Tennessee Early Intervention System

State Systemic Improvement Plan (SSIP)

2021

FFY 2019 Indicator B-17/C-11 Annual Performance Report (APR) Optional Template

Section A: Data Analysis

What is the State-identified Measurable Result (SiMR). (Please limit your response to 785 characters without space)*.*

The percent of infants and toddlers who demonstrate improved acquisition and use of knowledge and skills and who function within age expectation by the time they exit or turn age three will increase.

Has the SiMR changed since the last SSIP submission?   No

If "Yes", provide an explanation for the change(s), including the role of stakeholders in decision-making. (Please limit your response to 1600 characters without space)*.*

Click or tap here to enter text.

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Progress toward the SiMR

Please provide the data for the specific FFY listed below (expressed as actual number and percentages)*.*

Baseline Data: 31.9%

Has the SiMR target changed since the last SSIP submission?   No

FFY 2018 Target: 34.0%   **FFY 2019 Target**: 34.0%

FFY 2018 Data: 32.4%   **FFY 2019 Data:**   29.70%

Was the State's FFY 2019 Target Met?   No

Did slippage[1] occur? Yes

If applicable, describe the reasons for slippage. (Please limit your response to 1600 characters without space).

Analysis was conducted to determine reasons for slippage between 2018-19 and 2019-20. The most significant difference was the length of time between the last ECO rating and the child's exit, which is due to the impact of the COVID-19 pandemic. TEIS collects ECO data along with ongoing progress using the AEPS assessment every six months, in conjunction with the IFSP review cycle. The most recent ECO at the time of the child's exit is used as their exit ECO. TEIS suspended face-to-face visits with families on March 16 and switched to teleconference service delivery format. AEPS assessments/ECO ratings resumed late May 2020 for families who could participate in teleconference. However, this resulted in delays in obtaining ECO ratings for children. While there were some children with missing records due to COVID, the most notable difference is the length of time between the child's most recent ECO rating and their exit. In 2018-19, there were 192 children with ECO greater than 183 days (six months) at exit. This number is comparable to 2017-18, with 176. In 2019-20, TEIS had 848 children with ECO ratings greater than 183 days at exit. This means the ECO ratings do not fully capture the progress made during their time in services, resulting in slippage.

Further analysis was conducted for other reasons for slippage, comparing 2018-19 to 2019-20. There was a slight difference noted that the average length of time in the program was one month shorter. This is likely also attributable to COVID-19 and the suspension of face-to-face visits as the months of April-May 2020 showed an average age at exit one to two months lower than the typical monthly averages. Some families opted to voluntarily withdraw from TEIS due to the circumstances at that time, which meant children had less time to demonstrate progress. The month of June shows that the average age at exit was returning to pre-COVID level.

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[1] The definition of slippage: *A worsening from the previous data AND a failure to meet the target.* The worsening also needs to meet certain thresholds to be considered slippage:
  1. For a "large" percentage (10% or above), it is considered slippage if the worsening is more than 1.0 percentage point. For example:
      a.   It is not slippage if the FFY 2019 data for Indicator X are 32% and the FFY 2018 data were 32.9%.
      b.   It is slippage if the FFY 2019 data for Indicator X are 32% and the FFY 2018 data were 33.1%.
  2. For a "small" percentage (less than 10%), it is considered slippage if the worsening is more than 0.1 percentage point. For example:
      a.   It is not slippage if the FFY 2019 data for Indicator Y are 5.1% and the FFY 2018 data were 5%.
      b.   It is slippage if the FFY 2019 data for Indicator Y are 5.1% and the FFY 2018 data were 4.9%.

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Optional: Has the State collected additional data *(i.e., benchmark, CQI, survey)* **that demonstrates progress toward the SiMR?** No

If "Yes", describe any additional data collected by the State to assess progress toward the SiMR.
(Please limit your response to 1600 characters without space)*.*

Click or tap here to enter text.

Did the State identify any provide describe of general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period?
 No

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If "Yes", describe any data quality issues specific to the SiMR data and include actions taken to address data quality concerns. (Please limit your response to 3000 characters without space).

Click or tap here to enter text.

Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? Yes

If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State's ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection. (Please limit your response to 3000 characters without space).

