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ABSTRACT
          A project is described to develop a model system by
which local education agencies (LEAs) can form successful working
relationships with other human service providers to better serve
special education students. The models (both process and content)
designate LEAs as the central access point to the service continuum.
The project's efforts to devise procedures for interagency
collaboration focused on strategies ("recipes") for specific
problems. Strategies took the form of ecological experiments to
determine which systems components affect the child and family.
Accomplishments included development of a process to analyze federal,
state, and local programs (such as P.L. 94-142, the Education for All
Handicapped Children Act; Head Start; Medicaid; and Maternal and
Child Health) and implementation of a Delphi needs assessment polling
80 special education directors and midmanagement personnel to
determine major issues affecting the delivery of special education
and related services. A process model for identifying specific
problems and solutions at the service delivery level was used to
develop seven content models: (1) the Early Childhood Interagency
Transition Model; (2) the Adult Transition Model: Planning for
Postschool Services; (3) the Early and Periodic Screening, Diagnosis
and Treatment Model; (4) the Mental Health/LEA Collaborative Model;
(5) Concurrent Services Model; (6) the Special Education/Vocational
Education Model; and (7) Juvenile Corrections Transitional Model.
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Single Portal Intake Project

FINAL REPORT
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Introduction

The Single Portal Intake Project was funded by Special Education Programs, U.S. Department of Education under P.L. 94-142 Part E Demonstration Projects (Handicapped Children's Model Demonstration Projects). The purpose of the project was to develop a model system that local education agencies (LEAs) can use to form successful working relationships with other human service providers in order to better serve special education students. This report is an overview of the entire 3-year project, from 1980 to 1983.

The overall goal of the project was to develop a set of model procedures that LEAs can use to develop working relationships with other service providers. The model procedures include a process model and a number of content models. The process model can be used by LEAs to facilitate interaction with other agencies. It provides a systematic method for identifying shared problems and developing mutually agreeable solutions to those problems. The content models are a number of procedural models or "recipes" that give step-by-step guidance that LEAs can use to address already identified problems with specific agencies.

As originally conceived, the "Single Portal" notion was to help handicapped persons gain entry into all (or many) necessary educational, social and health programs through one point or "portal" in the service delivery system. Establishing the LEA as an entry point to other related services, was a logical corollary, given the LEA's numerous and diverse services to handicapped children, and given the expanded role of the public schools in preparing these students for independent living. The basic concept is that an individual or family in need of services should not have to "shop" from agency to agency, and that coordination of service delivery among agencies serving the same client or client group would increase the efficiency and quality of services. By determining service needs and eligibility status with regard to existing programs, a service-to-needs match could be made at one point (portal) of the service continuum.

After working with this concept, we are less sure that there can be a single portal of intake. Perhaps LEAs can best serve as a direction service or liaison. LEA leadership in coordinating and obtaining services from other agencies is a significant departure from the traditional role of public education. Nevertheless, handicapped children still require additional services in order to benefit from an educational program, services which may be provided by other agencies. The notion of a single portal is still seductive; the mechanics and a clear mandate remain illusive.

Interagency Collaboration

Following the passage of the Education for All Handicapped Children Act (PL 94-142), states and local education agencies were encouraged by their federal counterparts to develop interagency agreements with other agencies serving handicapped children. This encouragement came in the form of federal interagency agreements, memoranda of understanding, joint policy statements and other documents developed and signed by two or more agencies serving handicapped children.

The promises of interagency agreements were numerous and enticing: greater efficiency and cost savings, reductions in duplications, a way to increase available resources, enhanced services, clarification of agency roles and responsibilities, less run-around for clients, etc.

Unfortunately, "interagency agreements" and "interagency collaboration" have become buzz words that are losing their appeal due to a lack of concrete outcomes. Many hours have been consumed and solutions to difficult issues (e.g., lack of adequate funds) have been promised. To date, in our opinion, the promises of "interagency" have not been realized.

Our attempts to conceptualize "interagency" in ways that will lead to practical procedures began with our defining three types of interagency activities. If interagency is to succeed, all three types of activities must be pursued.

