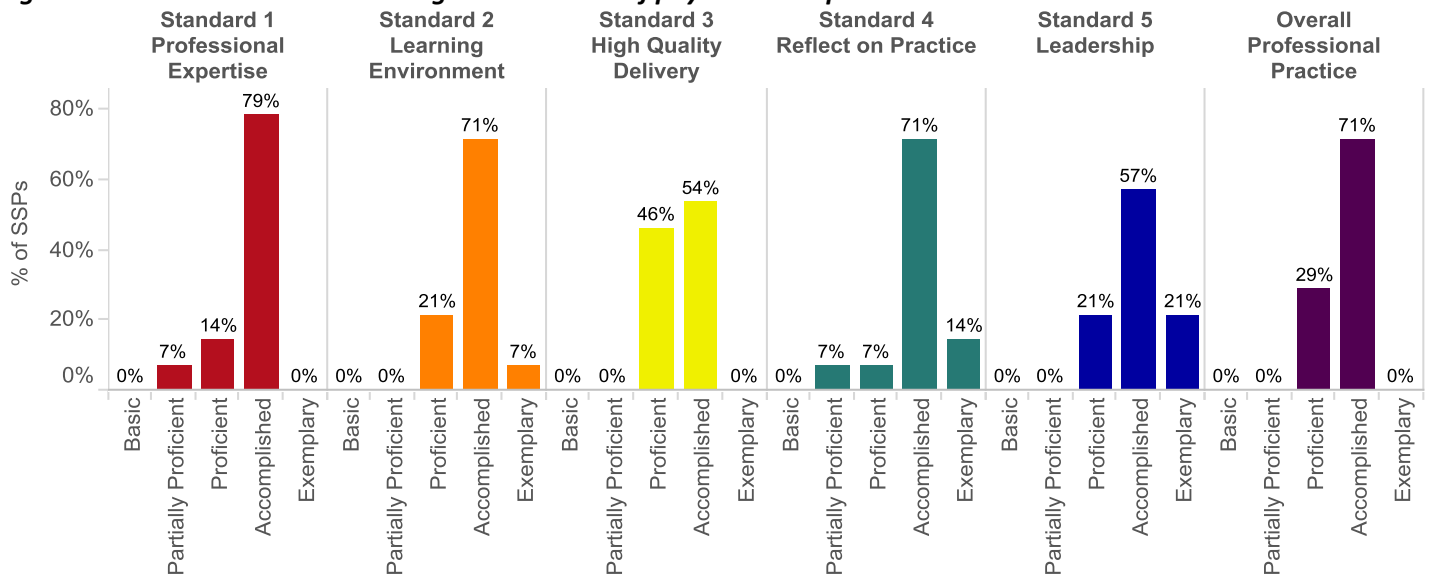

Note. Percentages may not add to 100 percent due to rounding.

Occupational Therapist

All occupational therapists in the pilot (N = 57) were proficient or above in the provided dataset for the overall professional practice rating. Standards 1-3 (Professional Expertise, Learning Environment and High Quality Delivery) also had no occupational therapist falling below the proficiency threshold, while Standard 4 (Reflect on Practice) had 4 percent below proficient. Occupational therapists' overall professional practice ratings demonstrated a high degree of internal consistency (Cronbach's α = 0.80) and each standard had an acceptable to high degree of internal consistency (0.63 < α < 0.78). Overall, each standard was moderately to strongly correlated with the overall professional practice rating (0.45 < ρ < 0.76), while the standard ratings displayed a range between weak and strong correlations with one another (0.28 < ρ < 0.59).

Figure 7. Standard and overall ratings distributions of occupational therapists

Note. Percentages may not add to 100 percent due to rounding.