Face-to-face visits with families were suspended on March 16, 2020 due to the COVID-19 pandemic. This impacted the completion of AEPS assessments to collect initial and ongoing ECO data using the AEPS assessment, as this assessment is administered using a combination of parent report and direct observation. The initial Brooks Publishing recommendations for completing the AEPS using teleconference included the sharing of video, which the lead agency's legal department advised against due to privacy concerns. TEIS staff worked with a committee of EIRA directors to develop an alternative method using live teleconference. Guidance for completing AEPS assessments using this revised method was released statewide on May 19, 2020. The revised procedures for completing initial and ongoing AEPS assessments and collecting ECO data initiated in May 2020 are only for use with families who can participate in teleconference sessions as observation of the child is a requirement. Therefore, the lead agency does have missing ECO data for children due to the COVID-19 pandemic. The lead agency considered other options, such as implementing an alternative methodology for collecting the data that would not utilize the AEPS, but ultimately decided that since 2019-20 was to be the first full year with both entrance and ECO ratings collected via the AEPS, it was in the state's best interest to maintain the reliability and validitiy of the ECO data to the best of our ability. FFY 2019-20 was the fourth full year of early childhood outcomes (ECO) data collection utilizing the AEPS for both ECO entrance and exit ratings and the first full year in which all records where ECO was collected using previous methods were filtered out of the system.

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Section B: Phase III Implementation, Analysis and Evaluation

Is the State's theory of action new or revised since the previous submission?   No

If "Yes", please provide a description of the changes and updates to the theory of action (Please limit your response to 1600 characters without space).
Click or tap here to enter text.

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Did the State implement any <u>new</u> (previously or newly identified) infrastructure improvement strategies during the reporting period? Yes

If "Yes", describe each <u>new</u> (previously or newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved. (Please limit your response to 1600 characters without space)*.*

On July 1, 2020, TEIS finalized the transition from the Department of Education to the Department of Intellectual and Developmental Disabilities. A restructuring of the central office was completed with the transition, which included the hiring of a third director position, the director of data and operations. The outcomes for this restructuring are to streamline communication, develop an ongoing data and reporting plan, and revamp the monitoring system to better utilize personnel resources.

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Provide a summary of each infrastructure improvement strategy that the State <u>continued</u> to implement in the reporting period, including the short-term or intermediate outcomes achieved (Please limit your response to 3000 characters without space).

TEIS continued to focus on reducing service coordinator (SC) caseloads through hiring of additional positions granted by the legislature. The total number of SC positions in 2019-20 SSIP report was 141. Current number is 179. There was coordination between the Department of Education (DOE) and the Department of Intellectual and Developmental Disabilities (DIDD) to distribute and hire 38 new SC positions prior to TEIS's transition. DIDD worked with DOE to conduct an analysis of need and plan for distribution of positions across districts. The hiring occurred last spring, prior to a state hiring freeze was implemented due to COVID-19.

As a result of this effort, TEIS has seen some improvement in the average SC caseload, which was 87 in 2019-20. The YTD average caseload for 2020-21 is 78, which is elevated due to attrition during the hiring freeze when vacancies could not be replaced. The hiring freeze has been lifted, and TEIS is currently in the process of replacing staff. If fully staffed and staff were fully trained with a full caseload, the TEIS average caseloads would be approximately 64.

During the past year, TEIS suspended face-to-face service coordination visits between TEIS SCs and families due to COVID-19. As a result, TEIS SCs have been delivering services to families remotely. The technological advancements, such as electronic signature, teleconference case management visits, and electronic record-keeping systems offer new opportunities for flexibility in SC and district operations in the future. This flexibility, combined with hiring of vacant positions, could make the work of SCs more efficient, and allow them to see more families. The impact of these changes to productivity will need to be evaluated on their own merits—outside of the COVID-19 pandemic—once regular operations resume.

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Provide a description of how the State evaluated outcomes for each improvement strategy and how the evaluation data supports the decision to continue implementing the strategy. (Please limit your response to 3000 characters without space):

TEIS Data and Operations Team maintains a monthly snapshot of variables, including monthly and YTD SC caseloads. The snapshot data was used for this strategy. Unfortunately, the past year does not present the best opportunity for analysis of the strategy and comparison to past data due to the impact of the COVID-19 pandemic as services were not delivered in a similar method as prevously.

In March 2020, TEIS suspended face-to-face visits with families. In April 2020, a state hiring freeze was implemented, TEIS SCs began completing targeted case managemet visits via teleconference, electronic and alternate signature options were implemented, and TEIS began using an alternate tool for eligiblity evaluations that could be completed remotely. In May 2020, TEIS provided guidance for completing AEPS assessments using teleconference. As of the writing of this report, all of these changes are still in effect.