Type I interagency activities consist of federal or state level formal interagency agreements. These need to be established because the overlap of different agencies' mandates results in duplicate services (hence waste), a lack of funds, and major service gaps. Many social service agencies have grown without an overall plan; formal federal and state level interagency agreements can provide the top-down direction necessary to bring order and direction to a confusing situation.

Type II can best be called "grass roots interagency activities." These activities occur in a limited geographical or political region. Individuals with decision making power meet and agree to work together. Agencies and services are molded to meet the needs of consumers.

Type III (our model) is the cookbook model. A series of recipes are developed for specific problems. They are field tested, evaluated, and then disseminated to practitioners at the level where the problem or interaction exists.

Our task has been to develop recipes for real problems that are effective, easy, low cost, and as foolproof as possible. There are four key ingredients to developing a successful recipe. The first is <u>perceived need</u> by the LEA and a desire to alter current practices. In order to deal with real issues, we must listen carefully to LEA staff and understand the problems they are facing. Too often, those in planning positions develop solutions for problems that do not exist (or at least are not perceived) by the consumers of the solutions. <u>Procedures must be effective.</u> Field testing in applied settings of all procedures followed by precise evaluation must be the rule. <u>Procedures must be easy,</u> or at least possible, to implement. Procedures are preferable that require no extra money or staff, and that <u>replace</u> current activities rather than add activites. <u>Procedures must be detailed</u> enough to facilitate implementation. These ingredients should result in foolproof recipes.

We have found that there are two "natural" times when LEAs interact with other service agencies: <u>transitions</u> - times when a student either enters the school from another agency or leaves the school and enters another program; and <u>concurrent service delivery</u> - times when the school and another agency are simultaneously providing services to a student. During these natural agency intersections, LEAs are more likely to perceive a need to collaborate with another agency. Our activities have been most productive when we concentrated on instances when it is highly probable for the LEA and other agencies to interact. These are also times of increased stress and conflict for all the individuals involved (e.g., teachers, therapists, administrators, the student, and parents).

In searching for a structure that would provide us direction for our activities we were intrigued by the similarities of many of Bronfenbrenner's notions on experimental ecology (Bronfenbrenner, 1977). Although our review of his ideas occurred <u>after</u> we had stumbled on to our process, his notions do

provide a theoretical base for our work. Certainly our focus on transitions dovetails with the idea of ecological transition and the need for "investigations that go beyond the immediate setting containing the person to examine the larger contexts, both formal and informal, that affect events within the immediate setting" (Bronfenbrenner, 1977, p. 527). Clearly the movement of a child from a preschool setting to a public school setting can only be understood by examining the family, the structure of the preschool, the structure of the receiving school and the interactions between these systems. These systems, the people within the systems, the rules and regulations (formal and informal) of those systems, and the knowledge of the individuals in these systems are "the ecological circumstances and events that determine with whom and how people (children, parents) spend their time" (Bronfenbrenner 1977, p, 526).

Our goal, as stated earlier is to develop strategies that LEAs can use to develop effective working relationships with other agencies. Implicit in this goal is that the outcome of these effective working relationships will enhance the ability of special education programs to accomplish their goals and produce desired outcomes. Therefore, on a larger scale, we are confronted with a crucial problem within the field of special education; what are the desired outcomes of special education; what do we, what does society, expect to happen because of special education? This question is of critical importance to all our activities. Our answer, summarized, is that there are several desired outcomes; 1) improved skills performance by the child, 2) increased quality of life (better jobs, more appropriate living arrangements), 3) receipt of needed services, 4) feeling of satisfaction, by the student, but also by the family and the service providers. In Bronfenbrenner's words, "the progressive accommodation between the growing human organism and its environment" (Bronfenbrenner, 1977, p. 517).

So, our activities fall into the general class of ecological experiments. We are not so much conducting intervention research but rather attempting to discover what system components make a difference in the lives of children with disabilities. We are attempting to understand these systems and their interrelationships with each other and the child (and of course the family) by following Professor Dearborn's advice to Urie Bronfenbrenner "if you want to understand something, try to change it" (Bronfenbrenner, 1977, p. 517).

