

SSIP Component 2: Analysis of State Infrastructure to Support Improvement and Build Capacity

2(a) How Infrastructure Capacity was Analyzed

The systematic process used to analyze our infrastructure included a broad analysis of the strengths, weaknesses, opportunities, and threats (SWOT) of each OSEP-recommended system component (e.g., Accountability, Data System, Fiscal, Governance, Quality Standards, Professional Development, and Technical Assistance). After the key factors for each component were listed, the SSIP Leadership Team discussed each factor in terms of whether it was a strength or a challenge in our early intervention system toward the goal of increasing positive child outcomes. At the time of that discussion, our SiMR had not yet been finalized. The strengths and challenges were further delineated into strengths that could be built upon and challenges that could be mitigated.

Calls were held during April, May, and June 2014 with our national TA expert and the SSIP Leadership Team to plan an in-person stakeholder workshop and pre-workshop conference call. All stakeholders, including ICC members and EIS providers, were invited to participate in the SSIP Leadership Team. The pre-workshop conference call was held on June 21, 2014, with the stakeholder workshop facilitated by the national TA expert occurring July 15, 2014. At the workshop, approximately 26 stakeholders participated in a facilitated activity in which small groups discussed each system component, asked questions and gave input to other workshop attendees and the SSIP BWEIP Team. In addition, participants were asked for information about any state and local initiatives they thought might relate to the SSIP work. Participants had a large amount of information to discuss and share on the day of the workshop. The SSIP BWEIP Team consolidated and compiled the results of the SWOT analysis from the July 2014 workshop, identifying themes for each system component. In a call on August 14, 2014, facilitated by ECTA personnel, the SSIP Leadership Team identified those ideas that they felt would influence or impede improvement strategies in social-emotional development of culturally diverse children. During the call, some very encouraging initiatives were highlighted, while some of the most common barriers to improvements were acknowledged.

The SSIP BWEIP Team compiled and shared results on the SSIP Core Work Team call on September 3, 2014. The infrastructure analysis summary was reviewed to assess whether there were other hypotheses in addition to those developed in the data analysis (1a) regarding possible root causes for challenges in social-emotional development of culturally diverse children. As a result of the call, an infrastructure analysis summary was developed identifying the issues raised by stakeholders as most likely to leverage and hinder SiMR improvement activities for social-emotional development of culturally diverse children.

This analysis was also used by members of the SSIP Core Work Team in presentations for SSIP Leadership Team and the SSIP Broad Stakeholder Group to the ICC in November 2014 and an EIS provider consortium meeting in December 2014. The EIS provider consortium meets bi-

monthly without BWEIP to discuss relevant early intervention topics and to share strategies. EIS provider consortium was also asked to participate and train members of the SSIP Core Work Team “fish bone” methodology to analyze root causes of factors might be influencing the social-emotional development of children from diverse cultural backgrounds to inform possible SiMR improvement strategies. “Fish bone” methodology Figure 1.

When to Use a Fishbone Diagram

- When identifying possible causes for a problem.
- Especially when a team’s thinking tends to fall into ruts.

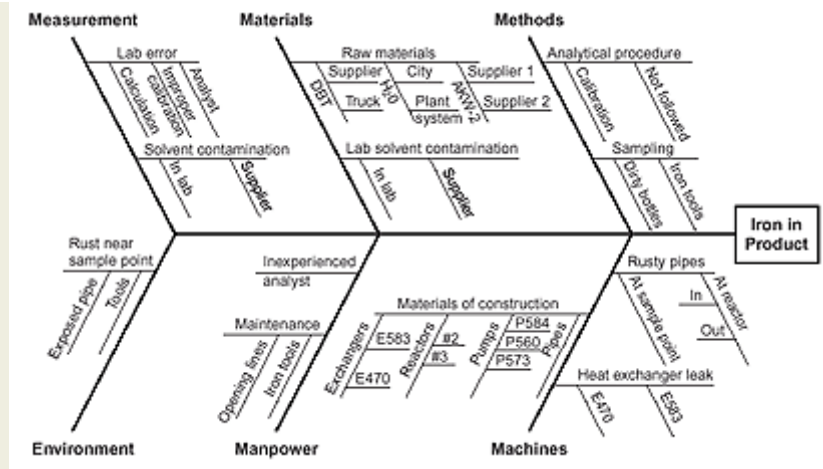
Fishbone Diagram Procedure

Materials needed: flipchart or whiteboard, marking pens.

