

Research and Training Center on Service Coordination



University of Connecticut

A.J. Pappanikou Center for
Developmental Disabilities

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The Research and Training Center on Service Coordination (RTC) has just begun the fifth year of a five-year project to study early intervention service coordination. To review our complete data reports, as well as previous issues of this newsletter, please visit our website www.uconned.org/rtc/rtchome.htm.

PROJECTS HIGHLIGHTS: YEAR 1 THROUGH YEAR 4

The Research and Training Center in Service Coordination (RTC) just entered the fifth and final year of the project. During the past four years, the Center has;

- ◆ Conducted three studies on service coordination models.
- ◆ Completed focus groups and Delphi studies to identify essential outcomes of service coordination and the practices that support those outcomes.
- ◆ Engaged in in-depth interviews with family members of children in early intervention and each family's service coordinator in five focal states. Initially 80 interviews were conducted in Connecticut, Massachusetts, North Carolina, Indiana. An additional 30 interviews with traditionally under-represented families were conducted in three western states (Utah, Washington, Arizona).

- ◆ Conducted a national survey with family members and practitioners on outcomes associated with natural environments, service coordination and early intervention.
- ◆ Conducted a national survey with family members of children in early intervention on service coordination practices.

To read more about these studies, please visit our website at www.uconned.org/rtc/rtchome.htm

PROJECT ACTIVITIES

Family interview data were compared to service coordinator interview data to determine the level of agreement between families and service coordinators on key issues related to service coordination outcomes and practices. Analysis has been performed for the initial 80 family interviews and corresponding service coordinator interviews using qualitative methodology.

Responses from parents and service coordinators were identified for the questions:

1. "What would you like to see for your child/family? ", asked of families and
2. "If you were to ask this family what outcomes are important to them, what do you think they would say?", asked of the corresponding service coordinator.

The responses were reviewed and categorized under seven main outcomes previously identified through the Delphi process:

1. Children and families receive appropriate supports and services that meet their individual needs.
2. Children are healthy.
3. Children's development is enhanced.
4. Children have successful transitions.
5. Families are involved in decision-making.
6. Families are informed about resources and services.
7. People work together as a team.

Both groups identified the outcome of "children's development is enhanced" with the greatest frequency (families 43.8%, service coordinators 48.7%), followed by "receiving appropriate supports and services" (families 37.5%, service coordinators 33.4 %). The least frequent response offered by families related to "people work together as a team" (.9%). Service coordinators failed to report outcomes of "families being involved in decision-making".

Both families and service coordinators were asked to identify individuals who helped the family meet the outcomes that were important to them. Families and service coordinators acknowledged many individuals and groups as contributing to children's development, including parents/family members, service coordinators, service providers (therapists, teachers, nurses, and other personnel from Birth-to-Three agencies), doctors, and other

individuals (daycare, funding sources, child/programs other than Birth-to-Three). Family members identified a total of 964 family members and professionals that helped make the outcome happen. Service coordinators identified 988 different individuals that helped.

Both families and service coordinators identified themselves respectively as playing the primary roles in assisting children/families to achieve their desired outcomes. Families acknowledged their own involvement in 32.4% of the outcomes they cited as important and service coordinators in 20.9% of their outcomes. Service coordinators, on the other hand, identified themselves as assisting in 33.6% of family outcomes and families in 25%. Family members rated service providers second to themselves (28.6%). Service coordinators also ranked service providers as assisting in outcomes second to themselves (30%).

WHAT'S NEW

During the last quarter of year four, the RTC project team focused on analyzing data from family and service coordinator interviews. Originally, 100 interviews with families and their early intervention service coordinator were conducted in four focal states (CT, MA, NC, IN). Eighty of the interview transcriptions were available for data analysis. An additional 30 interviews were conducted by Utah State University to broaden representation and to include families from traditionally under-represented populations. Families were asked about the outcomes that were important for their family. Likewise, service coordinators were asked, "If you were to ask this family what

outcomes are important to them, what do you think they would say?" Outcomes were sorted into like categories yielding nine outcome themes for both families and service coordinators. Project investigators compared the different data sources (Delphi studies, national surveys, interviews) which yielded 8 final outcomes of service coordination outcomes. The final outcomes are:

1. Families are knowledgeable about their child's unique needs.
2. Families have the tools, knowledge and support to access resources.
3. Families acquire or maintain a quality of life that enhances their well-being.
4. Families make informed decisions about resources and supports in the community for their children.
5. Children are safe.
6. Children are healthy.
7. Children and families receive early intervention services that are individualized, coordinated, and effective.
8. Children have successful transitions.

Similarly, project staff analyzed the multiple practices associated with service coordination. Like the outcomes, these practices were sorted by independent staff members to generate the following 12 practice themes:

1. Providing Information
2. Ensuring Family Understanding
3. Being Responsive to Families
4. Developing IFSPs
5. Monitoring Progress
6. Ensuring Family Satisfaction
7. Promoting Child Development
8. Addressing Healthcare and Safety Issues
9. Completing Administrative Responsibilities
10. Planning for Transitions
11. Collaborating with Community Organizations
12. Engaging in Professional Development

WHERE DO WE GO FROM HERE?

Project staff are currently engaged in the following activities:

- ◆ Developing indicators for each of the 8 service coordination outcomes.
- ◆ Developing service coordinator competencies.
- ◆ Developing training models, pilot training, and data collection systems to measure training outcomes.
- ◆ Developing learning communities in three states.
- ◆ Disseminating findings, training materials, and other products.



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A.J. Pappanikou Center for Developmental Disabilities

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Education, Research, and Service

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