

INDICATOR 11 – STATE SYSTEMIC IMPROVEMENT PLAN

MONITORING PRIORITY – GENERAL SUPERVISION

INDICATOR: The State’s SPP/APR includes a State Systemic Improvement Plan that meets the requirements set forth for this indicator.

MEASUREMENT: The State’s SPP/APR includes a comprehensive, multi-year State Systemic Improvement Plan, focused on improving results for infants and toddlers with disabilities and their families, that includes the following components, as further defined below:

Phase I (which the State must include with its 2015 submission of its SPP/APR for FFY 2013):

- a. Data Analysis;
- b. Identification of the Focus for Improvement;
- c. Infrastructure to Support Improvement and Build Capacity; and
- d. Theory of Action;

Phase II (which, in addition to the Phase 1 content outlined above, the State must include with its 2016 submission of its SPP/APR for FFY 2014):

- e. Infrastructure Development;
- f. Support for LEA Implementation of Evidence-Based Practices; and
- g. Evaluation Plan.

Phase III (which, in addition to the Phase I and Phase II content outlined above, the State must include with its 2017 submission of its SPP/APR for FFY 2015, its 2018 submission of its SPP/APR for FFY 2016, its 2019 submission of its SPP/APR for FFY 2017, and its 2020 submission of its SPP/APR for FFY 2018):

- h. Results of Ongoing Evaluation and Revisions to the SPP.

The State’s SPP must include a State Systemic Improvement Plan (SSIP) that is a comprehensive, ambitious yet achievable plan for improving results for infants and toddlers with disabilities. The SSIP must be a multi-year plan that the State develops in the two phases described below. The basis for this plan is a detailed data and infrastructure analysis that will guide the development of the strategies to increase the State’s capacity to structure and lead meaningful change in early intervention service (EIS) programs and providers. In order to improve results, States must assess the capacity of their current infrastructure systems and their ability to enhance this infrastructure to increase the capacity of EIS programs and providers to implement, scale up, and sustain evidence-based practices that will result in improved outcomes for infants and toddlers with disabilities and their families. The data and infrastructure analysis should use multiple data sources, including SPP/APR indicators and 618 State-reported data, to identify systemic approaches that will lead to improved results for infants and toddlers with disabilities and their families across key measures: early childhood outcomes and family involvement.

Phase I must focus on: 1) the collection and analysis of data and other information, and 2) the identification of evidence-based practices. Phase II is an implementation plan to: 1) enhance and/or build the State’s infrastructure, and 2) support the implementation of evidence-based practices to improve results for infants and toddlers with disabilities and their families.

For a suggested format and the evaluation criteria see www.WEBLINK.

Phase I:

The SSIP submitted by States in the FFY 2013 SPP/APR, due February 2, 2015, must include detailed descriptions of these four key areas:

- a. Data Analysis: A description of how the State identified and analyzed key data, including data from SPP/APR indicators, to determine the areas for improvement. The description must include information about how the data were disaggregated in order to identify areas for improvement. In addition, the description must include any concerns about the quality of the data and how the State

will address this, as well as methods and timelines to collect additional data that may be needed to inform areas for improvement. As part of its data analysis, the State should determine if there are any compliance issues that present barriers to achieving improved results for students with disabilities.

- b. Identification of the Focus for Improvement: A description of improvement strategies on which the State will focus that will lead to a measurable child-based result. The State must include in the description how the data analysis led to the identification of the area on which the State will focus. The State must demonstrate how addressing this area of focus for improvement will build the capacity of EIS programs and providers and supports to improve the identified result for infants and toddlers and their families with disabilities. (For example, the State might be working to improve the validity and representativeness of their data on early childhood outcomes and family involvement.)
- c. Infrastructure to Support Improvement and Build Capacity: A description of how the State analyzed the capacity of its current system to support improvement and build capacity in EIS programs and providers to implement, scale up, and sustain evidence-based practices to improve results for infants and toddlers with disabilities and their families, and the results of this analysis. State system components include: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability. The description must include the strengths of the system, how components of the system are coordinated, and areas for improvement within and across components of the system. The description must also include an analysis of initiatives in the State, including early childhood initiatives within the State's lead agency for Part C and other early childhood initiatives, which can have an impact on infants and toddlers and their families with disabilities. The State must include in the description how decisions are made within the State system and the representatives (e.g., agencies, positions, individuals) that must be involved in planning for systematic improvements in the State system.
- d. Theory of Action: Based on the data analysis and infrastructure analysis, the State must describe the general improvement strategies that will need to be carried out and the outcomes that will need to be met to achieve the State-identified, measurable improvement in results for infants and toddlers and their families with disabilities. The State must include in the description the changes in the State system, and EIS program and provider practices, that must occur to achieve the State-identified, measurable improvement in results for infants and toddlers with disabilities and their families. States should consider developing a logic model that shows the relationship between the activities and the outcomes that the State expects to achieve over a multi-year period.

Phase II:

The multi-year plan submitted by the State in the FFY 2014 SPP/APR, due no later than February 1, 2016, must, in addition to the content described above for Phase I, include the steps needed to implement the SSIP, including identification of the improvement strategies, mechanisms and resources for implementing the improvement activities, and the timelines for beginning and completing the improvement strategies. Finally, ongoing formative evaluation must be addressed so the plan can be adjusted as necessary. In addition to submitting the items below, the State may also amend previously submitted information to improve its accuracy.

- e. Infrastructure Development: The SSIP must include a plan to implement needed State system improvements to enable the State to build the capacity of EIS programs and providers to implement and scale-up evidence-based practices to advance the State-identified, measurable improvement in results for infants and toddlers with disabilities and their families. The plan must include how the State will align its improvement work with other early childhood initiatives within the State's lead agency for Part C and initiatives that are implemented by agencies other than the lead agency, which can have an impact on infants and toddlers with disabilities and their families, and leverage resources from these initiatives. The plan must also include improvement activities that will be taken, who will implement the activities and the resources that will be used to implement them, how the expected outcomes of these activities will be measured, and timelines for completing the activities.
- f. Support for Implementation of Evidence-Based Practices by EIS programs and providers: The SSIP must include a plan to support EIS programs and providers in identifying and implementing the evidence-based practices that will result in changes in EIS program and provider practice to improve

in the State-identified, measurable improvement in results for infants and toddlers. The plan must describe how the State will align its support for EIS programs and providers with other initiatives in the State, and leverage resources from these initiatives. The plan must also include activities that will be taken, who will implement the activities and the resources that will be used to implement them, how the expected outcomes of these activities will be measured, and timelines for completing the activities. The State must include in the plan how the State will support EIS programs and providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

- g. Evaluation Plan: A description of how the State will evaluate the implementation of its SSIP. The plan must include the methods that will be used to collect and analyze data related to specific activities and outcomes of the SSIP. The description must also include how the State will use the results of the evaluation to examine the effectiveness of the implementation of the plan and the progress toward achieving intended outcomes, and make modifications to the SSIP as necessary.

Phase III:

The results of its ongoing evaluation of the strategies included in the SSIP, including the extent to which the State has implemented them, the extent to which the State has made progress toward and/or met the established goals, and any revisions the State has made in the SSIP in response to its evaluation.

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