1. Agree on a problem statement (effect). Write it at the center right of the flipchart or whiteboard. Draw a box around it and draw a horizontal arrow running to it.
2. Brainstorm the major categories of causes of the problem. If this is difficult use generic headings:
 - Methods
 - Machines (equipment)
 - People (manpower)
 - Materials
 - Measurement
 - Environment
3. Write the categories of causes as branches from the main arrow.
4. Brainstorm all the possible causes of the problem. Ask: “Why does this happen?” As each idea is given, the facilitator writes it as a branch from the appropriate category. Causes can be written in several places if they relate to several categories.
5. Again ask “why does this happen?” about each cause. Write sub-causes branching off the causes. Continue to ask “Why?” and generate deeper levels of causes. Layers of branches indicate causal relationships.
6. When the group runs out of ideas, focus attention to places on the chart where ideas are few.

Fishbone Diagram Example

This fishbone diagram was drawn by a manufacturing team to try to understand the source of periodic iron contamination. The team used the six generic headings to prompt ideas. Layers of branches show thorough thinking about the causes of the problem.



Fishbone Diagram Example

For example, under the heading “Machines,” the idea “materials of construction” shows four kinds of equipment and then several specific machine numbers.

Note that some ideas appear in two different places. “Calibration” shows up under “Methods” as a factor in the analytical procedure, and also under “Measurement” as a cause of lab error. “Iron tools” can be considered a “Methods” problem when taking samples or a “Manpower” problem with maintenance personnel.

Excerpted from Nancy R. Tague’s *The Quality Toolbox*, Second Edition, ASQ Quality Press, 2005, pages 247–249.

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2(b) Description of State Systems

Governance

Utah’s Part C Early intervention program, BWEIP, is housed within the Bureau of Child Development the Utah Department of Health. BWEIP operates under federally-approved policies and procedures and Utah Administrative Code that are in compliance with IDEA Part C Regulations. At the local EIS level, collaboration in delivering early intervention services, including social-emotional supports, is supported in communities by strong local interagency agreements. The mission of the Bureau of Child Development is to support the health and development of Utah families and their children, birth through seven, and is accomplished through the following programs and activities:

- Baby Watch Early Intervention Program;
- Child Care Licensing Program;
- Office of Home Visiting; and
- Early Childhood Utah – Developmental Screening.

This governance structure promotes ongoing partnerships between the statewide programs providing services to young children and their families.

Fiscal

The BWEIP administers all funds received for the delivery of EI services. Funding is received from various sources, creating a system of payments and fees. The State has in place interagency agreements, contracts, and grants establishing financial responsibility and funding sources for BWEIP services. Funding sources that support the BWEIP are:

- a. State Appropriation (State General Fund);
- b. IDEA Part C Grant Award;
- c. Medicaid;
- d. Children’s Health Insurance Program (CHIP); and,
- e. Family Cost Participation Fees.

