

<p>Outcome: Cluster C will meet their target for serving 1.4% of the birth to 1 year population</p>	<p>So that: families and children can benefit from early intervention services and attempt to minimize potential developmental delays.</p>
<p>Explanation of Data: Quarterly Data:</p> <p>Cluster C did not make target for this indicator. We are currently at 1.31%/107.</p> <p>Comparing the One-Day Count w/ IFSP – 0 to 1 year-old data from the Profile Reports for the reporting periods for 4/1/2013 to 3/31/2014 and for 10/1/2013 to 9/30/2014 in the counties we serve we found that all of the counties with the exception of Allen County have increased or stayed the same.</p>	<p>Strategies(Who is responsible/timeline/evaluation):</p> <ul style="list-style-type: none"> • In October 2014 Cluster C assigned an Intake Coordinator to the NICU’s within the Cluster. <ul style="list-style-type: none"> ○ Intake Coordinator is visiting hospitals on a weekly basis. She is following up with families who don’t initially qualify but may possibly need services in the next 3 months. • In January 2015 LPCC Coordinator reached out to physicians who serve our counties by faxing Cluster C’s contact information and a referral form. Several physicians contacted the LPCC Coordinator and requested a First Steps presentation. LPCC Coordinator has visited one physician’s office and has more visits scheduled. • December 2014 Oversight Meeting/Child Find Meeting – Community agencies will be targeted on a quarterly basis by the Child find Committee. This will allow us to ensure that we cover all the agencies that serve the 0 to 1 population. • Evaluation – Cluster C has seen an increase in referrals for the population 0 to 1.
<p>List barriers to accomplishing strategies and how to address them:</p> <ul style="list-style-type: none"> • At times, parents with children in the NICU might feel overwhelmed and do not want to pursue services immediately in hopes that their child will not need early intervention services. Our Intake Coordinator is working closely with these families and the NICU’s Social Workers; she’s a consistent presence on the NICU floors at the hospitals. 	

FFY13

Indiana First Steps Quality Improvement Plan

Cluster: C

Quarter Date: 10/1/14-12/31/14

Indicator: 5

Birth to 1 years with IFSP

First Quarter QIP

Resources needed:

State Clarification IIDC Training Mentoring Other: _____ Internal Training _____

Explain:

Presentations on all of the positive benefits on early intervention services and how First Steps not only helps the children but the families as well.

Stakeholder Collaboration:

December 2014 Oversight Meeting/Child Find Meeting – Community agencies will be targeted on a quarterly basis by the Child find Committee. A calendar with the agencies that will be targeted quarterly was given to all the members at this meeting.

NICU Intake Coordinator, LPCC Coordinator, SPOE Director, Coordinator Supervisor, and Oversight/Child Find Committee.