SPP/APR - SSIP

Stakeholders Meeting # 4

Thank you for being here
Agenda for Today

• What’s New
  - OSEP Evaluation Tool
  - Updated timeline

• Workgroups Report Out
  - Data
  - Infrastructure
  - Improvement Strategies
  - Theory of Action

• No more simmering – it’s time for a SiMR!
  - Wordsmithing

• Workgroup meetings > adjourn
Click “Mark Complete” button April 1, 2014

Finalize sections based on feedback March

Get final input from ALL stakeholders February Meetings

Post draft sections for public comment February 1

Edit in to one cohesive report in GRADS January

Drafts sections to Alice December 31st
Indicator 11: State Systemic Improvement Plan
Baseline and Targets

Not Applicable:  

Monitoring Priority: General Supervision
Results indicator: The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Baseline Data

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<tr>
<th>FFY</th>
<th>2013</th>
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<td>Data</td>
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FFY 2014 - FFY 2018 Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
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<tbody>
<tr>
<td>Target</td>
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Indicator 11: State Systemic Improvement Plan
Analysis of State Infrastructure

Monitoring Priority: General Supervision
Results indicator: The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

- Measurement

- Instructions

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in EIS programs and/or EIS providers to implement, scale up, and sustain the use of evidence-based practices to improve results for infants and toddlers with disabilities and their families. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and other early learning initiatives, such as Race to the Top-Early Learning Challenge and the Home Visiting program and describe the extent that these new initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.
**Improvement Strategies**

**Indicator 11: State Systemic Improvement Plan**

**Selection of Coherent Improvement Strategies**

*Monitoring Priority: General Supervision*

*Results indicator: The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.*

- **Measurement**
- **Instructions**

**Selection of Coherent Improvement Strategies**

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support EIS program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.
Proposed Strategies

I. Knowledge: Parent, physician and provider
1. Educate/inform parents in Birth to Three on their role in PPT meetings and the importance of being able to communicate their child’s strengths and needs
2. Develop a marketing plan to educate doctors on our efforts to empower parents. Include medical home and Part C article
3. Develop family stories that present how and why this is important.
4. Market this initiative to providers so they understand the importance
Proposed Strategies

II. Training: Parent, physician and provider
5. Train providers on involving parents from the beginning; Evaluation reports, assessment, writing functional outcomes on the IFSP, parent and providers develop strategies that lead to parents communicating strategies they can use
6. Create training module for parents on how to and the importance of describing their child
7. Build on effort to increase provider understanding and implementation of coaching, PP, natural environments work with Rush and Sheldon.
8. Continue training and TA on developing and writing outcomes
Proposed Strategies

III. Policy: Procedures, forms

9. Revise IFSP form with prompts for providers on how to have parents describe child and make lead in more active change from to have Matthew to... to Matthew will...

10. Revise Natural Environments guidelines to include working with child care
Proposed Strategies

IV. HV Practices: Curriculum, coaching
11. Make curricula (ie. ESDM, HELP, Carolina, etc.) available to parents to complete to educate parent to talk about child
12. Have parents use DECA self-assessment
13. Continue to work to improve the relevancy of ELDs as a strategy
14. Continue dissemination of Pyramid model including requiring programs to use coaching checklist
15. Provide Supervisor training on b23 model and helping staff achieve SIMR
Proposed Strategies

For Rush and Sheldon – UCONN UCEDD assist with implementation measurement – operationalize objectives into measureable outcomes. What we want to see...
Indicator 11: State Systemic Improvement Plan
Theory of Action

Monitoring Priority: General Supervision
Results indicator: The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

- Measurement
- Instructions

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State’s capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

Insert Graphic

Browse

Provide a description of the provided graphic illustration (optional)
Indicator 11: State Systemic Improvement Plan
Measurable Result for Infants and Toddlers with Disabilities

Monitoring Priority: General Supervision

Results indicator: The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

- Measurement
- Instructions

State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and Their Families

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Indicator 4 (helping their child develop and learn)).
Final Wording: Parents of children who have a diagnosed condition will be able to describe their child’s abilities and challenges more effectively as a result of their participation in Early Intervention.

IFSP participation over time
Part B reading by age?
Linking child data as a measure of child outcomes AS A RESULT of our family outcome.
Next Steps?

• SPP is Due Feb 4th
• SSIP Webpage
• Next Meeting February 23rd
• Questions?