The BWEIP ensures that Federal funds made available to the State under Part C are implemented and distributed in accordance with the provisions of Part C. BWEIP provides grants to agencies in the state to support and carry out the purposes and requirements of Part C and state regulations. Grants are awarded yearly to EI agencies providing services throughout the state by way of an annual application process. If the need arises to identify a new EI provider agency, the BWEIP develops and disseminates a Request for Application to any interested party in the state. Prospective agencies submit a response to the Request for Application for approval through a competitive review process conducted by the BWEIP. A grant is developed with an agency who has received an approved application through this process. The General and Special Provisions of each EI grant include specifications that cover: a. Submission of Reports and Payment; b. Record Keeping, Audits, & Inspections; c. Federal OMB Cost Principles and Accounting Procedures; d. Requirements to abide by all pertinent State and Federal regulations including Part C of IDEA. BWEIP is required to ensure that only individuals or organizations with a legal status recognized by the State of Utah may provide EI services. BWEIP is allowed to access other responsible sources for payment for specific EI services such as Medicaid, CHIP and parent fees BWEIP’s methods for state interagency coordination to ensure payor of last resort include interagency and intra-agency agreements that ensure the provision of and financial responsibility for EI services provided under Part C. BWEIP is housed within the Utah Department of Health, which is responsible for entering into formal interagency agreements with other State public agencies involved in the State's EI system. Each agreement defines the financial responsibility of each agency for paying for EI services, and the resolution of disputes BWEIP’s interagency agreements include a mechanism to ensure that no services that a child is entitled to receive under Part C are delayed or denied because of disputes between agencies regarding financial or other responsibilities, and are consistent with the BWEIP policies, including those regarding the use of insurance to pay for Part C services. The

BWEIP assures that federal funds are not comingled with BWEIP funds and are used to supplement the level of BWEIP and local EI funds expended for infants and toddlers with disabilities and their families and in no case to supplant those State and local funds. BWEIP tracks the total amount of BWEIP and local EI funds budgeted for expenditures in the current fiscal year for EI services for children eligible under this part and their families to assure that they are at least equal to the total amount of BWEIP and local funds actually expended for EI services for these children and their families in the most recent preceding fiscal year. The Utah Department of Health charges indirect costs to the Part C grant as approved by a current indirect cost Negotiation Rate Agreement with the U.S. Department of Health & Human Services. The Utah Department of Health does not charge rent, occupancy, or space maintenance costs directly to the Part C grant.

BWEIP utilizes a system of payments and fees for EI services, including a schedule of sliding fees as a cost participation fee. Fees collected from a parent or the child's family to pay for EI services. Fees are considered as EIS program income.

Quality Standards

BWEIP uses OSEP and ETCA guidance documents such as the Individualized Family Service Plan (IFSP) Process and Resource Guide, the Procedural Safeguards Technical Assistance Guide, and various practice guides to set quality standards. BWEIP also relies on the Division of Early Childhood (DEC) Recommended Practices and the "Seven Key Principles of Early Intervention" to assist in setting standards for service provision.

Professional Development

EIS providers assure BWEIP, through contracts and participation in the CSPD credentialing system, that all Part C providers, including service coordinators, are highly qualified personnel. BWEIP's policy and guidance on the CSPD Credentialing System and personnel standards (the minimum education and state licensure/certification/registration) is posted on the BWEIP website, which can be found at <http://utahbabywatch.org/docs/foreiproviders/policies/Final%20Policies/Comprehensive%20System%20of%20Personnel%20Development%207%2013.pdf> The BWEIP CSPD Coordinator oversees the credentialing of EIS providers in Utah. Utah's statewide database, the Baby and Toddler Online Tracking System (BTOTS), provides a statewide registration and tracking system for EIS staff credentials, renewals, and ongoing professional development.

BWEIP has designed nine early intervention modules for EIS providers and coordinators. The modules include an overview of early intervention; evaluation and assessment/eligibility determination; IFSP development and review; cognitive development, social emotional development; motor development; communication development; family partnerships/service coordination; and health. These topics impact the identification, service provision, and outcomes of infants and toddlers with delays in the area of social-emotional development.

BWEIP offers ongoing professional development to local EIS providers statewide through mandatory quarterly meetings, topical webinars, and national training brought to Utah (e.g., Routines Based Interviewing (RBI), Pip Campbell, the Play Project, etc.). BTOTS training videos and topical community training opportunities are announced through the BWEIP listserv. BWEIP presented an interactive webinar for the Summary of Functional Performance and the COSF Rating Process. The training, which was specialized to Utah Part C, was developed in collaboration with ECTA. The first presentation was geared for EIS administrators and was presented during an April 2014 EIS grantee meeting. The presentation was further refined for EIS providers and was delivered through two additional statewide webinars. A recording of the webinar, “Child Outcomes Rating Refresher” was posted in June 2014 <http://utahbabywatch.org/foreiproviders/training/cosf/intro.htm>.