February 2015
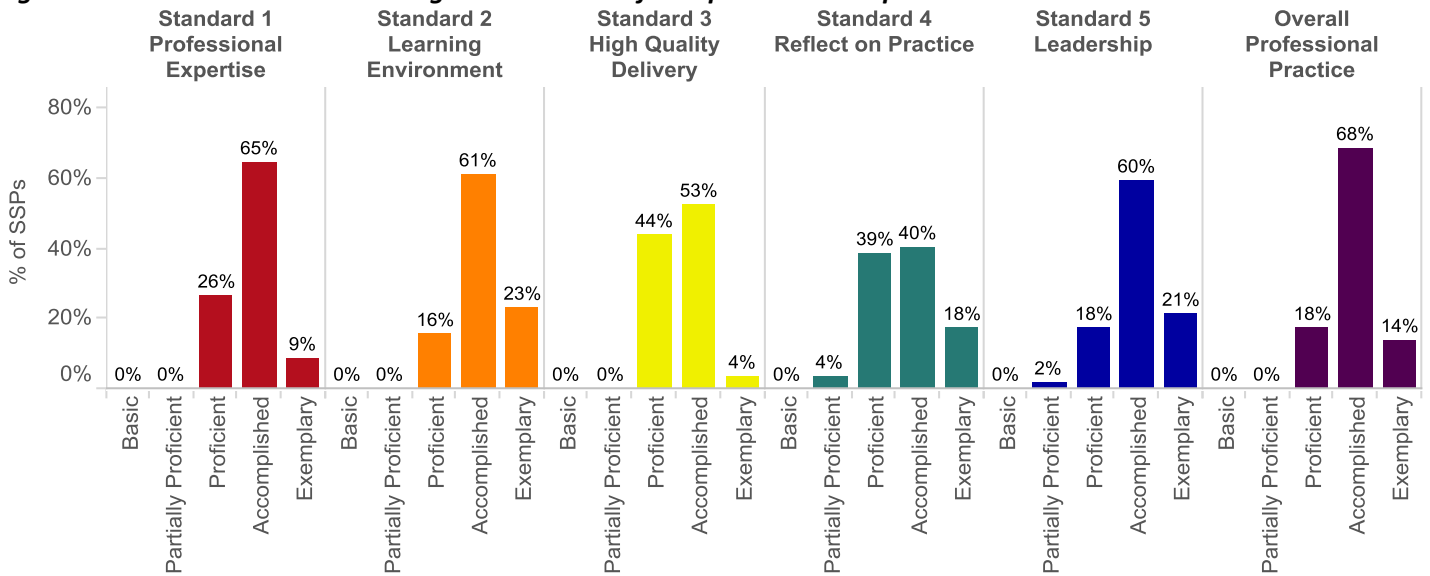
Physical Therapist

All physical therapists in the pilot (N = 14) were proficient or above in the current analysis of the final professional practice scores. This is also the case on three of the five standards. However, Standard 1 (Professional Expertise) and Standard 4 (Reflect on Practice) each had 7 percent of physical therapists fall below the required levels to establish proficiency. The ratings suggest a high degree of internal consistency with the overall standard (Cronbach's α = 0.81) and an acceptable to high degree of internal consistency within each standard (0.69 < α < 0.85). The standard ratings displayed a range between weak and strong correlations between standards (0.10 < ρ < 0.61) and with the overall professional practice rating (0.47 < ρ < 0.77).

Figure 8. Standard and overall ratings distributions of physical therapists

Note. Percentages may not add to 100 percent due to rounding.

School Counselor

More than ninety-seven percent of counselors in the pilot (N = 119) were determined to be proficient or above for the overall professional practice rating. Standard 5 (Leadership) received the fewest counselors at basic or partially proficient with only 2 percent falling below the threshold of proficiency. On Standard 4 (Reflect on Practice), nearly 20 percent were below proficient. The standards displayed acceptable internal consistency (Cronbach's α = 0.88), while the elements within each standard demonstrated an acceptable to high degree of internal consistency (0.58 < α < 0.76). The standards were moderately to strongly correlated to one another (0.49 < ρ < 0.64), and there was a strong correlation between each of the standards and the overall professional practice rating (0.68 < ρ < 0.82).

