

<p><b>Outcome:</b> Cluster I will improve to 100% of infants and toddlers receiving the EI services on their IFSP in a timely manner (within 30 days).</p>	<p><b>So that:</b> children can begin receiving services in a timely manner and the family will have the tools to assist their child in achieving the outcomes written on their IFSP.</p>
<p><b>Explanation of Data:</b> Quarterly Data (41/46, 89.1 %): SPOE Supervisor pulled the files reviewed to determine why we did not meet this indicator.</p> <p>1/46 Did not have accurate information by QR team. Notes on the 6 month review sheet say “PT did not start in 30 days” The child receives DT – PT was not added</p> <p>1/46 Annual IFSP with continuation of service/no interruption was not checked on COSS by SC. However, there were no changes. SC completed COSS one month after IFSP date. QR team noted</p> <p>“30 Day start shows documentation from SC on form but looks like it was on day 31”</p> <p>1/46 Provider and family on vacation opposite weeks, delaying the start</p> <p>1/46 ST did not contact family in a timely manner to schedule and the family was on vacation.</p> <p>1/46 6MR-QR Team reported services did not start within 30 days-However, according to PAM, provider started on the 30<sup>th</sup> day. Authorization started 07/24 and ST started 08/22.</p> <p><b>The Confirmation of Start document was not always readily available in the files or did not clearly/accurately contain the information needed to determine if services started within 30 days.</b></p>	<p><b>Strategies(Who is responsible/timeline/evaluation):</b></p> <p><b><u>If the problem is documentation then we will:</u></b></p> <p>SPOE and Agencies will devise a “Documentation of Service Start date” form by March 2015.</p> <p>Cluster policy will be followed by IC/SC staff.</p> <p><i><u>Policy:</u> All EI files will contain documentation of services starting within 30 days of parent signature on the IFSP, Quarterly Review, or Service Change Page.</i></p> <p>At the next Regional Staff Meeting, February 4, 2015, IC/SC will be reminded of this policy and instructed to document all attempts in obtaining the confirmation of start and completing the form to its entirety</p> <p>If IC/SC does not have confirmation of start by the 20<sup>th</sup> day, IC/SC will contact the Agency Representative and “cc” their manager for the initial start date.</p> <p>IC/SC will submit confirmation of start documents to the manager once completed.</p> <p>SPOE will file confirmation of start documents weekly.</p>

First Quarter QIP

**List barriers to accomplishing strategies and how to address them:**

- 1) Agencies enforcing the new form
- 2) IC/SC accurately documenting all attempts and submitting the form to SPOE in a timely manner.
- 3) SPOE filing documents in a timely manner

**Resources needed:**

State Clarification     IIDC     Training     Mentoring    Other: \_\_\_\_\_

**Explain:**

**Stakeholder Collaboration:**

Agency and LLPC meeting held Nov. 11<sup>th</sup>. Discussed COSS and notification of IC/SC. Discussed use of a document previously used by an Agency in Cluster F to track/report start of services. Explained the State is revising the current confirmation of start and IC/SC will be required to document the actual start date for each provider. DSI has a google calendar which calculates 30 days – the Agency sends reminders to providers as the 30<sup>th</sup> day approaches. SPOE Supervisor emailed Agencies for feedback once QIP identified. Management Team reviewed 01-29-15.