Curriculum developed by the Utah Parent Center (UPC) explaining Part C and transition are on the UCP and BWEIP websites. BWEIP staffs assist EIS providers and their staff in identifying state and national resources for local training needs, as well as tailoring resources to help communities improve child outcomes including social-emotional development. BWEIP is also a co-sponsor, participant, and planner for the statewide BCD Home Visitors Conference each year, where a variety of Part C and Early Childhood topics are presented by state and national experts. IFSP development using Routines Based Assessments (RBI) has been a focus at the 2013 and 2014 conferences.

Data

The BWEIP’s comprehensive, statewide, web-based data system, BTOTS, is used by all EIS providers and includes a detailed electronic child record from referral to exit. BWEIP staff work closely with the BTOTS contractor to ensure ongoing fidelity of BTOTS with current Part C regulations and BWEIP policy and procedures. BTOTS generates alerts and reports for timelines of events such as initial IFSP meetings, new initial IFSP services, and transition conferences. Field definitions were recently added throughout all areas of BTOTS and include descriptions of the data entry field and associated regulatory and policy references. BWEIP supports EIS providers and staff in their understanding and use of BTOTS through monthly teleconferences to train them and answer questions. At BWEIP’s quarterly Grantee Meetings with EIS administrators, updates are given about development progress, enhancement priorities, system security, etc. In addition, “Frequently Asked Questions” documents, a telephone helpline, and an electronic bug/error submission system are available to assist EIS providers with BTOTS.

Technical Assistance

National and Local Technical Assistance Resources. BWEIP staff access both national (e.g., ECTA, DaSy, and University of Kansas Early Childhood Personnel Center) and local (e.g., UPC) resources to stay current with and research questions about Part C regulations, evidence-based practices, etc.

Lead Agency Technical Assistance. The Utah Part C Program Manager is the official liaison for all 15 EIS providers and answers questions from administrators related to Part C regulations and BWEIP policy and procedures. BWEIP staff offers EIS providers assistance by email, telephone, and on-site, depending on the request. BWEIP staff members are identified as points-of-contact based on their areas of knowledge and expertise and are the official contacts to answer additional EIS provider questions and concerns. Targeted technical assistance is provided to an individual, a selected group of EISs, or on a statewide basis as needs are identified. Monitoring data and areas of concern may be used to identify and provide TA. On-site targeted technical assistance is provided more frequently when BWEIP or an EIS has identified an issue or set of issues that require focused attention. The TA visit may center on the exploration of factors that may be contributing to the presenting performance or system concern/issue. Information, resources, and supports are provided based on the contributing factors or identified concerns and issues.

Conferences and Trainings. In order to stay current with the field the Utah Part C Program Manager, Compliance and Education Team Manager, and Data Team/618 Data Manager all attend OSEP Leadership conferences, workshops, and webinars, as well as other relevant national and local conferences and trainings.

In addition to the quarterly BWEIP EIS Grantee Meeting, the bi-monthly EIS Provider Consortium meetings occur statewide on a rotating host/location schedule. Updates on implementing evidence-based practices in Part C, discussion, and resource sharing occur at these meetings. These meetings are expected to be one of the main venues for assisting with implementing improvement strategies in social-emotional development and cultural sensitivity.

EIS providers assure BWEIP through grant provisions that their service providers are appropriately supervised. BWEIP provides a variety of written guidance, electronic training, webinar recordings, and state and national resources on the website that can be used as the basis for topical TA. These mechanisms will be used to guide implementation of improvements in culturally-sensitive service toward social-emotional development.