Accomplishments

Assessing Present Systems

Program analyses. The first task during Year 1 was to develop a process for analyzing federal, state and local programs. Federal and state data collection worksheets were completed for the following targeted programs: PL-94-142; Early and Periodic Screening, Diagnosis and Treatment (EPSDT); Medicaid; Head Start; Crippled Children's Services (CCS); Maternal and Child Health (MCH)); Supplemental Security Income (SSI); Community Mental Health Centers (CMHC); Title I of the ESEA; Intermediate Care Facilities for the Mentally Retarded (ICF-MR); the Disabled Children's Program; Vocational Education; Vocational Rehabilitation; and Developmental Disabilities.

Delphi needs assessment. A Delphi needs assessment was conducted which polled about 80 special education directors and mid-management personnel in the state of Washington over a 5-month period. Participants were asked to identify their major anticipated problems in delivering special education and related services over the next few years. An average 73% return rate over the four rounds of the survey and an N of 80 resulted in a rather large data base which was used to guide the activities of the Single Portal Intake Project. The data were also used by the Washington State education agency to plan state inservice training and establish discretionary grants priorities.

Five major issues that affect the delivery of special education and related services were identified through the survey: inadequate funding; relationships between regular education and special education; nonproductive regulatory restrictions and legal constraints; behaviorally disabled, acting out and dangerous students in the schools; and the low postschool job placement rate for special education students.

The Models

The Process Model

The process model is a method for identifying specific problems and solutions at the service delivery level. The goal of this process is to identify the specific behaviors of staff at the point where the service meets the client that will result in improved services. (See Appendix 1 for a complete description of the process model).

The Content Models

The content models were all developed using the process model. Draft procedures were implemented by the field test agency staff with major assistance from Single Portal staff. Careful evaluation data were kept at each step (see Appendix 2 - Evaluation Procedures). The procedures were then revised based on field test data. Additional field testing was also conducted in some cases. These were initiated by agencies wanting to use the model and willing to collect data.

Early Childhood Interagency Transition Model. The model is a series of strategies designed to facilitate the movement of young handicapped children from non-public school preschool programs (e.g., Head Start or Early Childhood Developmental Centers) into public school programs. The strategies were developed in cooperation with parents, direct service, and administrative staff of local programs. The strategies help solve identified problems that frequently occur when children are transferred from one primary service provider to another. The strategies address issues such as: 1) transfer of records; 2) timing of transfers; 3) awareness of programs; 4) parent involvement; 5) the decision-making process; and 6) post-placement communication.

Three fieldtests were conducted during 1981-82. Fieldtest site participants felt that the model strategies improved the transition process and all agencies continued using the strategies during the following year. Participating agencies identified 25 additional agencies which had been targeted for involvement in future transitions using the model. More parents (60% increase over previous year) were informed of the new teacher's name, the program placement and support services before school started. There was a significant increase in the amount of information exchanged between agencies regarding current levels of functioning, curricula, related services and placement decisions. Training sponsored by the state education and Developmental Disabilities agencies will be provided to LEA, Educational Service District, Developmental Disabilities, Developmental Center, and Head Start staff next year.

The Adult Transition Model: Planning for Postschool Services. This model is similar to the Early Childhood Interagency Transition Model, except the client focus is on young adults who are leaving public schools but who will continue to need social, rehabilitative, and/or residential services following

graduation. In its present form, the model addresses the transition process into programs offered and coordinated by the Washington Developmental Disabilities Agency. The model includes strategies in the following areas: 1) administration, 2) parent education, 3) staff preparation, and 4) student training.

Three fieldtests were conducted over the past two years. In the field test sites, over 150 eligible students in three LEA-Developmental Disabilities Agency (DD) dyads were identified to parents and the DD Agency prior to graduation. This information had never been formally exchanged before in any of the dyads. There was an increase in the amount of information exchanged between the two agencies including graduation year, current services, current case status, type of school program and names of caseworkers and teachers. DD agency staff reported that the intake and individual plan development processes were simplified when a joint planning meeting was conducted prior to intake.

Training sponsored by the state education and Developmental Disabilities agencies will be provided to LEA, ESD, and DD staff next year. The problem of transition to postschool services has risen on the state and federal policy agendas and hence the model will be further refined for statewide and national use.