*Figure 9. Standard and overall ratings distributions of school counselors*
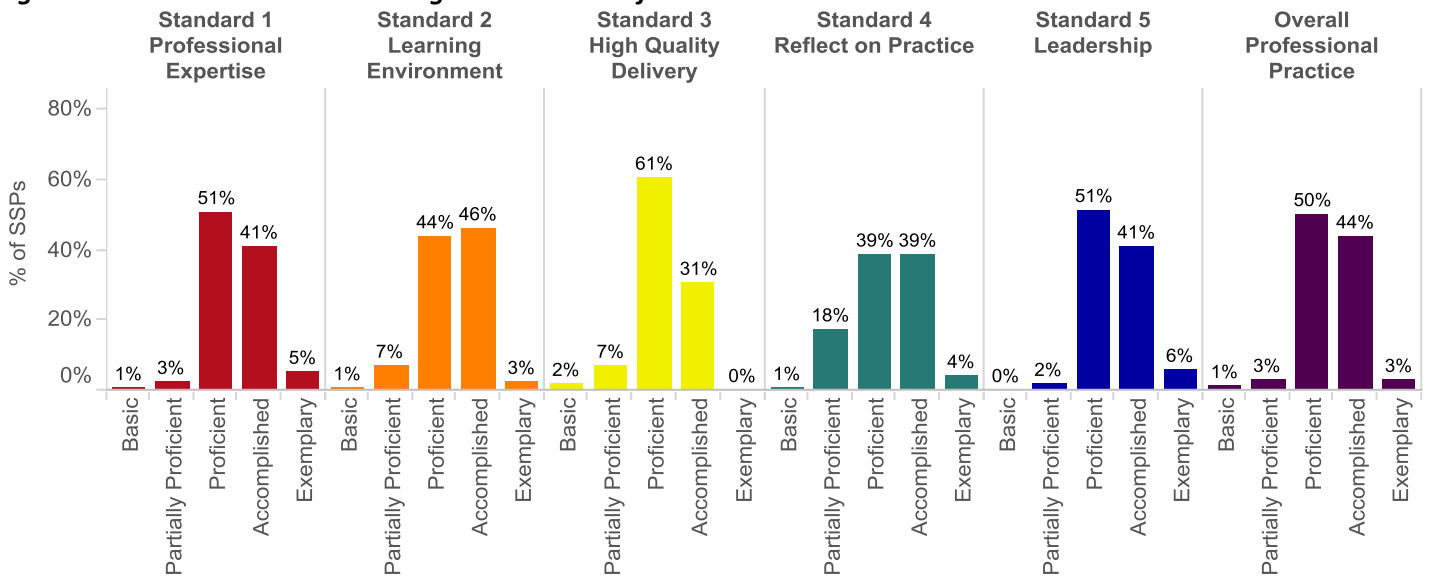
Note. Percentages may not add to 100 percent due to rounding.

School Nurse

Overall, more than 93 percent of school nurses in the pilot (N = 29) were proficient or above for the overall professional practice rating. Each of the five standards had only 6 to 7 percent of nurses below proficiency. Overall, the standard ratings displayed a high degree of internal consistency (Cronbach's α = 0.96) and each standard's reliability ranged between an acceptable to high degree (0.66 < α < 0.95). Additionally, the standard rating correlation was strong between standards (0.75 < ρ < 0.99) and with the overall professional practice ratings (0.81 < ρ < 0.99).

*Figure 10. Standard and overall ratings distributions of school nurses*
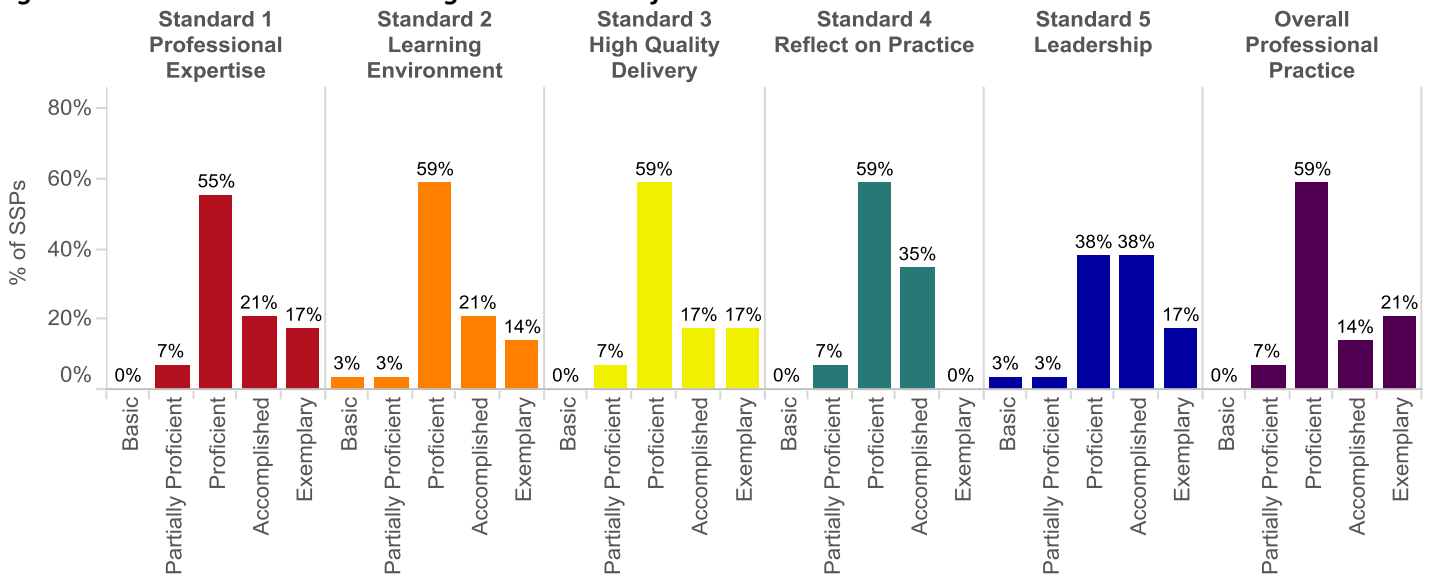
Note. Percentages may not add to 100 percent due to rounding.

