

**Nebraska Early Development Network
Regional Targeted Improvement Plan and Systems
Support/Change Grant
Planning Guide**

**Fiscal Year
September 1, 2016 - August 31, 2017**
Due Date: August 1, 2016



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2016-2017 GRANT FUNDING ALLOCATIONS

Planning Region	Base Grant	Services Coordinator Training Dollars	PRT Support for TIP	Total Grant Amount
Planning Region #1	\$11,000	\$2,500	\$5,000	\$18,500
Planning Region #2	\$19,000	\$3,775	\$5,000	\$27,775
Planning Region #3	\$9,250	\$2,550	\$5,000	\$16,800
Planning Region #4	\$11,000	\$1,250	\$5,000	\$17,250
Planning Region #5	\$11,000	\$1,250	\$5,000	\$17,250
Planning Region #6	\$14,000	\$1,850	\$5,000	\$20,850
Planning Region #7	\$13,250	\$1,850	\$5,000	\$20,100
Planning Region #8	\$8,750	\$925	\$5,000	\$14,675
Planning Region #9	\$20,000	\$4,400	\$5,000	\$29,400
Planning Region #10	\$15,500	\$1,888	\$5,000	\$22,388
Planning Region #11	\$8,000	\$2,165	\$5,000	\$15,165
Planning Region #12	\$5,750	\$1,250	\$5,000	\$12,000
Planning Region #13	\$8,000	\$925	\$5,000	\$13,925
Planning Region #14	\$5,750	\$925	\$5,000	\$11,675
Planning Region #15	\$6,500	\$625	\$5,000	\$12,125
Planning Region #16	\$10,250	\$1,250	\$5,000	\$16,500
Planning Region #17	\$8,000	\$925	\$5,000	\$13,925
Planning Region #18	\$37,000	\$5,660	\$5,000	\$47,660
Planning Region #19	\$40,000	\$5,000	\$5,000	\$50,000
Planning Region #20	\$8,750	\$2,500	\$5,000	\$16,250
Planning Region #21	\$17,750	\$1,875	\$5,000	\$24,625
Planning Region #22	\$7,250	\$625	\$5,000	\$12,875
Planning Region #23	\$14,000	\$1,250	\$5,000	\$20,250
Planning Region #24	\$7,250	\$625	\$5,000	\$12,875
Planning Region #25	\$9250	\$1250	\$5000	\$15,500
Planning Region #26	\$12,500	\$3,775	\$5,000	\$21,275
Planning Region #27	\$9,500	\$1,250	\$5,000	\$15,750
Planning Region #28	\$6,500	\$1,887	\$5,000	\$13,387
Planning Region #29	\$8,000	\$1,250	\$5,000	\$14,250
Regional Systems Support/Change Grants	\$362,750	\$57,250	\$145,000	\$565,000

FUNDING

The focus of these Federal IDEA Part C grant funds are specific to children with disabilities, birth to age three, and their families. Funding must go through a Planning Region Team Lead Agency to be used in achieving the goals identified in the project's activities and grant priority areas. In addition, funding may be considered for the following:

- Families may receive reimbursement for child care, mileage, meals, lodging and stipend(s) for meetings/trainings.
- Funding for clerical support, PRT chairperson, project director and financial staff are allowed.

NON-ALLOWABLE EXPENDITURES

- Direct services to families (Exception: if a dispute over payment for direct services should arise at the local level, contact Cole Johnson for guidance and assistance);
- Capital improvements;
- Door prizes/drawings, incentives, reinforcers;
- Out-of-state travel must be pre-approved by Part C Co-Leads prior to ordering;
- Equipment must be pre-approved by Part C Co-Leads prior to ordering.

Nebraska Early Development Network Regional Targeted Improvement Plan and Systems Support/Change Grant

Application Requirements

All early childhood planning region applicants must assure that activities comply with the regulations stated in the Health and Human Services, Early Intervention Services Coordination Manual, Title 480; the Nebraska Department of Education, Rule 52; IDEA, Part C; and the Early Intervention Act.