Early and Periodic Screening, Diagnosis and Treatment (EPSDT). The EPSDT model was developed to guide coordination between LEAs and the EPSDT program in screening and assessing children suspected of having developmental disabilities. Three models were developed that consist of task analyses and supplementary materials: 1) The EPSDT Referral Model, 2) The EPSDT Partnership Model, and 3) The LEA as EPSDT Provider Model. Field test data indicated that this model was inappropriate for LEA use and we have therefore not pursued further refinement.

Mental Health/LEA Collaborative Model. LEA special education directors as well as public and private mental health service providers have identifed the need to coordinate and improve services for behaviorally disabled children. Single Portal Intake Project staff worked with the direct service and administrative staff of one LEA, with private child psychiatrists, staff of community mental health centers, and with county and state administrators to develop a series of strategies for coordinating mental health services. Present plans are to combine this activity with the Concurrent Services Model, below.

Concurrent Services Model. Handicapped children and youth frequently receive services simultaneously from more than one agency or provider. The absence of joint planning for children "shared" by two agencies results in duplication of assessments and/or services; gaps in services; confusion and frustration for the child due to varied expectations in the two settings; confusion for parents who assume the role of the "go-between"; and conflicts between staffs. This model contains strategies for increasing the awareness of parents and professionals about the need for coordinating concurrent services, exchanging information between service providers, and preplanning concurrent services. Additional funding from the state education agency has been obtained to fieldtest this model during 1983-84.

Special Education/Vocational Education Model. This model was designed to coordinate vocational education and special education services within the public schools. The strategies can be used to place and maintain mildly and moderately handicapped special education students in regular vocational education programs. The model includes strategies in the following areas: 1) Planning, 2) Training Placements, and 3) Work Experience.

Fieldtests were conducted during the last 5 months of the 1982-83 school year. Due to the length of the fieldtests and the complexity of the model, only the planning and preparation strategies were implemented; strategies for actually placing students in classes and work settings will be implemented next year. Some of the activities that LEAs accomplished as the result of the model included setting goals and objectives for including more handicapped students in vocational programs and for conducting vocational assessments. In addition, a system for scheduling special education students into vocational classes is being finalized. LEA staff completed written profiles of special education classes and regular vocational classes, examined instructional materials, and task analyzed instructional units. In one district, 8 students were identified and assessed for placement in specific programs during the coming school year. Support has been obtained to continue fieldtesting the model over the next 18 months.

Juvenile Corrections, Transition Model. This model addresses the transition of incarcerated youth who are moving from correction facility schools to public school programs after release. First year activities included gathering initial information and developing draft strategies. The model development is supported in part by a grant from the Office of the Superintendent of Public Instruction.

Personnel from corrections institution school and residential units, juvenile parole counselors, the county detention and court system, public school principals, administrators, counselors, and teachers as well as juvenile offenders participated in interviews to identify problems and generate possible solutions. Strategies have been drafted that address staff awareness, the transfer of educational records, pre-placement planning and decisions, maintaining placement, and interagency communication. Fieldtests will be conducted next year to evaluate the strategies and adapt them for use in other juvenile corrections settings.

As with other Single Portal models, state agency personnel as well as local and regional staff have been involved in this model development process. The development of the Juvenile Corrections Transition Model in particular has been marked by state agency cooperation and active participation. We feel strongly that this involvement promotes acceptance of project activities among local staff, assures that state priorities and anticipated changes are incorporated into the strategies and increases the likelihood that the strategies will produce statewide change.

Disseminable Products

Written materials are available for e model. Complete procedural manuals (working drafts) have been developed for the Early Childhood Interagency Transition Model and the Adult Transition Model . Descriptions and strategy outlines are available for the other models. These materials will be available for purchase through the University of Washington.

Summary

We believe the Single Portal Intake Project has evolved into a viable change agent. There are undoubtedly many approaches to interagency collaboration that can be productive. Our approach has resulted in a number of specific outcomes. First, the process used to develop strategies has consistently been effective in different settings (e.g., preschools, adult services), with a wide range of agencies (e.g., education, juvenile corrections, social services), and with some 150 professional staff from these agencies.