School Psychologist

All school psychologists in the pilot (N = 84) received proficient or higher scores on their overall professional practice measures. Standard 4 (Reflect on Practice) saw 11 percent of psychologists not achieve proficiency, while standard 3 (High Quality Delivery) had 2 percent below proficiency and Standard 5 (Leadership) had 1 percent below proficiency. There were no school psychologists below proficiency on Standard 1 (Professional Expertise) and Standard 2 (Learning Environment). The results suggest a strong degree of internal consistency at the standard level (Cronbach's α = 0.82) and within-standards (0.70 < α < 0.83) and ratings were also moderately to strongly correlated to one another (0.34 < ρ < 0.80) and were strongly correlated to the overall professional practice rating (0.58 < ρ < 0.80).

Figure 11. Standard and overall ratings distributions of school psychologists
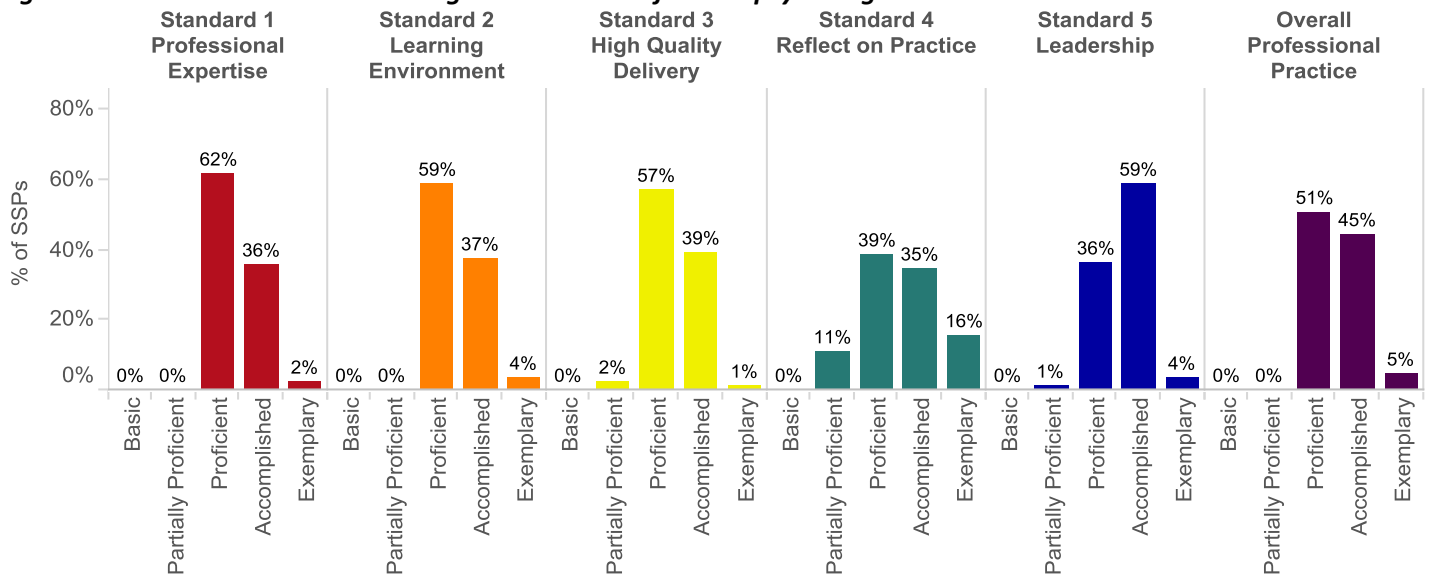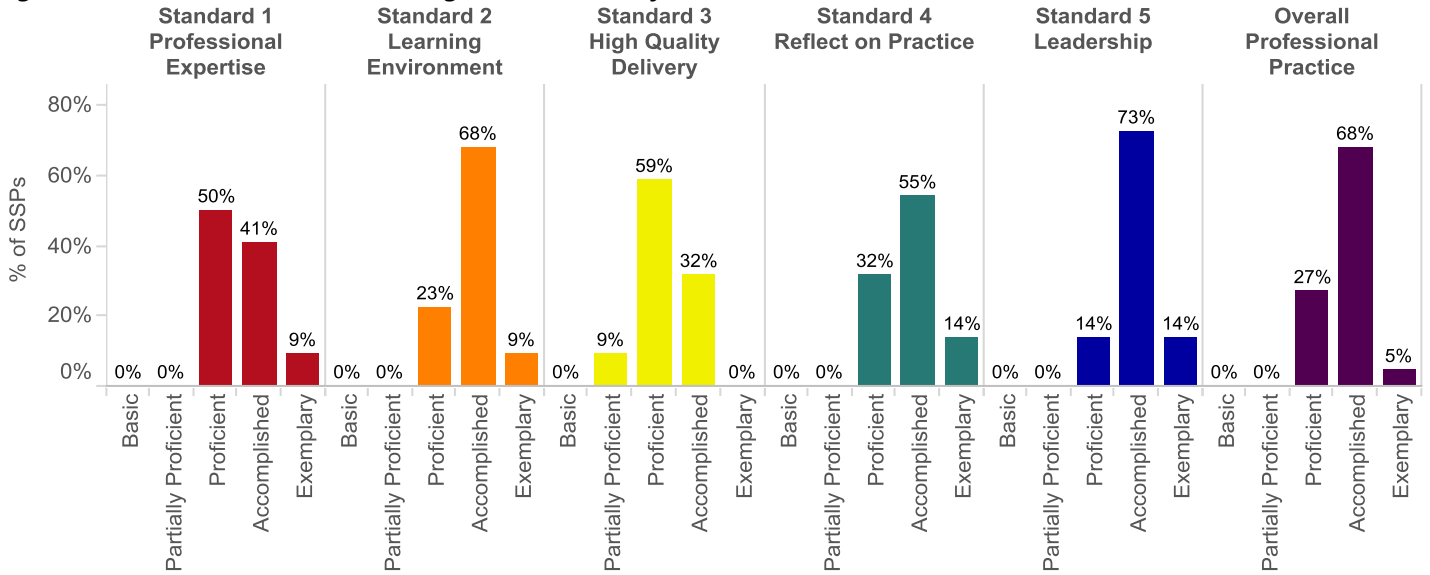

Note. Percentages may not add to 100 percent due to rounding.

School Social Worker

All social workers in the pilot (N = 22) were proficient or above on the overall measure as well as on each standard, with the exception of Standard 3 (High Quality Delivery), in which 9 percent were below proficiency. The standards demonstrated acceptable internal consistency (Cronbach's α = 0.81), while the within standard rating internal consistency ranged between a poor and high degree (0.49 < α < 0.90). The standards demonstrated a weak to strong correlation with one another (0.25 < ρ < 0.78) and a moderate to strong correlation between with the overall rating (0.50 < ρ < 0.70).

*Figure 12. Standard and overall ratings distributions of school social workers*

Note. Percentages may not add to 100 percent due to rounding.

Speech Language Pathologist

Overall, 98% of speech language pathologists in the pilot (N = 122) were deemed proficient or higher for the overall professional practice rating. Standard 5 (Leadership) had the highest level of non-proficiency, while only 1 percent were less than proficient on Standard 4 (Reflect on Practice). Overall, the standards demonstrated a high degree of internal consistency (Cronbach's α = 0.87) and the within-standard internal consistency ranged between an acceptable to high degree (0.60 < α < 0.90). Additionally, each of the standards had a moderate to strong correlation with one another (0.46 < ρ < 0.66) and were each strongly correlated to the overall professional practice rating (0.63 < ρ < 0.72).

