Introduction to The QIAT Self-Evaluation Matrices

By Joy Smiley Zabala and Diana F. Carl (excerpted from work in press)

The QIAT Self-Evaluation Matrices (QILT, 2001) were developed in response to formative evaluation data indicating a need for a model that could assist in the application of the Quality Indicators for Assistive Technology Services in Schools (Zabala, et. al, 2000). The QIAT Matrices are based on the idea that change does not happen immediately, but rather, moves toward the ideal in a series of steps that take place over time. The QIAT Matrices use the Innovation Configuration Matrix (ICM) developed by Hall and Hord (1985) as a structural model. The ICM provides descriptive steps ranging from the unacceptable to the ideal, that can be used as benchmarks to determine the current status of practice related to a specific goal or objective and guide continuous improvement toward the ideal. It enables users to determine areas of strength that can be built upon as well as areas of challenge in need of improvement.

When the QIAT Matrices are used to guide a collaborative self-assessment conducted by a diverse group of stakeholders within an agency, the information gained can be used to plan for changes that lead to improvement throughout the organization in manageable and attainable steps. The QIAT Matrices can also be used to evaluate the level to which expected or planned-for changes have taken place by periodically analyzing changes in service delivery over time.

When completed by an individual or team, the results of the self-assessment can be used to measure areas of strength and plan for needed professional development, training, or support needed by the individual or team. When the QIAT Matrices are used by an individual or team, however, it is important to realize that the results can only reasonably reflect perceptions of the services in which that individual or team is involved and may not reflect the typical services within the organization. Since a primary goal of QIAT is to increase the quality and consistency of assistive technology services to <u>all</u> students throughout the organization, the perception that an individual or small group is working at the level of best practices may still indicate a need to increase the quality and consistency of services throughout the organization.

The descriptive steps included in the QIAT Matrices are meant to provide illustrative examples and may not be specifically appropriate, as written, for all environments. People using the QIAT Matrices may wish to revise the descriptive steps to align them more to closely for specific environments. However, when doing this, care must be taken that the revised steps do not compromise the intent of the quality indictor to which they apply.

References

Hall, G. E. and Hord, S. M. (1987) *Change in Schools: Facilitating the Process.* Ithaca: State University of New York Press

QIAT Consortium. (2002). The QIAT Self-Evaluation Matrices. Retrieved from http://www.qiat.org.

Zabala, J. S., Bowser, G., Blunt, M., Carl, D. F., Davis, S., Deterding, C., Foss, T., Korsten, J., Hamman, T., Hartsell, K., Marfilius, S. W., McCloskey-Dale, S., Nettleton, S. D., & Reed, P. (2000). Quality indicators for assistive technology services. *Journal of Special Education Technology, 15* (4), 25-36.

Zabala, J. S. and Carl, D. F. (2003) *Quality Indicators for Assistive Technology Services in Schools.* In press.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Administrative Support

Quality Indicator	Variations				
	UNACCEPTABLE				**PROMISING PRACTICE**
1. The education agency has <u>written procedural guidelines</u> that ensure equitable access to assistive technology devices and services for students with disabilities, if required by FAPE.	(1) No written procedural guidelines are in place.	(2) Written procedural guidelines for few components of AT service delivery are in place. (i.e. assessment or consideration)	(3) Written procedural guidelines that address several components of AT service delivery are in place.	(4) Written procedural guidelines that address most components of AT service delivery are in place.	(5) Comprehensive written procedural guidelines that address all components of AT service delivery are in place.
2. The education agency has clearly defined and <u>broadly disseminated policies and procedures</u> for providing effective assistive technology devices and services.	(1) No policies or procedures disseminated and no plan to disseminate.	(2) A plan for dissemination exists, but has not been implemented.	(3) Procedures are disseminated to a few staff who work directly with AT.	(4) Procedures are disseminated to most agency personnel and generally used.	(5) Procedures are disseminated to all agency personnel and consistently used.
3. The education agency has <u>written descriptions of job requirements,</u> which include knowledge, skills, and responsibilities for staff members who provide assistive technology services.	(1) No job requirements relating to AT are written.	(2) Job requirements related to AT are written only for a few specific personnel who provide AT services.	(3) Job requirements related to AT are written for most personnel who provide AT services but are not clearly aligned to job responsibilities.	(4) Job requirements related to AT are written for most personnel who provide AT services and are generally aligned to job responsibilities.	(5) Job requirements related to AT are written for all personnel who provide AT services and are clearly aligned to job responsibilities.
4. The education agency employs a <u>range of personnel with competencies</u> needed to provide quality assistive technology services within their areas of primary responsibility.	(1) AT competencies are not considered in hiring, assigning or evaluating personnel.	(2) AT competencies are recognized as an added value in an employee, but are not sought.	(3) AT competencies are recognized and sought for specific personnel.	1. AT competencies are generally valued and used in hiring, assigning and evaluating personnel.	(5) AT competencies are consistently valued and used in hiring, assigning and evaluating personnel.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Administrative Support