Accountability and Monitoring

BWEIP conducts annual focused monitoring activities with selected EIS providers. The selection of EIS programs and areas of focus are determined annually, based on state aggregated data, individual program data, and other information. Focus activities may include off-site and on-site monitoring, as well as any additional activities that are deemed necessary and/or appropriate by BWEIP. Off-site monitoring refers to the oversight of EIS provider activities by BWEIP to promote compliance, technical assistance, improvement strategies, corrective actions, sanctions or incentives to ensure timely correction of noncompliance and performance. On-site monitoring refers to any BWEIP oversight activities of EIS providers conducted at their locations to promote compliance and performance that may identify noncompliance, the need for corrective action (CA) TA, improvement strategies, and incentives or sanctions to ensure timely

correction of all instances of noncompliance. Intensive activities may be necessary based on issues identified through general or focused monitoring activities, the complaints/resolution system, or other means, and may also include off-site and on-site monitoring, interviews, follow-up monitoring visits, and any additional activities, as determined necessary by BWEIP.

Noncompliance may be identified at all levels within the State General Supervision System Framework through relevant activities. If BWEIP finds noncompliance with any compliance indicator, The BWEIP will create a written notification of the finding of noncompliance and will then require a CA for full correction of all noncompliance from the individual EIS. All noncompliance, once it is identified and notification is given to the EIS provider, will be corrected as soon as possible, but in no case later than one year from the date of the written notification for findings of noncompliance. BWEIP requires CA for all noncompliance. BWEIP may impose sanctions if noncompliance is not corrected within one year of the written finding of noncompliance, and require that the EIS provide detail in the CA on how they will revise necessary policies, procedures, and/or practices that contributed to any noncompliance. BWEIP will conduct several annual general supervision activities for each EIS to monitor the implementation of IDEA and identify possible areas of noncompliance and low performance. The general activities include (1) collection and verification of BTOTS data for the SPP/APR compliance and results indicators; (2) program determinations; (3) review of the program data accountability plan; (4) fiscal management; (5) collection and verification of 618 data in BTOTS; and (6) targeted TA and/or professional development.

Annual Determination Process

BWEIP makes an annual determination of EIS programs' efforts in implementing the requirements and purposes of IDEA, Part C. Each EIS provider's APR data is aggregated by BWEIP for annual reporting purposes. This aggregated data is used by OSEP to make BWEIP's annual determination. BWEIP disaggregates and evaluates the APR data to make EIS annual determinations based on the criteria established in the federal regulations. The enforcement actions and sanctions applied to BWEIP are also applied to EIS programs.

Dispute Resolution Options

BWEIP will ensure timely dispute resolution through mediation and/or due process. All parties will be allowed to dispute any matter under Part C, including matters arising prior to the filing of a due process complaint, through a mediation process. The mediation process may be requested at any time, and may not be used to deny or delay a parent's right to a due process hearing or to deny any other rights afforded under Part C. Upon resolution by parties, a legally binding written agreement will be created to enforce confidentiality of all discussions that happened during the mediation process. The agreement will also prohibit the use of mediation documents to be used as evidence in any subsequent due process hearing or civil proceeding. This agreement will include signatures by the parent(s), as well as a representative from the BWEIP who is authorized to bind the agency. Finally, a written statement will be included, expressing that the written and signed agreement is enforceable in any state court of competent jurisdiction or in a district court of the United States.

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2(c) Systems Strengths and Areas for Improvement

The Infrastructure Analysis Summary included ideas that stakeholders (SSIP Core Work Team and SSIP Leadership Team) felt would immediately or indirectly influence or impede improvement in relationship to our SiMR, social-emotional development for culturally diverse infants and toddlers. The direct influences and impediments are discussed here as the main strengths and areas for improvement that were identified.

Accountability/Monitoring

Strengths. BWEIP's web-based database, BTOTS, gives staff the ability to monitor progress towards improved social-emotional development for different sub-populations by EIS, and statewide levels at any interval needed. Reports on COSF rating progress are also immediately available on all these levels. Technical assistance is available to EIS programs from BWEIP down to the individual child level progress toward social-emotional development. Written practice guides in the form of web tutorials provide a mechanism for gathering and using data to inform the COSF rating and write functional outcomes.

