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ABSTRACT

This project worked to help community programs and interagency groups develop fluid organizational structures and better assist staff and parents in the provision of family-centered, community-based early intervention services for young children with disabilities and their families. Highlights of the service model include transdisciplinary teamwork, pre-assessment meetings with families, and inclusion in both formal and informal settings. Major objectives included: provision of assistance to Minnesota Part H leadership in the formation of a statewide Individualized Family Service Plan process and document as well as corresponding personnel development; support for progress by local communities and interagency groups toward family-centered, community-based practices; support for Part H efforts in other states through consultation with state leaders, presentations at state conferences, and intensive community work; and dissemination of project products. Results of the project and directions for future work are discussed, including an increased emphasis on recruiting training team members who better reflect the cultural diversity and impoverished economic background of the communities served. (PB)

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*Project Dakota Outreach
Replicating Family Centered, Community Based
Early Intervention Policy and Practice
1991-1994*

FINAL REPORT

*Early Education Program for Children with Disabilities
US Department of Education
Grant Number HO24010035
CFDA 84.024D*

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EC304500

ABSTRACT

PROJECT DAKOTA OUTREACH

Project Dakota Outreach proposed to support state level and local community initiatives in Minnesota and other states during the critical early PL99-457 implementation years by helping to incorporate the Project's model components of family-centered, community-based intervention into state and local program policy and practice.

The goal of Project Dakota Outreach was to help community programs and interagency groups develop fluid organizational structures so that teams of staff and parents have sound philosophical direction, collaborative practices, and evaluative feedback necessary to design and deliver tailored family-centered, community-based early intervention. This grant extended the benefits derived as a model demonstration to a greater number of families across the country.

Major Innovations of The Project Dakota Service Model:

1. Facilitator/transdisciplinary teamwork which preceded federal IFSP service coordination.
2. Pre-assessment discussions with families which preceded the federal IFSP directive for eliciting family concerns, resources, and priorities.
3. Inclusion in formal as well as informal settings (with neighborhood children, cousins, at parks, playgrounds, pools, tot recreation settings, and family outings such as shopping).

Project Dakota Outreach used a multifaceted approach to technical assistance and a commitment to bringing families and staff together to design change. These participants were invited to influence the pace, when and when to begin, and how far reaching their goals would be. Project staff served communities and state leaders on a continuum of single contact to follow-up to strategic planning including process and outcome measures so that programs could follow on the changes and measure its effects on families, staff, and children.

Project Dakota helped state systems and local communities in Minnesota, Texas, New York, Colorado, Tennessee, and Missouri move from a philosophical position for family-centered services to actually being able to deliver flexible, creative problem-solving by and for families. It provided print materials and telephone consultations to requesting communities and researchers across the country and conducted a survey of inclusion practices for the State of Minnesota which tracked growth over a three year period for infants, toddlers, and preschoolers.

In 1994-1995, Project Dakota continued to deliver technical assistance, primarily to New York state and Texas, in the absence of outreach funding. In 1995, Project Dakota was awarded funding by EEPD for outreach services.

**FINAL REPORT
PROJECT DAKOTA OUTREACH
1991-1994**

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Grant Award# HO24010035 CFDA 84.024D

Project Dakota Outreach Abstract:

Project Dakota Outreach proposed to support state level and local community initiatives in Minnesota and other states during the critical early PL99-457 implementation years by helping to incorporate the Project's model components of family-centered, community-based intervention into state and local program policy and practice.

Project Goal:

The goal of Project Dakota Outreach was to help community programs and interagency groups develop fluid organizational structures so that teams of staff and parents have sound philosophical direction, collaborative practices, and evaluative feedback necessary to design and deliver tailored family-centered, community-based early intervention. This grant would extend the benefits derived as a model demonstration to a greater number of families across the country.

Project Objectives:

1. Assist Minnesota Part H Leadership in preparing a final state recommended IFSP process/document and training staff and administrators across the state in its methods and intent.
2. Assist Minnesota local communities and interagency groups to attain their goals for family-centered, community-based policies and practices. The Project will provide orientations to new communities, follow-up with past training sites, and help 6 more communities undertake strategic planning and replicate one or more major model components.
3. Assist other requesting states and local communities in their efforts to achieve family-centered, community-based policy and practice. Specifically, the Project will deliver six state conference presentations, offer state leaders consultations and draft reviews, and work with four local target communities to institute and measure the impact of practice changes.
4. Market and disseminate Project products to requestors across the country.