Quality Indicator	Variations				
	UNACCEPTABLE				**PROMISING PRACTICE**
5. The education agency includes <u>assistive technology in the technology planning and budgeting</u> process.	(1) There is no planning and budgeting process for AT.	(2) AT planning and budgeting is a special education function that is not included in the agency-wide technology planning and budgeting process.	(3) AT is sometimes included in the agency-wide technology planning and budgeting process, but is inadequate to meet AT needs throughout the agency.	(4) AT is generally included in agency-wide technology planning and budgeting process in a way that meets most AT needs throughout the agency.	(5) AT is included in the agency-wide technology planning and budgeting process in way that meets AT needs throughout the agency.
6. The education agency provides <u>continuous learning opportunities about assistive technology</u> devices, strategies, and resources for staff, family students.	(1) No learning opportunities related to AT are provided.	(2) Learning opportunities related to AT are provided on a crisis-basis only. Learning opportunities may not be available to all who need them.	(3) Learning opportunities related to AT are provided to some individuals on a pre-defined schedule.	(4) Learning opportunities related to AT are provided on a pre-defined schedule to most individuals with some follow-up opportunities.	(5) Learning opportunities related to AT are provided on an on-going basis to address the changing needs of students with disabilities, their families and the staff who serve them.
7. The education agency uses a <u>systematic procedure to evaluate</u> the components of assistive technology services to ensure accountability for student progress.	(1) AT services are not evaluated.	(2) Varying procedures are used to evaluate some AT services. Procedures may or may not be based on student progress.	(3) A systematic procedure, sometimes linked to student progress, is inconsistently used to evaluate AT services.	(4) A systematic procedure, linked to student progress, is generally used to evaluate AT services.	(5) A systematic procedure, linked to student progress, is consistently used throughout the agency.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Consideration

Quality Indicator	Variations				
	UNACCEPTABLE				**PROMISING PRACTICE**
1. Assistive technology devices and services are <u>considered for all students with disabilities</u> regardless of type or severity of disability.	(1) AT is not considered for students with disabilities.	(2) AT is considered only for students with severe disabilities or students in specific disability categories.	(3) AT is considered for all students with disabilities but the consideration is inconsistently based on the unique educational needs of the student.	(4) AT is considered for all students with disabilities and the consideration is generally based on the unique educational needs of the student.	(5) AT is considered for all students with disabilities and the consideration is consistently based on the unique educational needs of the student.
2. IEP team has the <u>knowledge and skills</u> to make informed assistive technology decisions.	(1) The team does not have the knowledge or skills needed to make informed AT decisions. The team does not seek help when needed.	(2) Individual team members have some of the knowledge and skills needed to make informed AT decisions. The team does not seek help when needed.	(3) Team members sometimes combine knowledge and skills to make informed AT decisions. The team does not always seek help when needed.	(4) Team members generally combine their knowledge and skills to make informed AT decisions. The team seeks help when needed.	(5) The team consistently uses collective knowledge and skills to make informed AT decisions. The team seeks help when needed.
3. IEP team uses a collaborative <u>decision-making process</u> based on data about the student, environments, and tasks to make determinations.	(1) No process is established for IEP teams to use to make AT decisions.	(2) A process is established for IEP teams to use to make AT decisions but it is not collaborative.	(3) A collaborative process is established but not generally used by IEP teams to make AT decisions.	(4) A collaborative process is established and generally used by IEP teams to make AT decisions.	(5) A collaborative process is established and consistently used by IEP teams to make AT decisions.
4. A <u>continuum of assistive technology</u> devices and services is explored.	(1) The team considers only one assistive technology device.	(2) The team only considers readily available technology.	(3) The team sometimes explores a continuum of AT devices and services but may not address all of the student's current needs (e.g. communication but not mobility)	(4) The team generally explores a continuum of assistive technology devices and services based on all of the student's current and near-future needs.	(5) The team consistently explores the full continuum of assistive technology devices and services based on current and near-future needs.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Consideration