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Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period. (Please limit your response to 3000 characters without space)**:**

The next steps for infrastructure improvement include continuing to monitor the service coordinator caseloads as well as analyze district needs post-COVID when TEIS returns to face-to-face visits. The technological advances, that were implemented in an emergency basis that allowed for remote service delivery are likely to continue to be viable option but would need to reassess these in a blended model of face-to-face and remote service delivery.

Additonal next steps for infrastructure improvement are to revamp TEIS monitoring procedures to allow for increased focused monitoring activities. TEIS data and operations director and part C monitorign coordinator are currently working with technical assistance providers to develop plans for this revised approach.

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Did the State implement any <u>new</u> (previously or newly identified) evidence-based practices?   No

If "Yes", describe the selection process for the <u>new</u> (previously or newly identified) evidence-based practices. (Please limit your response to 1600 characters without space):

Click or tap here to enter text.

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Provide a summary of the <u>continued</u> evidence-based practices and how the evidence-based practices are intended to impact the SiMR. (Please limit your response to 1600 characters without space):

The four continued improvement strategies are as follows:

Eligibility Procedures-eliminate barriers preventing eligible children from accessing TEIS services. This impacts the SIMR by maximizing potential time for services. Work on this activity this year primarily focused on ensuring services continued during the COVID-19 pandemic and pivoting quickly to a revised method of initial eligibility evaluation that could be delivered remotely, provided accurate results, could be implemented with families without teleconference capability, and did not require families to have specific toys/equipment.

IFSP Team Function-establish clear expectations for role of team members, which impacts the SIMR by providing a coordinated approach to service delivery. Work on this activity this year focused primarily on pivoting to teleconference service delivery and ensuring ongoing communication with families and between team members.

Family-Centered Services-implement Family-Guided Routines Based (FGRBI) model of service delivery, which impacts the SIMR by ensuring services are delivered in alignment with an evidence-based model that focuses on family needs, routines, and natural environments. Work on FGRBI implementation this year included revising the fidelity checklist used by EIRAs to include the description of the measurement, training for TEIS point of entry staff, and development of the new developmental therapy contract process under DIDD.

ECO Data: improve collection, accuracy, and quality of child outcomes data, which impacts the SIMR by ensuring the outcomes data is valid and reliable. Work on this activity this year included development of an alternative method for data collection that could be completed via teleconference, implementation of quarterly reporting to the DIDD Commissioner, and root cause analysis of trends in data.

Describe the data collected to evaluate and monitor fidelity of implementation and to assess practice change. (Please limit your response to 1600 characters without space)*:*

Data collection for each strategy is described below. Challenges with current data analysis/reporting and comparing current data to previous years exist all four improvement strategies in the past year due to the suspension of face-to-face services during COVID-19 pandemic and the pivot to teleconference services.

Eligibility Procedures: data collection includes monthly analysis of referrals, number and percent of eligibility, ineligibility, and family decline by district, number resulting in IFSPs, and average age at referral, average length of time from referral to eligibility.

IFSP Team Function: monthly reporting/analysis of developmental therapy visits that were co-visits with other providers. An example of the challenges of this strategy in the COVID-19 service delivery environment was evident in the data. In some instances, there were dramatic increases in the percentage of co-visits for providers. Inquiry into this revealed it was due in some part to teleconference fatigue from families.

Family-Centered Services: quarterly staff observations and service log reviews by early interventionists entered into online checklists and reviewed by TEIS direct services coordinators. Challenges with data collection and review for this measure over the past year related to teleconference were that families have

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been requesting visits that are shorter or less frequent than what would be typical in a face-to-face home setting. A survey was completed with families related to their experiences with teleconference services.

ECO Data: annual APR data reporting, quarterly data reporting, monthly missing data review/follow-up, and in-depth analysis of ECO at POE and EIRA levels. Challenges with ECO data during COVID were described in the slippage section.