Figure 13. Standard and overall ratings distributions of speech language pathologists

Note. Percentages may not add to 100 percent due to rounding.

February 2015
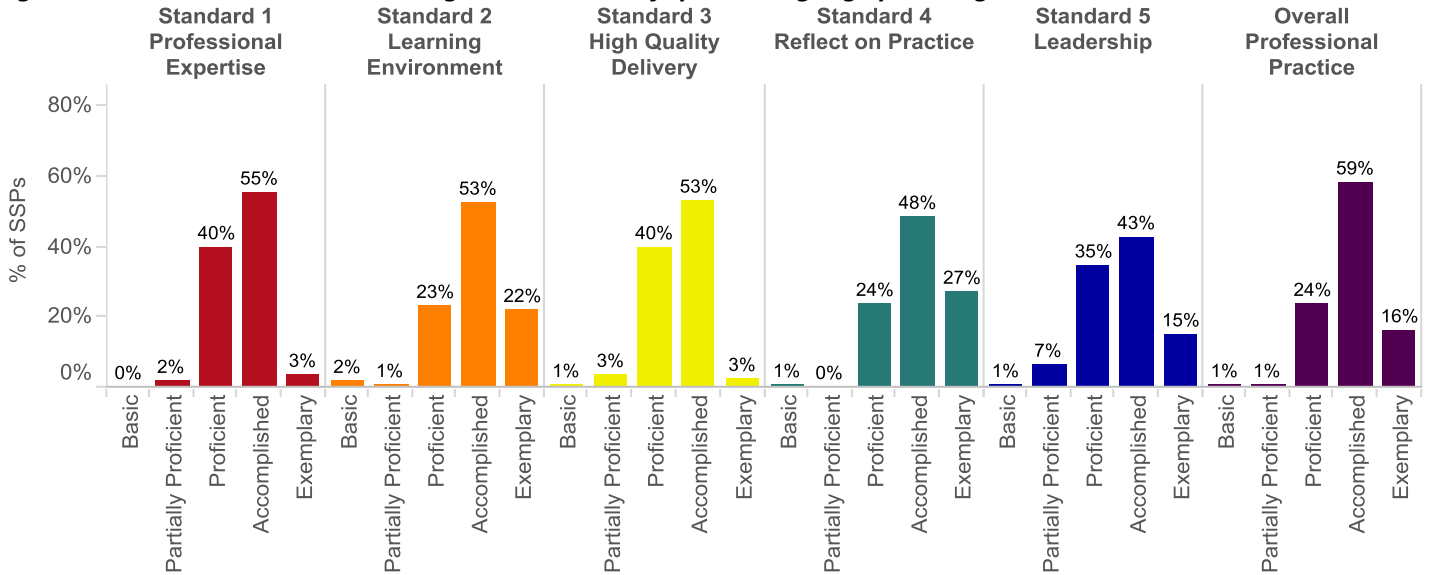
Conclusion

In developing and implementing the Colorado State Model Evaluation System, it has been noted that specialized service professionals are unique educational professionals that have diverse evaluation needs and outcomes. The implementation of the Colorado State Model Evaluation System has largely been positively received by the SSPs. The area most SSPs noticed a change in over their prior evaluation system pertained to the use of student data to inform their final proficiency rating and they find many improvements with the Colorado State Model Evaluation Systems over their previous system. Overall, nearly all specialized service professionals in the pilot were rated proficient or higher on their final professional practice rating. Each of the five standards, however, had variation in the level of proficiency, both when looking at SSPs as a whole and each category of specialized service professional.

This report suggests that there is a range of reliability associated with the standards and with overall professional practice ratings. With the exception of one standard level reliability coefficient for one group of SSPs (this being "Standard 4: Reflect on Practice" for school social workers), all other overall and standard level reliability indicators displayed an acceptable to high degree of reliability for SSPs in the pilot. Ratings also correlated with one another across and within each standard to varying degrees. Further research into these areas could yield additional insight on the use of the Colorado State Model Evaluation System by SSPs. The small sample sizes associated with this population of educational professionals implies that generalizable conclusions, including reliability, should not be drawn from this report. The preliminary results from this population of educators do suggest that the Colorado State Model Evaluation System can be validated as an effective measurement tool for improving professional practices. As the Colorado State Model Evaluation System continues to be rolled out and additional data is collected, additional analyses may be performed to better understand the use of the system among SSPs.