

Improvement Planning

Mischele McManus
Infant/Toddler and Family Services
Office of Early Childhood Education
and Family Services

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mcmanusm@michigan.gov

Purposes of Improvement Planning and Quarterly Reporting

- To ensure systemic changes that will create significant improvements in child and family outcomes.
- Allow focus on the results of improvement activities planned to achieve systemic change.
- Achieve compliance with Individuals with Disabilities Education Act (IDEA) Part C regulations and the Michigan State Plan.

Your Improvement Planning Team

(for Determinations)

- *Early On*[®] Coordinator and supervisor(s).
- Local Interagency Coordinating Council (LICC) members, including parents.
- Other people with expertise and knowledge in the targeted areas.

The Improvement Plan

- Must address each indicator highlighted in your determination letter.
- Must result in “evidence of change.”

What is “evidence of change?”

Evidence of change =

Immediate + Systemic
correction improvement

Immediate Correction

Takes place when the indicator or finding can be corrected in existing files. It also includes immediate changes in procedures that ensure the issue is corrected for the short-term as systemic improvement plans are implemented.

Systemic Improvement

Describes the results that will occur when the improvement plan has been implemented; i.e., data will demonstrate that the service area has come into compliance with the indicator or finding.

Example

Indicator 7: Percent of eligible infants and toddlers with Individualized Family Service Plans (IFSPs) for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline.

Evidence of Change Example

Immediate Correction

The service area service coordinators will review all current files to ensure that each enrolled child has a complete, multidisciplinary evaluation and will complete the evaluation process when pieces are missing.

Evidence of Change Example

Systemic Improvement

The Intermediate School District (ISD) will develop and implement procedures that will ensure improving compliance (80%) with the 45-day indicator by December 1, 2007 with substantial compliance (95%) by June 1, 2008.

The Form

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Completing the Form

Complete only one of the following:

Agency Information

LEA Name:

ISD/Service Area Name:

Completing the Form, cont.

Complete only the date submitted.
The reviewer will complete the date approved and indicate when the first quarterly report is due.

Date Submitted:

Date Approved:

First Quarterly Report Due: ***Select***

Improvement Plan

- Determination
- Focused Monitoring
- Service Provider Self Review (SPSR)

Check all that apply for your service area. If you have an existing Focused Monitoring Improvement Plan you should roll it into this plan.

Indicator/Object of Improvement

Ignore Part B Section!

This is the same form that Part B will be using for improvement planning.

Indicator/Object of Improvement

(Check only one per form.)

You will use a separate form for each indicator. If you had two indicators cited on your determination letter, you will have two separate forms that together make up your improvement plan.

Description of Findings:

Describe why this indicator must be addressed in your service area. You should include the wording from the indicator that was cited in your determination letter and give details about what the issue is in your area.

Example

The ISD received a determination of Needs Assistance based on the 45-day timeline indicator. Further analysis of our data shows that the ISD was able to conduct a developmental assessment of each child within 45 days of referral,

Example, cont.

but has not received health status information, including vision and hearing check results, or completed the initial IFSP meeting within 45 days of referral.

Example, cont.

As the ISD system is set up to utilize health information from a health care professional as one discipline of the multidisciplinary evaluation, we are also not meeting that requirement.

Evidence of Change:

Include both the immediate correction and the systemic improvement.

Processes

- Data
- Supervision
- Collaboration
- Infrastructure/resource management
- Policy/procedure
- Communication
- Technical assistance/professional development
- Other

Processes, cont.

Each indicator, or section of your improvement plan, will have as many or as few (at least one) of the processes checked as you deem necessary.

Processes, cont.

Depending upon your analysis of the issue and your knowledge of your service area, you and your improvement planning team will determine which processes need to be addressed.

Processes, cont.

- o Each process checked will have one or more tasks. For each task there will be a justification, a task document/product, and a task evaluation/measurement.
- o There will be only one person responsible and one task due date for each process.

Tasks

(Strategies/Methods/Practices)

- Must be as specific as possible.
- Must be tied directly to analysis of existing data and knowledge of Part C and the local early intervention system.
- Must be sequential and targeted.

Policy/Procedure – Task

Develop a standardized Health Information Request Form that includes a specific request for vision and hearing check information.

Justification for Tasks/Activities

Explain how this task relates to evidence of change. In other words, why will this task improve your compliance with the indicator?

Policy/Procedure – Justification

Utilizing a standard form that requests the exact information needed will decrease turn-around time for receiving information from health providers.

Policy/Procedure – Justification, cont.

Specifying the information needed will ensure that the care provider will include results of hearing and vision checks and will reduce the need for copying the entire file which will improve timeliness.

Person Responsible for Task

Select from:

Early On Coordinator

ISD Monitor

Superintendent
(ISD)

Superintendent
(LEA)

Special Education
Director (ISD)

Special Education
Director (LEA)

Service Coordinator

Staff (ISD)

Staff (LEA)

Other

Person Responsible for Task, cont.

Also must insert name, and title, if
staff or other.

Task Due Date

- You must insert a specific date.
- If the task will be on-going, use the beginning date.
- If the task will take place over a period of time, use the date the task will be completed.

Task Documentation/ Products

Describe or name any forms, policies, contracts, etc. that will document that the task has been completed.

Policy/Procedure – Task Documentation/ Products

Health Information Request Form

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Task Evaluation/Measurement

- How will you follow up/assess the activity?
- Describe how each activity will be monitored and maintained by the district to ensure that the expected changes take place.
- Must be measurable.
- Must be specific.

Policy/Procedure – Task Evaluation

The service area (ISD) Planner/Monitor will randomly review two new IFSP's every month for compliance with the requirement for health, vision, and hearing information. In the event that omissions are found, the file shall be returned to the *Early On* (EO) Coordinator for correction within one week.

Remember Your Resources:

- *Early On* Training and Technical Assistance (EOTTA) training specialist
- EO state staff
- ISD monitor
- Other EO coordinators
- LICC members

Submission Information

- Improvement plans for service areas that received Needs Assistance Determinations are due September 14, 2007.
- Plans will be reviewed and approved by *Early On* staff.
- You will be notified of approval.

Quarterly Progress Reporting

- You will be assisted by your assigned technical assistance provider (EOTTA).
- Reporting forms will be provided.
- Be specific about how the plan has been implemented in the past three months.

Quarterly Progress Reporting, cont.

- Include data from file reviews of children newly enrolled in the past three months or available EETRK or other data.
- Submission dates are: December 1, March 1, June 1, and September 1.

Submission

- o Send improvement plans and quarterly reports to Mischele McManus, (preferably electronically) at mcmmanusm@michigan.gov.

QUESTIONS

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