



Attendees

Karen Ruprecht, Karen Carradine, Cynthia Smith, Carrie Higgins, Melissa Wall, Adam VanOsdol, Megan Purcell, Michael Conn-Powers, Christine Garza, John Peirce, Kerri Wortinger, Amanda Lopez, Kristi Linson, Dorothea Irwin

Key Topics Discussed

A. ELAC Updates

- a. The Early Learning Advisory Committee (ELAC) will meet in June to discuss the focus of ELAC and guidance to provide workgroups until a chair is appointed by the Governor.

B. Continuous Quality Improvement (CQI): Panel Presentation

- a. Carrie Higgins – MIECHV
 - i. The Maternal Infant and Early Childhood Home Visiting program (MIECHV) had a long standing quality assurance program with Healthy Families, and quality improvement was a part of that system, but the focus was mostly on meeting the standards. They looked to implement a PDSA (plan do study act) program. The introduction of it was met with a wide range of responses including skepticism, concern of time, and some excitement. It was introduced in a way to get those feelings out in the open.
 - ii. MIECHV invited the Michigan Public Health Institute to get continuous quality improvement (CQI) efforts started in Indiana in 2014. The Michigan Public Health Institute assisted in the planning and development phase of the PDSA cycle. They have also assisted in established education and a train the trainer approach so that experts could be developed internally. Long term MIECHV wants to make sure those who were participating in train the trainer are also collaborating with each other. One way they do this is by presenting on CQI locally and nationally.
 - iii. Karen: When did you start this quality improvement (QI) initiative?
 1. Carrie: It was a requirement of federal grant and MIECHV. This requirement started in 2013. Looking into what needed to be done, could we do it ourselves, to train folks in methodology. Allowed local agencies to decide what projects they wanted to focus on. Would allow folks to think of CQI as a regular part of the culture rather than a project to check off the list.
 - iv. Amanda: Have you seen any changes in outcomes since programs are implementing these cycles?



1. Carrie: There are projects that have produced positive outcomes, and there are some that did not. All projects taught teams how to work with data and look at consequences of projects. One project set a goal of 25% increase in parent engagement and achieved 100% improvement. Other teams have learned that an impact may take a while to appear, as one team in particular continued to track the data, they found that what appeared to be a negative outcome at the end of 3-month project was actually positive after a year. That the program had made an impact.
- v. Amanda: Are you expanding to all Healthy Family program sites or just the ones funded by MIECHV?
 1. Carrie: The focus is on our 9 sites that receive MIECHV funding, but the CQI is not just impacting MIECHV families at those sites. Starting to open training and information outside the program.
 2. Cynthia: There is a bleed over effect into all Healthy Families workers and families impacted by those projects. While it is not hitting all 92 counties currently, the results are being shared with all. Also, the CQI training is open to others such as nurse-family partnership and home visiting services. Institute classes are open to all institute participants.
- vi. Karen: Doesn't see CQI as embraced in early childhood education (ECE) as it is in healthcare settings or MIECHV.
 1. Michael: Agrees. ECE is not as far along as special education and healthcare.
- vii. John: Has heard that training is not enough but helping them onsite and follow up is what makes the difference in these efforts being successful.
 1. Carrie: It depends on how well the company embraces it. MIECHV had several CQI champions that took it back and trained their teams and pushed it forward. Others need more. Overall, doesn't think it's helpful to just train and leave them. They try to inject additional tools, resources, and training.
- b. Michael – First Steps and Indiana Department of Education (IDOE) – (Preschool and Special Education)
 - i. Reason for implementing CQI: Compliance doesn't bring about outcomes, and agencies need to get more serious about improving outcomes.
 - ii. First Steps and IDOE are members of the state systemic improvement plan guided by the National Implementation Research Network (NIRN). These groups are helping with systems change and continuous quality improvement, and PDSA is a part of that.



- iii. First Steps is looking at outcomes and finding discrepancies by race. In the education world, they are seeing similar inequities.
- iv. IDOE is implementing a systems approach with local school districts and what they're doing with preschoolers with disabilities. As a state, Indiana does well showing high impact, but it is failing at providing preschoolers with disabilities inclusive services.
- v. Three requirements for their CQI approach:
 - 1. Effective practices (identify practices that research shows clearly have an impact);
 - 2. Supporting effective implementation and professional development; and
 - 3. Enabling context.
- vi. Looking at a model that requires partnerships in how to provide services by bringing together a local implementation team (administrative types who can make decisions). On Marion's team is the director of early childhood programs, special education administrators, and teachers. Then provide them a roadmap of ideas that the local implementation team decides how to implement.
- vii. Professional development is often one and done experiences and conferences. We know those don't work and need to have good professional development including follow up with intensive coaching.
- viii. This program involves working with individual teachers on practice-based coaching. IU will observe, compile data, debrief with teacher, and identify what needs to happen next time and what to improve upon. This type of program is intense and expensive. Research shows we don't see change unless we invest.
- ix. Enabling context – As others have said (during the panel), CQI must become part of culture.
 - 1. IDOE: Special education and general education merged together with the passing of ESSA, created multi-tier systems of support.
 - 2. Models that effect change statewide – starting small and then adding and building across the state (5-year process) for First Steps and Interagency Coordinating Council (ICC).
- x. John: What is the impact on the general education children? Are you measuring that as well?
 - 1. Michael: That's a good idea. Bottom tier of the multi-tier approach is always a solid early education foundation. Bottom tier hits most kids, then next tier are for those who need additional supports (which introduces all teachers to what does extra help look like in the general education classes), and the third tier



