## Outcome:
Cluster B will meet the target of serving 1.4% of children ages birth to 1.

| So that: | early intervention services are reaching the children and families that need those services early enough to achieve the maximum impact. |

## Strategy update from last quarter:
The SPOE Director created a spreadsheet and tracked all closed files where an intake meeting did not occur. The information collected was referral source, reason for referral, child age, ID number, zip code, county, Intake Coordinator and the reason record was closed from case notes. We presented this information to the Data Committee on May 13, 2014. It appears that many of the NICU babies that are referred are not having an intake meeting even when there are numerous attempts by the Intake Coordinator to contact them. The Committee needs more data to confirm this trend so; the Director will continue to track this information for another quarter.

## Explanation of Data:
Quarterly Data 120/9183, (1.31%)
According to the child count that we ran using 4/1/14, our number is now at 1.31% and we have slipped from 122 to 120 children under 1. We are seeing a trend in our data that the NICU babies do not want First Steps services when they first arrive home from the NICU. The Director will continue to track this data for another quarter to ensure that we have enough data to confirm this trend.

## Strategies (Who is responsible/timeline/evaluation):
If our hypothesis is that we are receiving an appropriate number of referrals for children 10 months and younger but, we are unable to schedule an intake meeting with families, then we need to continue to collect the data on closed files for another quarter to identify any trends. The Intake Supervisor will train staff to place all non-responsive NICU referrals in a tickler file and contact them again in 2-3 months if they have not already been re-referred. The LPCC will draft a letter to physicians that explains the importance of early intervention and contains data that shows the percentage of children who receive First Steps services and do not need service in the school system.

## List barriers to accomplishing strategies and how to address them:
It appears that many families of NICU babies are not eager to start services when they first arrive home from the NICU. To address this staff will make numerous attempts to contact these families and if they are unsuccessful, the files will be placed in a tickler system and the families will be re-contacted. The LPCC will also draft a letter to the physicians so, that they can also talk to the families about the benefits of early intervention.

## Resources needed:
- State Clarification
- IIDC
- Training
- Mentoring
- Other: ____________________________________

## Explain:
We would like to see how other clusters are achieving this outcome.
## Stakeholder Collaboration:

We met with our Child Find / Data Committee in May and discussed this indicator. We brainstormed the different reasons that we are not reaching our target. The Committee felt like we needed to collect more data but, agrees that referral numbers for children 10 months and younger does not appear to be the problem.