



STATE SYSTEMIC IMPROVEMENT PLAN
TASK FORCE
MEETING MINUTES

Meeting Date: 1/13/2015

Meeting Location: Department of Developmental Services

Approval: 2/17/15

Recorded By: DDS Staff

ATTENDANCE

	Name	Stakeholder Group Categories	Present/Absent
1	Meredith Cathcart, M.S. Administrator Policy and Program Services	California Department of Education, Special Education Part B Coordinator	Yes
2	Marie Kanne Poulsen, Ph.D. University of Southern California	Interagency Coordinating Council (ICC) member and Executive Committee chair person	Yes
3	Virginia Reynolds Program Director WestEd Center for Prevention & Early Intervention (WestED)	WestEd Center for Systemic Improvement	Yes
4	Tony Anderson Executive Director ARC of California	Advocacy community	Yes
5	Fernando Antonio Gomez President, Board of Directors (BOD), Association of Regional Center Agencies (ARCA)	ARCA BOD/Westside Regional Center ICC member Parent	Yes
6	Gina Guarneri, M.A. Center for Excellence in Developmental Disabilities UC Davis MIND Institute	Training/Technical Assistance, UC Davis MIND Institute	Yes
7	Robin Larson Case management Supervisor, Intake and Assessment Far Northern Regional Center (RC)	Far Northern RC	Yes
8	Nina Garrett Associate Director Case Management Services San Diego Regional Center	San Diego RC	Yes
9	Carmen Vasquez, Manager Early Start Program East Los Angeles RC	East Los Angeles RC	Yes
10	Renee C. Wachtel, M.D.	Developmental-Behavioral Pediatrics, Neurodevelopmental Disabilities	Yes
11	Robin Millar Administrative Director Adult and Pediatric Therapies Child Development Center Simi Valley Hospital	Vendor with regional centers in Ventura and West Los Angeles	Yes
12	Kelly Young Executive Director WarmLine Family Resource Center	Family Resource Center Network of California Parent	Yes

Department of Developmental Services: Azadeh Fares, Joey Fletcher, Ashley Franklin, Karla Lannon, Elise Parnes, Erin Paulsen, Kay Ryan, Jennifer Teykaerts

MEETING LOCATION

Building: 1600, 9th Street, Sacramento, CA 95814

Conference Room: 360

Conference Line: 888-251-2909

MEETING START

The meeting was scheduled to start at 9:00 am and actually began at 9:20 am due to foggy weather delaying the arrival of some participants.

AGENDA ITEMS

- **Welcome and Introductions**
 - Complete, all members were either present or had sent a representative.
- **Review SiMR and the Implementation Strategies: Priorities and Focus**
 - Review progress from prior meetings.
 - Re-cap progress made in the SSIP Taskforce to date through PowerPoint Presentation. Work this meeting is intended to focus the strategies previously identified for the SiMR with the group.
 - Discussed the approval of the SiMR as it is supported by the data, aligns with current priorities and initiatives, has potential to leverage resources, addresses issues of disparate outcomes, is supported by leadership, has the necessary commitment to change and is feasible within the 2-4 year timeframe.
 - Discussion of relationship-based services being significant. Group agreed that the lack of awareness or appreciation of relationship-based approach as a root cause that was not articulated in the last meeting.
 - Timeline for submission of SSIP explained between current meeting and submission by March 30, 2015. The Theory of Action will be shared with the SSIP Taskforce before submission.
- **Theory of Action Work**
 - An example of the Theory of Action was shared and discussed. The group discussed the level of detail that is intended to be used in the Theory of Action. The group discussed making a list of questions for OSEP, including the details regarding tool expectations. Group discussed that some of what was documented in the last meetings was good input for Early Start even if it doesn't fit within the scope of the SiMR.
 - The group had selected to align the SiMR with Summary Statement 1, which focuses on the child improving their trajectory of development rather than the child reaching typical age development. The group discussed the significance of the wording regarding program expectation and measureable results articulated in the SiMR work and the significance of ensuring that the child's whole story and context is incorporated into California's wording.
 - The group discussed the idea of including neurodevelopmental level in social emotional development and explored the meaning of what social emotional includes.