PLANNING REGION TEAM ROLE AND RESPONSIBILITIES

The purpose of the Early Childhood Planning Region team is to assist in collaborative planning and development of a family centered, interagency community-based system for all children, with emphasis on those with disabilities, birth to age five. The membership must mirror the make-up of the Early Childhood Interagency Coordinating Council (ECICC). One responsibility of the Planning Region team is to assist in establishing the services coordination system in the region. (See *Health and Human Services, Early Intervention Services Coordination Manual, Title 480; and Nebraska Department of Education Rule 52, Title 92 NAC, Chapter 52*). The team shall:

1. Discuss issues of regional concern related to services for children birth to age five with disabilities and their families;
2. Make recommendations/provide feedback to local agencies regarding the provision of early intervention services in the region;
3. Identify the potential agency(ies) in the region to provide services coordination for the region and notify the Nebraska Departments of Education and Health and Human Services of the potential agency(ies);
4. Identify the potential agency(ies) to provide systems support(s) for the region;
5. Work with the services coordinator(s) to identify gaps/duplications in resources in the region;
6. Identify the training and technical assistance needs in the region for administrators, direct services providers, and families involved in the provision or receipt of early intervention services;
7. Identify the resources that may be shared, adjusted, or developed in the region to address the gaps/duplication in services;
8. Meet, at a minimum, on a quarterly basis; and
9. Assist school districts and service coordination agencies in addressing gaps and barriers identified through the Improving Learning for Children with Disabilities (ILCD) process.
10. Use a communication system (such as a list serve) to share state and local information with **all** members on the Team.

MEMBERSHIP REQUIREMENTS

The Early Childhood Planning Region Team represents key individuals in the Planning Region who work closely to coordinate the planning for a comprehensive, interagency service delivery system for young children with special needs and their families in that Region. (See *Health and Human Services, Early Intervention Services Coordination Manual, Title 480; and Nebraska Department of Education Rule 52, Title 92 NAC, Chapter 52*). We strongly encourage and will support your

partnering with Early Head Start, Early Childhood Endowment, higher education, Migrant and Indian Programs in your region and other community organizations.

In order to facilitate problem solving across agencies, each team must be comprised of:

1. Representatives of school districts and approved cooperatives;
2. Nebraska Department of Health and Human Services representatives;
3. Family members of children with special needs (minimum of 20% membership);
4. A representative from health/medical and developmental disabilities services;
5. A representative from Head Start or Early Head Start;
6. A representative from child care;
7. A representative of the services coordination contracting agency;
8. A representative for underserved children and families, including low income, inner city, Indian, homeless, migrant and minority populations and rural areas as applicable for the region;
9. Early Learning Connection Coordinator (ELC).

Note: Regions are also encouraged to have representatives from other public and private agencies, business community leaders and clergy as team members.

Grant Priority Areas – PRT Targeted Improvement Plan

The PRT TIP Co-Lead Evaluation Tool is based on the 3 components within Phase II of Results Driven Accountability. The Phase II components are: 1) Data Analysis, 2) Analysis of Infrastructure to Support Improvement and Build Capacity, and 3) Implementation and Evaluation of the PRT's Multi-year, Comprehensive Targeted Improvement Plan.

The PRT will submit the Targeted Improvement Plan (Phase II) by August 1, 2016 utilizing the GMS system. The Co-leads will notify a PRT if it determines that the TIP does not meet the requirements outlined in the below checklist. The PRT will have an opportunity to submit a revised TIP.

Data Analysis: Planning Region Teams will review PRT performance in each area to:

(Supporting documentation may be uploaded to the site to further document the PRT's progress or slippage.)

1. Determine for which SPP/APR indicators the PRT is meeting the target and for which indicators the PRT is not meeting the target.
2. Determine trend data for the past 3-5 year period from multiple sources of data, including SPP/APR indicator performance, CONNECT reports, Referral vs. Verification report, EDN, and Monitoring results.
3. Assess the quality of the PRT's data.
4. If the PRT did not meet the selected child or family outcome targets as identified in Phase I of the TIP, or slippage has occurred, perform a root cause analysis to identify the underlying issue(s) and make necessary revisions to the TIP improvement strategies that will lead to improved results for infants and toddlers with disabilities and their families.
5. Identify any monitoring noncompliance issues that present barriers to achieving improved results for infants/toddlers with disabilities and their families and make necessary revisions to the TIP improvement strategies that will lead to improved results.
6. Describe stakeholder involvement in the data analysis.

