STATE SYSTEMIC IMPROVEMENT PLAN
FIRST MEETING FOR CONSTITUENCY GROUP B
MEETING MINUTES

Meeting Date: 06/11/24

Meeting Location: Zoom

Approval: Department of

Developmental Services

(DDS) Staff

1. ATTENDANCE

Name	Stakeholder Group Categories	Present/Absent
Ginger Elliott-Teague, PhD Senior Researcher and Technical Assistance Specialist, SRI International	Facilitator Technical assistance provider	Present
Anna Mark, MEd Senior Education Research and Technical Assistance Specialist, SRI International	Facilitator Technical assistance provider	Present
Arushie Nugapitiya San Andreas Regional Center	Regional Center	Present
Kim Pierce District Manager for Early Start in Montery County; San Andreas Regional Center	Regional Center	Present
Dana Kalek Director of Operations for Child Development Institute (CDI)	Service Provider	Present
Robin Millar Retired Administrative Director, Child Development Center, Ventura County	Service Provider	Present
Sarah Franco San Diego Regional Center	Regional Center	Present
Araceli Mendez Area Supervisor, Regional Center of Orange County	Regional Center	Present
Michelle Oliver Developmental Specialist and Part C consultant (primarily with San Andreas Regional Center)		Present
Matt Chestnut Executive Director and owner of Parent Infant Programs	Service Provider	Present
Elizabeth Villa-Gomez Early Start Lead SC, Regional Center of Orange County	Regional Center	Present

DDS: Nathaniel Taleon, Joni Hasselbring, Jasmine Duo, Ashley Lambert, Hope Beale, Reyna Ambriz

- **MEETING LOCATION**
  - Online, Zoom

- **AGENDA**
  - **Welcome and Introductions**
    - Nate Taleon kicked off the meeting with an overview of SSIP in CA.
    - Jasmine Duo provided housekeeping information for participating via Zoom and after the meeting.
    - Ginger defined focus of these group discussions to develop a more comprehensive understanding of the role of the SSIP in early intervention and consider where to target improvement efforts.
    - Ginger conducted a roll call via chat.
  - **Why There is an SSIP and What It Is**
    - Ginger shared that the SSIP is intended to improve child and family outcomes SSIP is a multi-year plan to build state capacity to improve child outcomes.
      - Initially created 10 years ago.
      - Progress is not being made in meeting identified targets, though there have been gains.
      - Given the amount of time between inception and today it is time to refresh the SSIP There are three phases: analysis & development of theory of action; plan design and evaluation plan; implementation of plan and actual evaluation and reporting.
        - SiMR is a result of a child or family outcome that is for a holistic or targeted population This work is taking about one year and part of this process is taking in public comment with the hopes that child and family outcomes will improve for those served through Early Start.
        - OSEP does monitor this work and its effectiveness is important Every state must describe its goal and work being done to meet the goal in their APR submitted yearly each February to OSEP.
  - **SSIP History and Current Work**
    - Ginger explained the California SSIP is 10 years old, written in 2015
      - SiMR currently is very broad.
      - It was Child outcome statement 1 - significant growth in social-emotional outcomes for all children aged 0-2; not targeted to a specific subgroup at the time.

- Implementation has waned.
  - Theory of Action sought to increase collaboration with family and implement evidence-based practices at the local level through Regional Centers which should lead to a large increase in growth in social-emotional development.
  - Engagement Plan is not designed to measure the improvement.
- **SSIP Revisions**
  - Ginger clarified the intent with the redesign is to design SSIP to have more confidence that what centers and providers are offering are actually leading to improved outcomes for children and families served.
    - SSIP leadership will engage in substantial constituent engagement and gather feedback through a series of meetings.
    - The work must be accomplished in the next 6-8 months.
    - By gender, girls exit at a higher rate than boys.
- **Pause for Discussion**
  - Arushie Nugapitiya commented that social emotional area was also tied into the Early Start Report (ESR). There are some downsides, such as including entry and exit plan. If a child was not in the system at 6 months of service, we were not entering any data. Different Regional Centers (RCs) use different tools, this can skew the scores because you are comparing different data. Some positives to the ESR are that RC staff and service coordinators came together and decided it was important to track this as social emotional health is very important across the country.
  - • Ginger noted only children with at least six months of service are included in the data. Under six months, those children are not included in the data.
  - • Nate explained that DDS has also considered data eThis ntry into the ESR as something that warrants attention. No one entering data needs to worry about OSEP reporting, but we want to emphasize that if information is available, please enter it. DDS will do the filtering and data cleanup.

- **Community Involvement**
  - Advisory group provides recommendations.
  - Constituency groups (parents and advocates; Regional Centers and providers; agency partners and higher education)
    - ○ We hope for more targeted conversation related to specific concerns of these constituencies)
    - ○ Feedback on recommendations of advisory group
      - • Public awareness through the SSIP website and public announcements