Quality Indicator	Variations				
	UNACCEPTABLE				**PROMISING PRACTICE**
5. Decisions regarding the need for assistive technology devices and services are made based on <u>access to the curriculum and the student's IEP goals</u> and objectives.	(1) Decisions about a student's need for AT are not connected to IEP goals or the general curriculum.	(2) Decisions about a student's need for AT are based on either access to the curriculum/IEP goals or the general curriculum, not both.	(3) Decisions about a student's need for AT sometimes are based on both the student's IEP goals and general education curricular tasks.	(4) Decisions about a student's need for AT generally are based on both the student's IEP goals and general education curricular tasks.	(5) Decisions about a student's need for AT consistently are based on both the student's IEP goals and general education curricular tasks.
6. Decisions regarding the need for assistive technology devices and services and supporting data are <u>documented</u>.	(1) Documentation of consideration of a student's possible need for AT devices and services is not in the IEP.	(2) Documentation of consideration of a student's possible need for AT devices and services is inconsistent and may be limited to a "yes/no" check box.	(3) Documentation of consideration of a student's need for AT devices and services is only included if AT is needed.	(4) Documentation of consideration of a student's need for AT devices and services generally is included whether or not AT is needed.	(5) Documentation of consideration of a student's need for AT devices and services consistently is included whether or not AT is needed.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Assessment

Quality Indicator	Variations				
	UNACCEPTABLE				**PROMISING PRACTICE**
1. Assistive technology assessment <u>procedures</u> are clearly defined and consistently used.	(1) No procedures are defined.	(2) Some assessment procedures are defined, but not generally used.	(3) Procedures are defined and used only by specialized personnel.	(4) Procedures are clearly defined and generally used in both special and general education.	(5) Clearly defined procedures are used by everyone involved in the assessment process.
2. Assistive technology assessments are conducted by a <u>multidisciplinary team</u> which actively involves the student and family or caregivers.	(1) A designated individual with no prior knowledge of the student's needs or technology conducts assessments.	(2) A designated person or group of individuals who have knowledge of technology, but not of the student's needs, environments, or tasks conducts assessments.	(3) A designated team conducts assessments with limited input from individuals who have knowledge of the student's needs, environments, tasks, and knowledge of assistive technology.	(4) A team whose members have direct knowledge of the student's needs, environments, tasks, and knowledge of assistive technology generally conducts assessments.	(5) A flexible team formed on the basis of knowledge or expertise in the areas of the individual student's needs, environments, tasks, and assistive technology conducts assessments.
3. Assistive technology assessments are conducted in the student's <u>customary environments</u>.	(1) No component of the AT assessment is conducted in any of the student's customary environments.	(2) No component of the AT assessment is conducted in any of the customary environments, however, data about the customary environments are sought.	(3) Functional components of AT assessments are sometimes conducted in the student's customary environments.	(4) Functional components of AT assessments are generally conducted in the student's customary environments.	(5) Functional components of AT assessments are consistently conducted in the student's customary environments.
4. Assistive technology assessments, including needed trials, are completed within <u>reasonable time lines</u>.	(1) AT assessments are not completed within agency timelines.	(2) AT assessments are frequently out of compliance with timelines.	(3) AT assessments are completed within a reasonable timeline and may or may not include initial trials.	(4) AT assessments are completed within a reasonable timeline and include at least initial trials.	(5) AT assessments are conducted in a timely manner and include a plan for ongoing assessment and trials in customary environments.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Assessment of Assistive Technology Needs

