

Connecticut Birth to Three System – Part C State Systemic Improvement Plan Logic Model

SiMR: Parents will be able to describe their child’s abilities and challenges more effectively as a result of their participation in Early Intervention.

Inputs	Activities	ST Outcome	Int Outcome	LT Outcome
<p>Families / CPAC, Inc</p> <p>PHCPs / referral sources</p> <p>MOU’s/MOA’s</p> <p>211 CD single point of entry</p> <p>ABT leaders, webpages and materials</p> <p>OEC Fidelity Coaches</p> <p>FIPP modules</p> <p>B23 procedure/guidance review</p> <p>CANVAS LMS at OEC</p> <p>84.325P and 84.325L grants</p> <p>EIS contract language supports ABT and other quality activities</p> <p>Next RFP due Fall 2024</p> <p>New expense reports and fiscal monitoring provide data</p> <p>3rd party review without FCP</p> <p>CGA changed system quickly</p>	<p>Expand “Bridging the Gap” model to share uniform message about B23 including key principles of ABT practices.</p> <p>Develop and disperse materials in communities.</p> <p>Determine what data is needed to gather feedback about the message of B23.</p> <p>Adding messaging about outreach in current MOA’s/MOU’s/Contracts</p> <p>Fidelity checks to prevent “drift”</p> <p>Develop a model visit note and update related procedures to increase use of ABT</p> <p>Update all modules for use on CANVAS</p> <p>3rd person to complete Fidelity Coach training</p> <p>Market analysis of EI staffing rates and shortages</p> <p>Evaluate impact of RFP every 5 years on families Include impact on 1915(b)(4) waiver</p> <p>Analysis and reporting of aggregate fiscal data</p> <p>Online training to maximize commercial insurance and Medicaid revenue</p> <p>RAIN launched</p>	<p>PHCPs, providers, and community partners will understand ABT practices.</p> <p>Programs having products to share with community and families to support ABT practices.</p> <p>OEC links data from CANVAS and RAIN to evaluate which practitioners are completing standardized training with materials, activities and progression through ABT</p> <p>Mentor Coaches are focused on NLEP</p> <p>Train the trainer for Mentor Coaches</p> <p>Determine whether RFP in 2024 for 2025 is inevitable</p> <p>Determine if a rate review is needed.</p> <p>Commercial ins and Medicaid revenue increases</p> <p>Programs have access to their data through new reporting tools</p>	<p>PHCPs, providers, and community partners accurately describe ABT practices for families.</p> <p>Programs are able to complete the same analysis and do all their own training (without national experts).</p> <p>Further implementation of PSP to fidelity</p> <p>Systems in place to train and maintain fidelity of Mentor Coaches</p> <p>Contract language and funding supports ABT activities</p> <p>Extend RFP to 2026</p> <p>Fiscal data to support competitive state rate</p> <p>EIS costs covered after ARPA</p> <p>Reports about B23 to CGA by legislative district for equity and broader stakeholder engagement</p>	<p>While being referred, families understanding about what the CT Birth to Three System looks like including the ABT practices aligns with what they were told by PCHPS, provides and community partners.</p> <p>Parents accurately describe Birth to Three and with regard to the ABT practices to their PCHPs, community partners and LEAs.</p> <p>Continuity of delivery of supports for families based on ABT from initial contact through to transition.</p> <p>New EIS rate for Teaming</p> <p>A consistent, reliable, dependable, predictable, equitable and fiscally sustainable Part C system that that support ABT practices for families.</p>