CONCEPTUAL FRAMEWORK

Project Dakota sought to help systems move from a philosophical position for family-centered services to actually being able to deliver flexible, creative problem-solving by and for families. The proportion and dimension of this change is no easy task. Perhaps the greatest challenge is the shift in level of where decisions about agency resources are made.

In administrative-centered programs there is often a one size fits service package which families are offered, such as in-center programming or a pre-determined home visit pattern.

In staff-centered programs there are usually more than one option for each age group but direct service staff reach their own consensus on what it should be and offer it to families as their chosen path for the child at this time.

In family-centered programs, services are literally designed BY the family and their team so as to be responsive to parent priorities and preferences. Together, they determine combinations of settings, frequency and nature of staff contacts in those settings, and the roles and expectations among the network of formal and informal supports for the child, including the child's peers.

An administrator anxious about that level of team involvement in decision-making will need a system in place as they cannot attend to nor understand all the issues at play in every team planning session. For that reason, Project Dakota staff help programs build operating principles, procedures, feedback loops, and parameters so that staff and families have the support to proceed with creative problem-solving. This is crucial as programs must move more firmly away IEP thinking and procedures to the IFSP with its territory of broadened decision-making with other organizations. Therefore, Project staff used the following precepts to guide their outreach work:

1. FOCUS ON MOTIVATED LEADERS:

Organizational change occurs when there is motivation, inspiration, and sufficient internal and, as needed, external leadership to mobilize programs toward new practices and skills.

2. CONDUCT TRAINING & STRATEGIC PLANNING WITH PARENTS AND STAFF:

Organizational change is predicated on the creativity and analysis of BOTH families and staff. Joint efforts also reduce the risks and stresses that each feel when purporting changes for the other party. It also brings together a broader perspective and builds a sense of partnership for the rocky road of adjustment ahead.

3. WORK ON FELT NEEDS OF THE COMMUNITY:

Organizations typically are motivated to work on one or two issues at a time. For example, a community may wish to pursue integration but see no need to change the child assessment practices so they reap a more functional agenda. Requiring organizations to take a all or nothing approach would leave few takers. Groups have a sense of how much, what kind, and how fast they can take on changes. Project staff explain the interdependence of the components, but programs will not be bound to a set sequence of combination of practices.

MODEL DESCRIPTION

Project Dakota began in 1983 as a federal demonstration program through the Handicapped Children's Early Education Program for Children. In 1986-1987 it was a federally funded outreach project and was funded again in 1988-1991 and 1991-1994. Incidentally, as of this writing the project will again serve as an outreach project for 1995-1998.

Model Demonstration Upon Which This Outreach Is Based

Project Dakota Outreach content and effectiveness data derives primarily from the demonstration model **mission** to "Assist the family and community to promote optimal development of the child and reduce the negative effects of delay or disability."

This mission led to the following **goals**:

- . Focus on the child and family needs considered essential by parents.
- . Insure direct and meaningful collaboration among parents and staff throughout the intervention process.
- . Promote the acquisition of knowledge, skill and confidence by parents to describe their child's strengths and needs and to identify and carry out goals and strategies for their child.
- . Encourage the transmission of these strategies by parents and staff to other caregivers and settings.
- . Increase the child's ability to function in less restrictive environments: draw upon natural settings and resources for intervention.

The mission and goals were given guidance by a set of **operating principles**:

Family Resources

- . Families govern their investment of time and energy; there is no "hidden agenda" to increase or alter it. The goal is to tailor current commitments with current energy, schedules, and priorities.
- . Intervention strategies can be a natural part of the daily routine and fit comfortably into the interactions and styles of family members.

Community Resources

- . Families shall be offered on-going information and assistance in using community resources so they may make informed decisions about what is available and whether it may play a role in their efforts.
- . Settings used by non-delayed peers shall be used in preference to specialized or segregated settings.

Staff Resources

- . Staff resources shall supplement, not supplant, those of the family and community.
- . Consultation and assistance shall be available in the settings where they are used.

Major Innovations of This Model:

1. Facilitator/transdisciplinary teamwork which preceded federal IFSP service coordination.
2. Pre-assessment discussions with families which preceded the federal IFSP directive for eliciting family concerns, resources, and priorities.
3. Inclusion in formal as well as informal settings (with neighborhood children, cousins, at parks, playgrounds, pools, tot recreation settings, and family outings such as shopping).