- The group explored how the information and ideas discussed fit into the format of the Theory of Action. Part of the is in how we capture the story within data of social emotional improvement and the other part is on the training and approach. The group discussed that we need to do a better job of having related outcomes on IFSPs and training on data.
- The group decided the far-right column of the Theory of Action will hold OSEP wording of the federal expectations and our strategies to get there are filled in to the left of that.
- The group emphasized importance of leveraging what is already in place and focusing on doing it better and training on getting all of that data input for use in telling the story with our data (improve data to reflect what good stuff is already happening) along with looking at what resources we need in place to make social emotional improvements (cleaning up data and putting new resources in place to work on social emotional development).
- Over 40 states use the same tool at entrance and exit, an OSEP-developed tool called the Child Outcomes Summary Form called “COSF”. OSEP has asked CA about the reasons for use of different tools throughout the state and at entrance and exit of the program. Discussed the issue of local control and the group wanted to know if other large states (like FL or NY) use the standard tool. Group discussed that lead agency is expected to figure out best interest within your state’s structure and not use that as a reason not to put in place.
- The tool is one way of capturing the improvements correctly with data but it is also about the strategies and intervention work we do with the kids and families, which also needs to be addressed in our work. Ex.- the differences in provider approaches and whether we are consistently providing services in the context of routine/relationships (etc.) that we know impact social emotional development
- The group discussed this federal requirement provides an opportunity to make improvements to the system that aren’t necessarily comfortable.
- **Root cause prioritizing**
 - Group worked on the following:
 - prioritize the root causes and articulate strong statements to insert as a “then” for the Theory of Action with the intent to complete the Theory of Action by end of meeting.
 - added root cause: Lack of awareness of and appreciation for the appreciation for the parent-child relationship as the core of development regarding relationship-based approach in Early Start.
 - discussed funding and the need to support vendors in attending/receiving training.
 - reviewed the state of Virginia’s SSIP strategies and their Theory of Action as an example.
 - discussed the desire to capture that all early intervention services should be assessed for and provided with an embedded attention to social emotional development (infused with, foundation of...)
- **Strategy Identification**

- The group discussed and explored the following ideas as potential strategies:
 - identify social emotional strategy for each problem
 - establish responsiveness between family needs and early intervention services
 - need for family to understand philosophy of Early Start program and the parent role in the program; service professional to understand the importance of family needs
 - program philosophy includes understanding the child's development is in the context of the parent/child relationship
 - social/emotional relationships should be embedded in all early intervention services
 - social emotional training for families and FRC staff
 - standard process and resources with Early Start information for parents with philosophy and approach (i.e., Warmline FRC has one on their website) to educate families and review this information at all levels (at intake and IFSP meetings and at time of services)
 - service providers should understand and Implement family centered approach and natural environment
 - all state services should strengthen supports for parent/child relationships and young children's social emotional wellbeing
 - all to be evidence-based; identify existing evidence-based programs and practices in use (ex.- Routine-Based Interviewing)
 - screening/evaluation of child's social emotional development at each six month review
 - use of implementation science
 - measurement can be the change in practice
 - consider a sub-category to pilot (cohorts) and scale up or choose to target the entire population
 - collaboration can start with inter-regional center or by RC catchment area collaborative partners (need to include the LEAs and providers)
 - build Strengthening Families model and 5 protective factors into IFSPs
 - identify and share examples of IFSP templates that are family centered
 - training for entire Early Start community on best practices in social emotional development and philosophy
 - encourage endorsement of trans disciplinary core providers, infant family mental health specialists
 - expand the Early Start Foundations to serve more providers
 - develop an open source module for social emotional domain training
 - align to other state initiatives that address goals—such as CA CSEFEL
 - Train the trainers—mentoring and monitoring to fidelity

- required course for staff, providers and families on social emotional development and child-parent relationships in early intervention
- ICC to help identify and educate state-wide interagency collaboratives and disseminate information on the importance of parent-child relationships and social emotional development
- recommend social emotional component in local MOUs and State level MOUs
- ICC white paper on social emotional development in early intervention practices with a focus on CA practice
- provide guidelines in use of evidence based assessment tools
- possibly implement one tool for entry and exit for social emotional domain only?

MEETING END

The meeting was scheduled to end at 4:00 p.m. and actually ended at 3:30 p.m. to allow additional time to travel due to bad weather.

POST MEETING ACTION ITEMS

Action	Assigned To	Deadline
DDS to complete Theory of Action based on work completed this meeting	DDS	February 17, 2015
DDS will send the 2015 schedule to the task force after getting feedback on SSIP Phase I	DDS	

NEXT MEETING

Next Meeting: February, 17 2015

Location: 1600, 9th Street, Room 360, Sacramento, CA 95814

Time: 9:00 am to 4:00 pm (working lunch)