Areas for Improvement. Challenges to improve social-emotional development in this infrastructure area were cited as limitations of tools used for assessment of social-emotional development, cultural diversity, and quality and consistency of data entry and COSF ratings.

Data

Strengths. BTOTS is a comprehensive database that contains all children's records and provides real-time information on progress toward improved social-emotional development, including IFSP services, IFSP outcomes, IFSP outcomes progress, all assessment scores, visit notes, and entry and exit COSF scores including a written rationale.

Areas for Improvement.

Additional data reports and prompts could easily be added.

Governance

Strengths.

BWEIP sits in the Bureau of Child Development (BCD) in the Utah Department of Health. The mission of the BCD is to support the health and development of Utah families and their children. The bureau also houses the Utah evidenced-based Home Visiting Program, a Developmental Screening program, Early Childhood Utah – a statewide interagency body

whose function is to work to improve Utah's early childhood system, the Longitudinal Data System Project, the Child Care Licensing Program, and the Strengthening Families Protective Factors project. BWEIP has many natural and planned opportunities to interface with these programs and projects. BWEIP is a partner on the activities of all these projects. These partnerships allow us to maximize the use of resources and funding and facilitates interagency agreements.

BWEIP enjoys a very close working relationship with the Utah Schools for the Deaf and the Blind (USDB). USDB receives funds from the Utah Legislature to provide vision and hearing services to children birth to three in Utah. USDB works in conjunction with EIS providers by providing hearing and vision specialist staff for BWEIP children. USDB and the local EIS provider use the same Individualized Service Plan. USDB also uses BWEIP's data database - BTOTS - to enter information such as evaluations, assessments, and services delivered. BWEIP is able to use BTOTS to monitor the USDB program in the same way as it does for the EIS programs.

Areas for Improvement. Several team members mentioned that it would be nice to determine a way to share resources more easily and have a method for keeping agencies and programs up dated as to availability and qualifications.

Fiscal

Strengths. In 2014, OSEP funded, for the first time, a fiscal TA initiative that provided resources and assistance to selected state Part C programs. Twenty-eight states applied for this opportunity and BWEIP was one of 10 states accepted. Some of the areas that were addressed during the year-long finance project were an in-depth articulation of major funding sources with successful state examples of utilization; business case development; and knowledge of insurance terminology and billing. The 10 states participated in two off-site meetings, webinars, phone calls, and were assigned a fiscal mentor. The fiscal TA initiative application required each state to conduct an in-depth self-assessment of the service delivery structure, current finance system, funding sources, data system, challenges, current initiatives, and expectations. BWEIP organized a State Finance Team consisting of state, UDOH Finance, Medicaid, and a local EIS provider staff as well as a group of fiscal collaborators as key informants to work on the BWEIP finance plan.

Areas for Improvement. Many concerns for improvement were cited in this discussion. Sources of public funding such as the State General Fund are not systematically automatically available to keep up with the growth and cost of the BWEIP. The Utah Department of Health must decide if a request can or should be made and then a complicated rationalization process takes place. Although child count and costs continue to rise BWEIP cannot automatically see an increase from the State General Fund. The Utah Legislature is now requiring additional information such as the cost of services. For this purpose, BWEIP secured an outside evaluator to conduct a cost study of intervention services in each location of the state. The results are pending, but it is anticipated that the information will provide data to

demonstrate the need for additional funding. It will also inform BWEIP as to the differing costs of doing business in various areas of the state. This will be used in providing grants to EIS programs in the future as well as information for BWEIP to help determine the viability of billing parents' private insurance; something BWEIP would like to consider as an additional funding source. Increasing caseloads with static federal funding was an issue brought up by the stakeholders. In addition, providers are implementing the new fee scale for the System of Payment and Fees policy and some families choose to reduce or refuse services rather than pay a fee.

Quality Standards

Strengths. The team approach to early intervention, serves as a check for appropriate high-quality services for each child and family. The standardized system supports quality standards across EIS programs. Monitoring reports on many quality standards are available at the BWEIP and EIS level.