Quality Indicator	Variations				
	UNACCEPTABLE				**PROMISING PRACTICE**
	(6)		(7)	(8)	(9)
5. Recommendations from assistive technology assessments are <u>based on data</u> about the student, environments, and tasks.	(1) Recommendations are not data based.	(2) Recommendations are based on incomplete data from limited sources.	(3) Recommendations are sometimes based on data about student performance on typical tasks in customary environments.	(4) Recommendations are generally based on data about student performance on typical tasks in customary environments.	(5) Recommendations are consistently based on data about student performance on typical tasks in customary environments.
6. The assessment provides the IEP team with <u>documented recommendations</u> about assistive technology devices and services.	(1) Recommendations are not documented.	(2) Documented recommendations include only devices. Recommendations about services are not documented.	(3) Documented recommendations may or may not include sufficient information about devices and services to guide decision-making and program development.	(4) Documented recommendations generally include sufficient information about devices and services to guide decision-making and program development.	(5) Documented recommendations consistently include sufficient information about devices and services to guide decision-making and program development.
7. Assistive technology <u>needs are reassessed</u> by request or as needed based on changes in the student, environments, and/or tasks.	(1) AT needs are not reassessed.	(2) AT needs are only reassessed when requested. Reassessment is done formally and no on-going AT assessment takes place.	(3) AT needs are reassessed on an annual basis or upon request. Reassessment may include some on-going and formal assessment strategies.	(4) AT use is frequently monitored. AT needs are generally reassessed if current tools and strategies are ineffective. Reassessment generally includes on going assessment strategies and includes formal assessment, if indicated.	(5) AT use is continually monitored. AT needs are consistently reassessed if current tools and strategies are ineffective. Reassessment consistently includes on going assessment strategies and includes formal assessment, if indicated.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
AT in the IEP

Quality Indicator	Variations				
	UNACCEPTABLE				**PROMISING PRACTICE**
1. The education agency has <u>guidelines for documenting</u> assistive technology needs in the IEP and everyone on the IEP team is aware of them.	(1) The agency does not have guidelines for documenting AT in the IEP.	(2) The agency has guidelines for documenting AT in the IEP but team members are not aware of them.	(3) The agency has guidelines for documenting AT in the IEP and members of some teams are aware of them.	(4) The agency has guidelines for documenting AT in the IEP and members of most teams are aware of them.	(5) The agency has guidelines for documenting AT in the IEP and members of all teams are aware of them.
2. Assistive technology is included in the IEP in a manner that provides a <u>clear and complete</u> description of the devices and services to be provided and used.	(1) Assistive Technology devices and services are not documented in the IEP.	(2) Some AT devices and services are minimally documented. Documentation does not include sufficient information to support effective implementation.	(3) Required AT devices and services are documented. Documentation sometimes includes sufficient information to support effective implementation.	(4) Required AT devices and services are documented. Documentation generally includes sufficient information to support effective implementation.	(5) Required AT devices and services are documented. Documentation consistently includes sufficient information to support effective implementation.
3. Assistive Technology is used as a <u>tool to support achievement of IEP goals</u> and objectives as well as participation and progress in the general curriculum.	(1) AT use is not linked to IEP goals and objectives or participation and progress in the general curriculum.	(2) AT use is sometimes linked to IEP goals and objectives but not linked to the general curriculum.	(3) AT use is linked to IEP goals and objectives and sometimes linked to the general curriculum.	(4) AT is linked to IEP goals and objectives and is generally linked to the general curriculum.	(5) AT is linked to the IEP goals and objectives and is consistently linked to the general curriculum.
4. IEP content regarding assistive technology use is written in language that describes <u>measurable and observable outcomes</u>.	(1) The IEP does not describe outcomes to be achieved through AT use.	(2) The IEP describes outcomes to be achieved through AT use, but they are not measurable.	(3) The IEP describes outcomes to be achieved through AT use, but only some are measurable.	(4) The IEP generally describes observable, measurable outcomes to be achieved through AT use.	(5) The IEP consistently describes observable, measurable outcomes to be achieved through AT use.
5. All <u>services</u> needed to implement assistive technology use are documented in the IEP.	(1) Services needed to support AT use are not documented.	(2) Some services are documented but they do not adequately support AT use.	(3) Services are documented and are sometime adequate to support AT use.	(4) Services are documented and are generally adequate to support AT use.	(5) Services are documented and are consistently adequate to support AT use.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Implementation