Project Dakota used a multifaceted approach to technical assistance and a commitment to bringing families and staff together to design change. These participants influence pace, when and when to begin, and how far reaching their goals will be. Project staff served communities and state leaders on a continuum of single contact to follow-up to strategic planning including process and outcome measures so that programs could follow on the changes and measure its effects on families, staff, and children.

TARGET AUDIENCES

In Minnesota and Other States:

- . Governors' Interagency Coordinating Councils
- . Part B state staff
- . Part H Lead staff and task forces
- . university pre-service staff in early childhood special education
- . regional training coordinators
- . local program staff and parent leaders and interagency committees

TRAINING ACTIVITIES

Consultations:

on-site, off-site

assessment, planning, evaluation, situational analysis, document review

In-service:

demonstrations, presentations, role plays, storytelling
visual images & contrasts, teaching practice sequences
practice analysis, forums for reaching common ground

Participants:

families & staff
administrative & policy groups
community networks
interagency committees

Topical Areas:

transdisciplinary teamwork, family-staff collaboration
home visiting etiquette, community inclusion
IFSP processes and documents, staff development planning

program evaluation: process and outcome

LOGISTICAL CHALLENGES

The goals and objectives of the grant remained intact with some variation. All anticipated workscope activities were fulfilled. The Project anticipated working with six Minnesota communities for replication and was able to achieve this goal despite the size and complexity of two sites, the largest two in the state.

It may be useful to note that there was observed by Project staff a change in the readiness of programs to make substantive change. Those program leaders who quickly moved to make changes in their program's flexibility were followed in later years by program leaders seeking help but with more ambivalence and resistance to the task at hand. They had been aware of the movements in the field, were less enamored of the ideas, but felt some pressure to head into the ideas in order to be seen as progressive while not fully desiring the changes themselves.

A second area of challenge was shrinking budgets, particularly for programs dependent upon public school funding formulas. In Minnesota, for example, state per pupil funding to schools was frozen during these three years. In other states, the issue was less a fiscal dimension than a period of rough waters due to living with new bureaucratic structures and regulations for Part H; the move from theory to actual practice uncovers kinks and challenges.

Lastly, it became clear that unlike topics of family-centered collaborative program planning and inclusion, the IFSP was a content terrain that staff did not approach as a philosophical issue. Local staff sought answers from state officials and assurances that their practices were 'legal' and 'acceptable to monitors'. For example, in a session in New York, Project staff needed to be able to clarify to long time administrators both the wording and the state's intent in a recent state memorandum before obtaining their willingness to talk about a quality factors in parent-staff interaction during child assessment.

This meant that Outreach staff more than ever needed to be familiar with the intricacies of each state's laws and reimbursement structures. They had to cope with less motivation on the part of participants to listen to ideas from "out of states". In later grant proposals submitted by this Project, the staff have significantly narrowed their terrain of states to serve so there is sufficient time to be highly informed of each state's regulations, reimbursement features, and clarifying memorandum dispensed throughout the year.

EVALUATION RESULTS AND IMPACT

Objective #1: Assist MN Part H leadership in the formation of a statewide IFSP process and document and corresponding personnel development.

Results:

1. With input from representative parent and staff stakeholders, Project staff worked with a task force which prepared a well-received draft IFSP document and the final state document.
2. Staff conducted a survey and reported on the statewide status of integration practices for 0-3 and 3-6 age groups and shared in mailings and meetings across the state.
3. Staff participated as trainers in the statewide IFSP process training and went back to an additional 13 communities for work to help them prepare for implementation.
4. Note that this state recommended IFSP was universally utilized by 0-3 programs statewide. In the summer of 1995 this IFSP went under field review and the basic flow and family-centered orientation of the plan was still highly regarded and changed little in the statewide revision process.

Objective #2: Assist local MN communities and interagency groups in advancing their movement to family-centered, community based practices.