Second, the notion of ecological research and understanding systems by trying to change them provides us with a viable theory to guide our activities. This theory is useful when we find ourselves at an impasse and must choose among tested strategies in order to proceed.

Third, the backward mapping approach to policy implementation in fact describes both our process model and our idea of recipes (third level of interagency agreements). Rather than beginning with generalities and working toward specifics, backward mapping attempts to isolate the critical points of interaction between agencies that have the closest proximity to the problems and describes what must happen at those points to solve the problem (Elmore, 1979, p. 607). Again, as with the ideas of ecological research we discovered these formal ideas after we had described them to ourselves. The formal ideas allow us to proceed with more confidence.

Fourth, our procedures have been well received by the field, both at the practitioner level and at the administrative level. Most important, our solutions have assisted people in solving real problems. We have used the broad notions of interagency cooperation to improve the lives of children, their families, and professionals.

Given these overall accomplishments we are proceeding with our work. We have received state and federal grants to pursue the implementation of our three major transition projects (early childhood, adult, and juvenile corrections) and our concurrent services model. We will be training LEA, DD and Head Start staff in our procedures as well as developing additional strategies. We are also in the process of developing a series of follow-up studies of the graduates of special education. This initiates the process of identifying outcomes for special education.

Confidence in the process model and in the procedural models developed so far has encouraged us to seek new opportunities to apply these problem solving techniques. We have started negotiating with local, state, federal and private agencies to expand our work. We are confident that we will continue to be successful in building effective solutions to diverse and complex problems in human service delivery.

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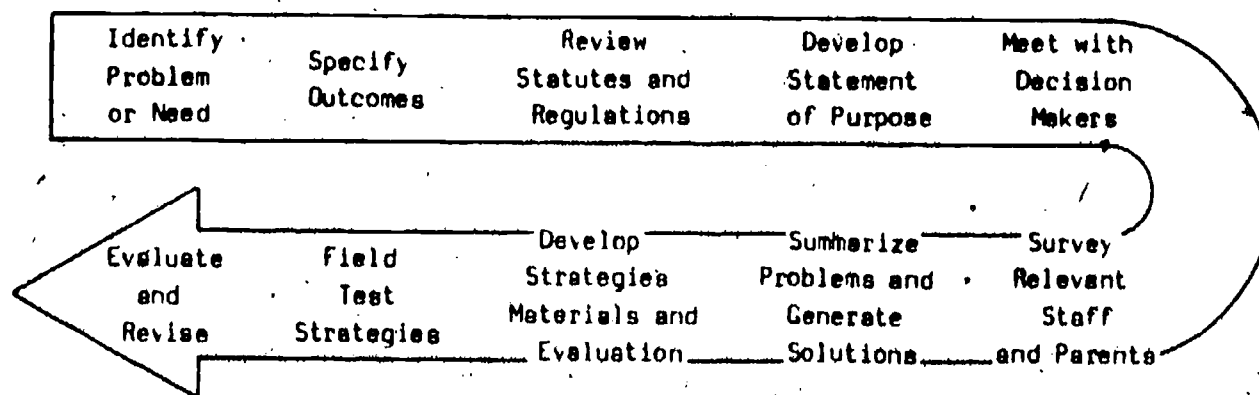
Appendix 1
Process Model

Process Model

The process model used to develop the content models described above consists of ten steps (See diagram below). Step one is to identify an area or (even better) a specific problem where collaborative solutions can be applied. We believe strongly that LEAs should engage only in those activities that address an identified need. Global, non-specific interagency meetings are not efficient in improving services to children. The second step is to specify desired outcomes—exactly what is to be accomplished by the collaborative activities. Step three is to review existing rules and regulations governing the agencies and programs involved. This is to confirm the existence of common mandates, identify restrictions on the proposed activities, and locate regulations that permit the activity. Next, (Step 4) is to develop a brief statement of purpose. Step 5 involves meeting with the role holders from the agencies involved who can make decisions. The result of this activity will lead either to a working agreement or to the decision not to proceed.