Quality Indicator	Variations				
	UNACCEPTABLE				PROMISING PRACTICE
1. Assistive technology implementation proceeds according to a <u>collaboratively developed plan.</u>	(1) There is no implementation plan.	(2) Individual team members may develop AT implementation plans independently.	(3) Some team members collaborate in the development of an AT implementation plan.	(4) Most team members collaborate in the development of AT implementation plan.	(5) All team members collaborate in the development of an comprehensive AT implementation plan.
2. Assistive technology is <u>integrated</u> into the curriculum and daily activities of the student.	(1) AT included in the IEP is rarely used.	(2) AT is used in isolation with no links to the student's curriculum and/or daily activities.	(3) AT is sometimes integrated into the student's curriculum and daily activities.	(4) AT is generally integrated into the student's curriculum and daily activit ies.	(5) AT is fully integrated into the student's curriculum and daily activities.
3. Team members in all of the student's environments <u>share responsibility</u> for implementation of the plan.	(1) Responsibility for implementation is not accepted by any team member.	(2) Responsibility for implementation is assigned to one team member.	(3) Responsibility for implementation is shared by some team members in some environments.	(4) Responsibility for implementation is generally shared by most team members in most environments.	(5) Responsibility for implementation is consistently shared among team members across all environments.
4. The student uses <u>multiple strategies</u> to accomplish tasks and the use of assistive technology may be included in those strategies.	(1) No strategies are provided to support the accomplishment of tasks.	(2) Only one strategy is provided to support the accomplishment of tasks.	(3) Multiple strategies are provided. Students are sometimes encouraged to select and use the most appropriate strategy for each task.	(4) Multiple strategies are provided. Students are generally encouraged to select and use the most appropriate strategy for each task.	(5) Multiple strategies are provided. Students are consistently encouraged to select and use the most appropriate strategy for each task.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Implementation

Quality Indicator	Variations				
	UNACCEPTABLE				PROMISING PRACTICE
5. Training for student, family, and staff is an integral part of implementation.	(1) AT training needs have not been determined.	(2) AT training needs are initially identified for student, family, and staff, but no training has been provided.	(3) Initial AT training is sometimes provided to student, family, and staff.	(4) Initial and follow-up AT training is generally provided to student, family, and staff.	(5) On-going AT training is provided to student, family, and staff as needed, based on changing needs.
6. Assistive technology implementation is initially based on assessment data and is adjusted based on performance data.	(1) AT implementation is based on equipment availability and limited knowledge of team members, not on student data.	(2) AT implementation is loosely based on initial assessment data and rarely adjusted.	(3) AT implementation is based on initial assessment data and is sometimes adjusted as needed based on student progress.	(4) AT implementation is based on initial assessment data and is generally adjusted as needed based on student progress.	(5) AT implementation is based on initial assessment data and is consistently adjusted as needed based on student progress.
7. Assistive technology implementation includes management and maintenance of equipment and materials.	(1) Equipment and materials are not managed or maintained. Students rarely have access to the equipment and materials they require.	(2) Equipment and materials are managed and maintained on a crisis basis. Students frequently do not have access to the equipment and materials they require.	(3) Equipment and materials are managed and maintained so that students sometimes have access to the equipment and materials they require.	(4) Equipment and materials are managed and maintained so that students generally have access to the equipment and materials they require.	(5) Equipment and materials are effectively managed and maintained so that students consistently have access to the equipment and materials they require.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Evaluation of Effectiveness