PRT Infrastructure Analysis: A description of the PRT's resources and supports, including:

1. Identify strengths of the PRT system, including:
 - a. how decisions are made within the PRT and with other agencies that are involved in planning for systemic improvements in the PRT;
 - b. how components of the PRT system are coordinated among agencies providing services to infants/toddlers with disabilities;
 - c. evidence-based and family-centered practices utilized by the PRT that result in improved results;
 - d. areas for improvement within and across system components;
 - e. analysis of initiatives in the PRT that can have an impact on improving results for infants and toddlers with disabilities and their families.
2. Identify PRT Infrastructure changes that have assisted in implementation of the Targeted Improvement Plan and how the PRT will support the providers in scaling up

and implementation of the selected evidence-based practice(s).

3. Identify how the PRT is tracking new staff to ensure they receive the required professional development trainings and technical assistance in the implementation of the selected evidence-based practice(s).
4. Identify your PRT's TIP Leadership Team who is responsible for the management and implementation of the selected evidence-based practice(s).

Implementation and Evaluation:

Annually, the PRT will review and revise (as necessary), the Targeted Improvement Plan. Once the TIP has been created and implemented, the PRT will annually report to NDE, using the GMS website, any revisions to the plan and progress toward achieving intended outcomes. Supporting documentation may be uploaded to the site to further document the PRT's progress or slippage. The PRT is required to:

1. Describe how the PRT is tracking progress and ensuring fidelity of implementation of improvement plans.
2. Describe implementation progress based on your previous year's implementation activities.
3. Describe the connections to ChildFind, Services Coordination Support, and ILCD.
4. Describe data collection and methods to be utilized to determine the effectiveness of the TIP.
5. Conduct an annual evaluation of the effectiveness of the TIP and describe progress toward achieving intended outcomes for improving results for infants and toddlers reported to the co-lead agencies for the Early Development Network (EDN).
6. If necessary, describe how the TIP is revised in response to evaluation of outcomes, plan effectiveness, and consultation with the co-lead agencies.

\$5000 additional funds allocated for PRT members/District & ESU personnel/Services Coordinators' participation in the EDN/PRT Monitoring process; the implementation of the PRT Targeted Improvement Plan, and for data and infrastructure analysis to evaluate and revise, if necessary, the PRT Targeted Improvement plan to improve results for infants/toddlers with disabilities and their families.

REQUIRED REPORTS

The following reports are required to receive funding for the Early Development Network Planning Region TIP/Systems Support/Change Grant. Reports should be submitted according to the guidelines listed below.

1. MEETING DATES

- Each Region should establish quarterly (at a minimum) meeting dates at the beginning of the year.
- Meetings are to comply with the Open Meetings Act and be held in locations accessible to the public.
- Establish a communication system for sharing state and local level information with PRT members.
- Share Planning Region Team information with your Special Education Regional Representative.
- Send copies of all meeting minutes and activities to Cole Johnson at cole.johnson@nebraska.gov. This can be accomplished by including him in your Team distribution list.

2. ANNUAL MEETING

- Each Planning Region Team should participate in an interagency annual meeting as defined in DHHS Services Coordination Manual, 480 NAC 3, prior to July 1, 2017.
- The purpose of the Annual Meeting is to provide a basis for communication and problem solving among the various agencies serving children with special needs birth to five and their families, and to establish a mechanism for collaborative program development. The team should work with the school districts in the region to coordinate the plans for this meeting.
- Example Annual Meeting documents can be found at, <http://edn.ne.gov/prt.html>.
- The report should include:
 - A copy of the minutes of the annual meeting
 - An attendance roster from the meeting
 - A list of gaps and barriers as defined in NAC 92, 51-005.03C
 - The Annual Meeting Report is due 30 days after the meeting or no later than **August 1, 2017**, to Cole Johnson, NE Dept. of Education, P.O. Box 94987, Lincoln, NE 68509.

3. FINANCIAL REPORT

- Final request for funds must be submitted through the Grants Management System (GMS) no later than **November 15, 2017**.

CALENDAR for the PRT Targeted Improvement Plan Systems Support/Change Grant

August 1, 2016	Due date for 2016-2017 grant applications
August 1, 2016	Due date for submission of Annual Meeting Report for 2015-2016
August 31, 2016	End of the 2015-2016 Grant Year
September 1, 2016	2016-2017 Grant Year begins
November 15, 2016	Due date for submission of the final request for funds through GMS (FY 15-16)
August 31, 2017	End of the 2016-2017 Grant Year
August 1, 2017	Due date for submission of Annual Meeting Report for 2016-2017
November 15, 2017	Due date for submission of the final request for funds through GMS (FY 16-17)