Results:

1. Project staff worked closely with ten communities each year for follow-up to past outreach training. It is interesting to note that as communities begin to understand the commitment to responsiveness to families they become motivated to work on team methods and service menu expansions which offer greater flexibility and portability of staff support and expertise.
2. The ten groups who requested and received conference presentations each year also asked for topics which reflected a desire to become more portable and flexible on behalf of serving families.
3. The six sites receiving on-going support from the Project were diverse and made substantial changes. The two largest were public school programs, 0-3 and 3-6. These two programs achieved major changes in service menus and staff organization structures in an era of tumultuous administrative layoffs and cutback. These changes have held up overtime and been the foundation for more progress.

Two smaller programs made the shift from traditional team structures with limited portability to being beacons for the state. Also in this group was a new intercommunity/interagency effort to design and deliver training to child care providers. The pre-post evaluations demonstrated progress in environmental management, the quality of behavioural plans, and the linkage of school district and child care resources.

The sixth target was a new county-wide collaborative which brought together families and public and private agencies serving young children at risk and those with disabilities. This collaborative established automated information and referral, email capacity, documentation and response to unmet family needs, and a formal policy and interagency structure. It has been a forerunner for the state's family service collaboratives, posed for federal block grants.

Objective #3: Support Part H efforts in other states through consultation with state leaders, presentations for state conferences, and intensive work in for communities.

Results:

While the Project responded to requests for technical assistance from ten states, it narrowed its scope of training to six states so that greater attention could be given to the differing bureaucratic opportunities and challenges faced by families and staff in those states. In three of these states the Project was able to build on past consulting and field experience. The over-riding interest among the various states was the desire of front line staff to see in some concrete way what family-centered services looked like. The request was usually phrased as, "We agree with the philosophy but how do we do it?"

It also became clear to the Project that programs would be very willing to attain the appearance of family-centered services but did not as quickly want to undergo the major shifts in the powers of decision-making that accompany this work. In that regard, staff needed to be led into the changes and be able to see themselves and typical families they worked with actually reaping the rewards of the shift. That is why the one-time intensive trainings with pre and post training telephone support proposed in this grant were dropped in later proposals and replaced with on-going work and two trips per year. Managing the increased costs of travel will be a challenge as budgets tighten. However, it is anticipated that states will have greater benefit if they invest more funds in one site so that programs across the state may learn from that first site for years to come. In other words, the Project's on-going work in MN needed to be the model work work in communities in other states, despite the challenge of increased travel costs.

Objective #4: Develop and disseminate Project products.

Results:

1. The Project responded to 145 requests for print materials needed for specific situations. This entailed Project staff pulling existing products but also selecting among hundreds of handouts and articles to help requestors. The two most common areas of interest were how to get started with preschool inclusion and tools for giving families a voice in sharing their concerns and priorities for the IFSP.

2. The strategic planning guide toolbag promised in this grant was compiled but given the differences in requestor situations and interests, it became a collection whose composition varied with the requestors rather than a bound document. Project staff also learned that programs preferred help for interacting more responsively with families than they did in any tool which helped them manage and anticipate concepts of strategic change. Clearly, the 1991-1994 era was one of seeking practical images and not one for philosophical debate.

FUTURE DIRECTIONS AND ACTIVITIES

The Project in 1994 to 1995 was not awarded outreach funds but continued to operate at full capacity offering fee based technical assistance to states which had been pleased with our work in the past. Several important things were learned and accomplished that year:

1. Project staff were able to work in highly stressed areas, with families and staff from cultures different than their own and hear that basic Project Dakota tools and strategies were a good fit. However, Project staff made a commitment to more effectively reflect the cultures served and achieved that goal in their training team the fall of 1995.
2. Project staff also heard over and over from staff of impoverished communities the harsh realities of their settings and their need to be on contact with other staff who knew these challenges first hand and could trade their support and ideas. This became in central thesis of the Project's 1995-1998 outreach proposal which was accepted for funding.
3. The Project's fee based work has expanded to other domains of social/community support because the core family-centered practices of the Project have won favor with related groups. These new consulting domains include family self-sufficiency collaboratives, children's mental health initiatives for elementary and middle school children and their families, and supported employment programs seeking stronger connections with families of adults with disabilities.

In Closing:

Project staff are grateful for the funding, support, networking, and rich field of service made possible by the United States Federal Department of Education, Early Education Program for Children with Disabilities. It has been an honor to be part of the history of this federal initiative and to walk side by side so many courageous and creative families and staff across the country.

Final Note: All major project products and research studies by the Project have been forward to ERIC for inclusion in their system of access and dissemination.