The five steps outlined thus far are preparatory to developing a set of procedures. The purpose of the remaining steps is to define the specifics of those procedures: who does what to whom, when, and under what circumstances? Step 6 is to identify the problems perceived by direct service and administrative staff with regard to the identified problem or issue. Problems are summarized and Step 7 provides an opportunity for the staff to generate solutions to the problems. These solutions are refined, informally evaluated, and turned into "strategies" (Step 8). Supplementary materials and evaluation methods are also developed. Step 9 involves actually trying the strategy. The strategy is then evaluated and revised in Step 10.

THE PROCESS MODEL

Identify Problem or Need	Specify Outcomes	Review Statutes and Regulations	Develop Statement of Purpose	Meet with Decision Makers
Evaluate and Revise	Field Test Strategies	Develop Strategies Materials and Evaluation	Summarize Problems and Generate Solutions	Survey Relevant Staff and Parents

Appendix 2
Evaluation Model

Four major evaluation issues were addressed as staff evaluated the models. These were: A) documentation that a specific activity has occurred; B) user satisfaction with materials or products; C) the impact of the model strategies measured in quality, time, and cost; and D) the cost of implementing the model procedures.

Evaluation Rationale

Most projects evaluate their effectiveness by a direct measure of child or student performance. Our desired outcome was to change the behavior of the adults who are responsible for providing services to handicapped children in order to improve the quality of these services. Benefits to the handicapped children and their families can be classified into three major areas of impact:

1) increased quality of the services;

2) more efficient use of time; and

3) increased satisfaction of the parents of the handicapped child.

Major evaluation activities addressed these impact issues rather than changes in child performance. Additionally, a series of evaluation activities centered on documenting the specific procedures and the satisfaction of the adults (professional staff and parents) who used the procedures. If these procedures are to be applicable across many settings, we must have accurate data on the actual costs of the procedures. Therefore, a crucial evaluation element was to calculate the costs of each procedure.

We have responded to the four major evaluation issues by developing a format that asks specific questions about each model concerning the documentation of a specific activity, the satisfaction of the individuals involved, the impact of the objective or procedure (usually measured in terms of quality and time), and the cost of each of the model procedures.

Documentation of Objectives

Documentation of procedures involves the specific description of the procedure (e.g., research is conducted, a form is developed, records are transferred, number of staff trained are listed, a report is generated, a checklist is developed). This is generally a quantitative evaluation in that numbers are reported, products are listed, or events are noted.

User Satisfaction

Satisfaction of the users is a critical evaluation component. Regardless of the effectiveness of the procedure, if the user is not satisfied the likelihood of continued use is doubtful. Therefore all procedures are evaluated by eliciting user satisfaction. Parental satisfaction with the service is also important. As parental satisfaction with a program increases, so will parental participation. Satisfaction with services also relates to reduction of parental stress.

Impact of Project and Model Procedures

Impact of the procedures is the most difficult aspect to evaluate. Part of the impact evaluation concerns the actual use of the procedures; this is considered under the documentation aspect discussed above . Impact evaluation measures the qualitative aspects of the procedures: Were more students placed promptly and appropriately in postschool services as a result of exchanging a list of names with postschool service providers? Was the eligibility assessment burden for receiving intake staff reduced as a result of receiving records from the sending agency? Was the quality of the IEPs improved by holding joint staff meetings? Was the quality of the interaction between parents and staff enhanced by the use of parent transition conferences? Did more paroled youth, stay in school as a result of systematic placement procedures? These qualitative questions are answered with the impact evaluation procedures.

Cost of the Procedures

Fieldtest site and project staffs collected data regarding the actual cost of implementing each specific model procedure. Staff time for attending meetings and completing forms, for copying, postage, travel, and other costs were documented. Each strategy was evaluated for cost-benefit and adapted if necessary. The final model procedures included data on the implementation costs of each procedure in order to assist users in selecting strategies.

These evaluation components were used with each of the models. However, not all evaluation components were applicable to each objective. Detailed evaluation plans were developed which applied each of the four evaluation components to each model procedure. In addition, each model was evaluated for impact by determining whether participating projects continued to use the model in subsequent years.