- requires “heavy duty” special education tools for behavior and development issues but these are brought into the general education classroom. Directly and indirectly everyone benefits.
- xi. Amanda: What are you doing with best practices you found from those high impact and high inclusion classrooms?
 - 1. Michael: We have given 3 presentations, primarily targeted to special education folks, and did a webinar series (for both general education and special education professionals). We have also produced a report which presents our theory of change and provides recommended practices.
 - a. Haven’t talked about what they’re going to do this year besides the intensive coaching.
 - xii. Amanda: How do we include these practices from the start as more classes open with OMW Pre-K? Systems building.
 - 1. Michael: We did make available data dashboards to school districts that requested them. It provided numbers, impact, and a scatter plot with percentage of kids included (inclusive services) on one axis and those with high impact on other.
 - xiii. Kerri: Partnering with IU, all staff are getting the training (not just inclusion classes), learning about disability awareness. We’ve mapped out all of the different trainings (and some are grant requirements) that IU will do. So far we’ve had great feedback from families and special needs students excited about being with general education. We have removed the special education preschool classroom label.
 - 1. All students are getting measured on CLI (old MCLASS) helping those who are identified now but also those who could be identified in the future. We’re creating those support pieces among all staff.
 - xiv. Amanda: Blending and braiding funding (issue of ELAC) – doesn’t know if anyone is tracking the funding implications but could also have lessons learned.
 - 1. John: We have broached this topic with all groups, but each district is different.
 - 2. Kerri: We have the ability to blend funds, and we are braiding Title I and Special education. As this model is pushed out to the other elementaries, we’ll partner with Head Start. Blending and braiding of funds helps grant dollars stretch further.
 - c. Dorothea – Head Start
 - i. (Assistant Superintendent for Elementary and Early Childhood for Kokomo School Corporation)



- ii. Kokomo has multiple ways to provide preschool. Head Start was a great model for creating Title I preschools (for those who couldn't be served due to financial reasons with Head Start). They recently received an early capacity grant from Lilly, and are now an On My Way Pre-K county which opens up full-day programming at no cost to the parents.
 - iii. Discussing quality review: Head Start does lots of reviewing and reflecting on their own programming and how that works. They receive many visitors for Paths to Quality (PTQ) and are subject to a lot of outside evaluation.
 - iv. Head Start has served as a model to the public school system and how they have worked with PTQ.
 - v. Head Start goes fewer days (160 days) than public schools because of increased requirements for professional development.
 - vi. Head Start teachers are on the master contract at Kokomo – under Kokomo School Corporation.
 - vii. Head Start doesn't use ISTAR-KR, but Kokomo Public Schools does.
- d. Christine Garza – Early Learning Indiana
- i. Early Learning Indiana (ELI) took on continuous quality improvement because they were required to. They took the Early Head Start (EHS) model and are applying it to child care.
 - ii. ELI is focused on collecting data and helping child care systems come along with us. This process took time and relationship building.
 - a. Started with one instruction/curriculum coach and soon needed a second. Program staff turnover was once as high as 43%. It has since gotten better and leveled off. They believe this was due to the intensive coaching provided to help with the new intensive quality improvement work they needed to do.
 - iii. ELI is working on scaffolding and side by side coaching and utilizing observation and data collection. Trying to get ELI staff to love our data work as much as we need teachers to do.
 - a. Identifying metrics, we could track to show we're meeting those goals was key to taking the next step beyond data collection.
 - b. Getting all of her content areas to look at their data, identified a monitoring process and timeline and when to course correct
 - iv. When implementing CQI, they had to decide how they wanted to do it before rolling it out. Fully implementing the process takes time. They are 3 years in and are just starting to see fruits of their labor.



- v. Coaching also takes time for relationship building.
- e. Karen Carradine
 - i. Can certainly echo what Christine has shared about coaching.
 - ii. Professional development through coaching is a cure all for things that need help. (it's that important!)
- f. Other Thoughts
 - i. Co-chairs: Perhaps this is a topic we pursue as a workgroup. This is a hole in ECE and our workgroup could help fill that hole. Revisit in fall once ELAC trajectory is decided and ACEs work is winding down.
 - a. Amanda: The workgroup discussion today discussed system building and implementing CQI. This could be something to lift up to ELAC and perhaps include in annual report.

C. Adverse Childhood Experiences (ACEs) White Paper

- a. Communities have been identified and interviews are being scheduled to highlight the work communities are doing on ACEs.

Action Items

1. TCG will be interviewing communities on their work with ACEs.
2. Megan will work on communications plan draft.

Next Meeting

Friday, June 22, 2018 | 10:00am-12:00pm | Video Call