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Describe the components (professional development activities, policies/procedures revisions, and/or practices, etc.) implemented during the reporting period to support the knowledge and use of selected evidence-based practices. (Please limit your response to 1600 characters without space):

TEIS POE and EIRA meetings were used to develop district plans to promote improved IFSP team function. Direct services coordinators (DSCs) facilitated the implementation of this work by verifying the completion of plan steps developed. DSCs provided information and guidance to EIRAs regarding how to include POE staff in meetings provided via telehealth so IFSP teams could continue to meet during the pandemic. DIDD and DOE worked jointly on guidance for TEIS staff on using teleconference and electronic signature. TEIS coordinated with EIRAs to develop protocols for the administration of the AEPS ongoing assessment via teleconference.

Activities specific to FGRBI implementation included: training sessions for TEIS staff, and guidance from DSCs to TEIS leadership and personnel about the FGRBI approach for TEIS service delivery. Service coordinator observations were conducted by quality improvement team to determine next steps for TEIS family assessment as it relates to FGRBI model and used to decide to move forward with AEPS family report as sole family assessment. Joint quarterly training was provided to EIRA directors and POE leadership on FGRBI and TEIDS documentation as it related to service delivery. DSCs provided ongoing training and technical assistance to the field through attendance at LICC meetings, EIRA and POE staff meetings, and by providing specific trainings on request.

In addition, TEIS QIT and DSCs provided numerous training sessions, individualized TA services, and resources to POEs and EIRAs on the use of teleintervention with families. Survey of 227 families' perception of services provided by TEIS through teleintervention; results shared with EIRA and POE leadership at an office hours call to help improve implementation of teleconference services.

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Section C: Stakeholder Engagement

Describe the specific strategies implemented to engage stakeholders in key improvement efforts.
(Please limit your response to 3000 characters without space):

With the transition to DIDD and the COVID-19 pandemic, TEIS worked to ensure stakeholders were engaged in an ongoing and open dialogue. Commissioner Turner has office hours with providers and with employees every other week. During the transition, TEIS implemented office hour calls with providers, which began as two weekly calls, one for EIRAs and one for vendors in March 2020. Eventually as things stabilized, the need for calls with vendors declined. The calls continue with EIRAs but are now twice a month. The TEIS newsletter also switched from a monthly to twice monthly format, and the number of subscribers has increased over the past year. Informational webinars for families were completed upon the transition to DIDD. The TEIS public information officer strives to ensure that TEIS has a strong and positive social media presence.

SICC meetings continued in a teleconference format, but in addition to regular meetings, SICC members were involved in providing guidance to TEIS leadership for the parameters for a safe return to face-to-face service delivery as well as in scoring the applications for developmental therapy contracts as part of the new process for awarding contracts under DIDD. FGRBI implementation was a component of the scope of services for the developmental therapy contract.

The three TEIS review committees that were established in 2015-16 were disbanded in May 2020, just prior to the transition to DIDD, in favor of more formal committees. Since transition, DIDD has implemented two advisory groups—EIRA and vendor.

In addition to the stakeholder committees, throughout 2019-20 TEIS has utilized stakeholder input from the Tennessee Chapter of the American Academy of Pediatrics (TNAAP) in supporting eligibility procedures. In December 2019, TNAAP worked with TEIS to form a committee of stakeholders, consisting of pediatricians, neonatologists, and other experts to provide input for expanding the TEIS diagnosis list for children with prenatal drug exposure. In March 2020, TNAAP pediatricians helped TEIS to develop an alternative method for eligibility evaluation that could be delivered remotely utilizing materials the parent would likely have in their homes. The pediatricians delivered the training to TEIS evaluators statewide and have been available to support any ongoing follow-up needed.

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Were there any concerns expressed by stakeholders during engagement activities? Yes

If "Yes", describe how the State addressed the concerns expressed by stakeholders. (Please limit your response to 1600 characters without space)*:*

The COVID-19 pandemic, the suspension of face-to-face services, and the transition of lead agency brought up a number of questions and concerns from stakeholders. Open and transparent communication and responsiveness have been the methods employed for addressing these questions during an unprecedented year. All questions, answers, guidance, and communication related to COVID-19 were recorded in a single document and can be found on the DIDD website.

Stakeholder feedback from the past developmental therapy contract process was utilized in the development of the process currently being used to award contracts that will be effective July 2021. This process includes having external reviewers (SICC members) score applications.

The formation of the EIRA and vendor committees included a formal structure with a chairperson and publicly posted minutes of meetings. This structure allows for open communication and for others in the field to contact their representatives with any questions or concerns they may have.

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If applicable, describe the action(s) that the State implemented to address any FFY 2018 SPP/APR required OSEP response. (Please limit your response to 3000 characters without space):

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