- **Initiate Data Analysis & Identify Outcome Focus**
    - Where should CA Early Start focus its improvement efforts?
    - Two outcome areas – child outcomes and family outcomes
        - Child outcomes
            - Positive social-emotional skills
            - Acquisition and use of knowledge and skills
            - Use of appropriate behaviors to meet needs
        - Family outcomes
            - Can effectively communicate their child's needs
            - Families help their children develop and learn
            - Families know their rights and effectively advocate
                - Summary statements for each outcome
                - Measurement of growth by program exit
                - Measure of whether children exit meeting age expectations.
        - Helpful links: For more detail on how the statement rates are calculated, visit https://ectacenter.org/eco/assets/pdfs/childoutcomeshighlights.pd
    - **Data & Graphs**
        - Child outcomes:
            - There are always pre- and post-measures.
            - CA submits two sets of data for children with at least six months of service.
            - Not all children are represented in the data shared (40% of children served are not included in the dataset, and their progress has not been captured)
            - Declines are small.
        - Child outcomes data:
            - Social-Emotional Development - Outcome A
                - Declines over time and neither (A1, A2) have met targets
                    - Knowledge and Skills - Outcome B
                - Some declines and neither (B1, B2) have met targets
                    - Behaviors to Meet Needs - Outcome C
                - Some declines and neither (C1, C2) have met targets
            - National Perspective
                - Demonstrating Growth
                    - CA is just above national average for Outcomes A, B
                    - CA is below national average for Outcome C
            - Within Age Expectation
                - CA is just above national average for Outcomes A, B,

C
- All programs are rated on entry and exit of children and data is considered in state determinations; CA has 51% completeness, which is below national median of 63%.
  - Pause for Discussion
    - Michelle Oliver asked, given different tools are used and the data is skewed, perhaps we need to do more on family outcomes to be more narrow on how we measure it?
  - Kim Pierce asked, on the state data completeness slides, who is captured? Ginger responded, all children exiting regardless of length of service; when only looking at children with at least six months of service CA completion rate jumps to 60%; regardless, 40% of children are not being reported regardless of length of service.
  - Kim asked, where is that pulled from on ESR? Ginger answered, the adaptive score. Nate agreed.
    - Arushie asked, if behavior piece is pulled out of this?
  - Matt asked, with the six-month criteria, does the dataset include all children in Early Start for nation? Ginger answered, yes, for child outcomes annual reporting is all children exiting with at least six months of service.
    - Arushie asked, for DDS, documentation we give on ESR on final disposition, is that taken into account to draw the data? There are areas undetermined because school district did not respond and for how it may fit the description. Nate answered, a child exiting is a child turning age 3; some children exit early but they will still exit in the ESR. Anyone who exists regardless of disposition because every child ages out and exits at age 3. This is our denominator for our 618 exit data

  - Family outcomes
    - CA uses a survey for data collection, response rate is close to 10% so data are not always representative of subpopulations or regions
    - Surveys provided in multiple languages and response methods
    - CA uses a sampling of the data, which must be approved by OSEP for proper representativeness
    - Surveys must ask questions about the reported outcomes (listed above)
  - Family outcomes data:
    - Outcome A - Do parents know their rights.
      - ○ Above target
  - Outcome B - Can families communicate children's needs

- Just below target by ~1%
  - Outcome C - Help families help children develop and learn
    - Just under target by ~1%
  - CA is below national average for family outcomes.
    - National averages are ~90%; CA is ~12% below national average.

- **Improvement Focus for SSIP/Discussion**
  - Discussion questions: Which outcome(s) need more attention? What do the data trends suggest the program needs to work on? What issues, concerns, and problems related to child or family outcomes do you see based in your experience, current work, or family life? What needs does California's population of infants and toddlers have that may not be evident in these data?

- **Pause for Discussion**
  - Michelle Oliver commeted that part of parents being able to communicate needs is directly connected to how questions are asked; based on assessment or based on family priorities. Important to take time to ensure where parents are and providing opportunities to communicate their needs, which may not be in an assessment.
  - Arushie noticed that many variables impact family outcomes; depends on options for parents to meet (virtual or in person), who is involved, and ability to participate (if they work, live far away, etc.)
  - Dana Kalek highlighted that family needs are different now than before. Large increase in parental stress. Parental training and involvement are key beyond only working with the child. Telehealth has been hard for parent training and support. If parents don't know what to do the outcomes won't be met. Important to support parents.
  - Matt Chestnut noted it is provider responsibility to help parents. We work with families, not just children. Need the right language for goals in this area to change vendor behavior. The family needs to be the focus.
  - Aracelie agreed that parent participation is key
    - Michelle Oliver commented that for family engagement, the implementation of the mandatory use of insurance for OT/PT/Speech has had negative impact on family education (vs. therapeutic/medical approach
    - All participants wanted to focus on family outcome.
    - Sarah - family outcomes
    - Araceli - family outcome 2 or 3
    - Arushie - family outcome 3, also stated "I am ok keeping child outcome 1 (social-emotional)."
    - •Dana - child outcome 1, family outcome 2
    - Matt - family outcome
  - Ginger explained for measurement purposes states have flexibility; they must select from a pool of outcomes but how it measures the outcome does not have to, for example, be measured by a family survey.

- o Robin noted one concern about how data is being collected; 21 different RCs that may or may not follow directives (interpretation can differ). Can we influence better data quality? Ginger answered yes, we can start in pilot sites before going statewide. Fidelity of implementation - data would only be pulled from where the intervention is being implemented.
    - o From prior meetings, there is preference to focus on family outcomes, specifically:
        - ▪ Child outcome 1 (social-emotional skills)
        - ▪ Family outcome 3 (help children develop and learn)
    - o Dana Kalek commented once we improve family abilities to have their needs met the child outcomes improve.
- **Next Steps**
    - o Advisory Group meetings in June and July to focus on improvement plan.
    - o Constituency Group meetings in late July to solicit feedback on improvement plan.
    - o We can hold another round of meetings in October if there is desire to hear more about the progress.
    - o Constituency Group members can participate in the Advisory Group as well to further support planning.