Quality Indicator	Variations				
	UNACCEPTABLE				**PROMISING PRACTICE**
1. Team members share <u>clearly defined responsibilities</u> to ensure that data are collected, evaluated, and interpreted by capable and credible team members.	(1) Responsibilities for data collection, evaluation, or interpretation are not defined.	(2) Responsibilities for data collection, evaluation, or interpretation of data are assigned to one team member.	(3) Responsibilities for collection, evaluation and interpretation of data are shared by some team members.	(4) Responsibilities for collection, evaluation and interpretation of data are shared by most team members.	(5) Responsibilities for collection, evaluation and interpretation of data are consistently shared by team members.
2. Data are collected on <u>specific student behaviors</u> that have been identified by the team and are <u>related to one or more goals</u>.	(1) Team neither identifies specific changes in student behaviors expected from AT use nor collects data.	(2) Team identifies student behaviors and collects data, but the behaviors are either not specific or not related to IEP goal(s).	(3) Team identifies specific student behaviors related to IEP goals, but inconsistently collects data.	(4) Team identifies specific student behaviors related to IEP goals, and generally collects data.	(5) Team identifies specific student behaviors related to IEP goals, and consistently collects data on changes in those behaviors.
3. Evaluation of effectiveness reflects the <u>objective measurement of changes in the student's performance</u> (e.g. student preferences, productivity, participation, independence, quantity, quality, speed, accuracy, frequency, or spontaneity).	(1) Effectiveness is not evaluated.	(2) Evaluation of effectiveness is based on something other than student performance, such as changes in staff behavior and/or environmental factors.	(3) Evaluation of effectiveness is based on subjective information about student performance.	(4) Evaluation of effectiveness is generally based on objective information about student performance from a few data sources.	(5) Evaluation of effectiveness is consistently based on objective information about student performance obtained from a variety of data sources.
4. Effectiveness is evaluated <u>across environments</u> including during naturally occurring opportunities as well as structured activities.	(1) Effectiveness is not evaluated in any environment.	(2) Effectiveness is evaluated only during structured opportunities in controlled environments (e.g. massed trials data).	(3) Effectiveness is evaluated during structured activities across environments and a few naturally occurring opportunities.	(4) Effectiveness is generally evaluated during naturally occurring opportunities and structured activities in multiple environments.	(5) Effectiveness is consistently evaluated during naturally occurring opportunities and structured activities in multiple environments.

Quality Indicators in Assistive Technology
Indicators in Action Matrix
Evaluation of Effectiveness

Quality Indicator	Variations				
	UNACCEPTABLE				PROMISING PRACTICE
5. Evaluation of effectiveness is a dynamic, responsive, <u>ongoing process</u> that is reviewed periodically.	(1) No process is used to evaluate effectiveness.	(2) Evaluation of effectiveness only takes place annually, but the team does not make program changes based on data.	(3) Evaluation of effectiveness only takes place annually and the team uses the data to make annual program changes.	(4) Evaluation of effectiveness takes place on an on-going basis and team generally uses the data to make program changes.	(5) Evaluation of effectiveness takes place on an on-going basis and the team consistently uses the data to make program changes.
6. Data collected provides a <u>means to analyze response patterns and student performance</u>.	(1) No data are collected.	(2) Data are collected on staff behavior or environmental factors, rather than student performance.	(3) Data are collected on student performance, but data are not sufficient to allow necessary analysis.	(4) Data are collected on student performance, and are generally sufficient to allow necessary analysis.	(5) Data are collected on student performance, and are consistently sufficient to allow necessary analysis.
7. The team makes <u>changes</u> in the student's educational program based on data.	(1) Program changes are never made.	(2) Program changes are made in the absence of data.	(3) Program changes are loosely linked to student performance data.	(4) Program changes are generally linked to student performance data.	(5) Program changes are consistently linked to student performance data.