Areas for Improvement. Due to lack of governance over developing quality standards in early intervention, concerns discussed were inconsistency in access and delivery of services. Also, lack of financial resources were an issue in providing any standard of evidence-based practices and quality trained culturally competent staff, especially in infant mental health. Expectations for enhanced high quality standards, must be supported by mechanisms including, policy, contracts, practice guides and training.

Professional Development

Strengths. EIS providers have a basic understanding of typical child development necessary for developing COSF ratings. BWEIP has recently focused attention to the implementation and availability of refresher COSF training. BWEIP and the ICC formed a subcommittee for the redesign and enhancement CSPD system in January 2014. BWEIP's Redesigned EI Credential project will facilitate the acquisition of initial competence and confidence of an early intervention provider through 1) Standardized Timely Orientation, 2) Individualized, Accountable Mentoring, and 3) Enhanced Competencies. Examples of enhanced competencies: Depth of training in the areas of social –emotional development including infant mental health, cultural competency and, the COSF process, philosophy, methodology, and scoring.

Technical Assistance

Strengths. Immediate TA is available at the state, EIS program, and EIS provider level to support improving progress in the area of social-emotional development for culturally diverse children.

Areas for Improvement. There were concerns about accuracy and consistency of COSF ratings due to inconsistent technical assistance. BWEIP would like to create standards for general TA and focus monitoring as well travel to onsite locations statewide at regular intervals.

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2(d) State-level Improvement Plans and Initiatives

The most often cited statewide programs and initiatives that may assist with improving social-emotional development were the UDOH/BCD home visiting program that includes the Parents as Teachers (PAT) and the Nurse Family Partnership (NFP) models.

The Bureau of Child Development (BCD) is also developing a home visiting plan that will involve the broader early learning community, including the BWEIP to set standards and offer resources for all home visitors. This is part of BCD's overall Child Development Plan. There will be opportunities for collaboration when home visitors and child care providers participate in training in how to support social-emotional development for young children.

The BWEIP coordinator is on the Board of the Utah Association of Infant Mental Health (UAIMH), an affiliate of the World Association of Mental Health. UAIMH provides support to all public agencies, providers, and parents in regards to topics related to the social-emotional health of infants and toddlers. The purpose of UAIMH is to support and assist with the integration of provider mental health competencies into practice.

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2(e) Representatives Involved

Stakeholders involved in developing SSIP thus far include:

- National TA center consultants
- BCD administration
- BWEIP staff, including administration, program, data, compliance, child find/education, personnel development, finance, parent participation and ICC support staff
- SSIP Work Group and Core Work Team, including representatives of county health departments, school districts, universities, nonprofit agencies, parent resource center, human services, EI service providers, family service coordinators and program administrators, and parents
- ICC participants including representatives of state government, state agencies such as Dept. of Health (DOH), Dept. of Human Services, higher education, Part B 619 Coordinator, family advocates, community support agencies, health care providers, and family members

Additional stakeholders that will participate in Phase II include representatives from:

- Autism Utah
- Utah Children
- Parent groups
- Infant Mental Health
- The Children’s Center
- University of Utah
- Utah Valley University
- Primary Children’s Hospital
- DOH Maternal Child Health Program
- Early Childhood Utah
- Medical Home Partnerships
- BCD Office of Home Visiting
- DOH Family Support
- Autism Project staff – Utah Regional Leadership Education in Neurodevelopmental and Related Disabilities program at Utah State University

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2(f) Stakeholder Involvement in Infrastructure Analysis

The stakeholders above were involved in the infrastructure analysis in a variety of ways. The SSIP Core Work Team members, consisting of BWEIP staff, representatives from and EISs and the ICC worked together to plan activities, assemble resources, summarize and analyze information gathered. The SSIP Core Work Team kept the SSIP Leadership Team, SSIP Broad Stakeholder Group, and BCD administrators informed. The SSIP Core Work Team assisted in planning and analysis of information on calls and helped update stakeholders at ICC and EIS meetings. The broad stakeholders generated state and local information and reviewed SSIP progress at the May 2014, September 2014, November 2014, and January 2015 meetings.