
Integrated Performance Monitoring Report

Performance Period April 2009-June 2009

July 2009

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**STATE OF HAWAII
Department of Education
Department of Health
Child and Adolescent Mental Health Division
Developmental Disabilities Division
Early Intervention Section**

Integrated Performance Monitoring Report
Department of Education
Department of Health
April 2009-June 2009

Introduction

The Integrated Performance Monitoring report provides information about the performance of the Departments of Health and Education in maintaining the necessary infrastructure and provision of services for youth with special needs. The data reflect the capacity of the Departments to provide a comprehensive system of educational, behavioral and mental health supports and services. It presents findings for the fourth quarter of fiscal year 2009 (April 2009-June 2009).

Presently, this report is published quarterly and is part of the commitment of the Departments to maintain quality within an accountable system of care through systematic reporting about the status of the youth with special needs, the services provided, and core aspects of the service system infrastructure. It presents the most current data available so that stakeholders can have access to accurate information about outcomes for youth and how well services are provided for them.

The analysis and publication of trends regarding the population, services, and performance indicators provides Hawaii with a key mechanism for tracking the provision and sustainability of service provision. In addition, it provides for recognition of system strengths, and early detection of emerging issues.

Proposed Changes to Integrated Performance Monitoring Report Effective School Year 2009-2010

In anticipation of significant reductions to the fiscal and human resources of all state agencies, in particular the Departments of Education (DOE) and Health (DOH), the leadership of both departments proposes changes to the report effective July 2009.

Beginning school year 2009-2010, the report will be published biannually. The first biannual report will cover the period from July through December 2009 and be published in January 2010. The second biannual report will be published in July 2010, covering the period January through June 2010. The report will be revised by updating, streamlining and/or consolidating indicators, goals, and benchmarks, where appropriate. The current set of indicators, goals, and benchmarks have been in place since the report was initially published in October 2002.

Department of Education Proposed Changes

With the reauthorization of the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004), several of the DOE indicators, goals, and benchmarks will be realigned and revised to conform with the United States DOE Office of Special Education Program (OSEP) mandated State Performance Plan/Annual Performance

Report (SPP/APR) requirements of IDEA 2004. This is described in the Hawaii's General Supervision and Support Process (GSSP), which has replaced the Continuous Integrated Monitoring and Improvement Process (CIMIP).

The following infrastructure and performance goal indicators will be incorporated into the GSSP:

A. Infrastructure Goal:

- #7: a) 99% of special education students are in eCSSS, b) 95% of IEPs are current and c) 95% of the IEPs are marked complete

B. Performance Goals:

- #1: 90% of all eligibility evaluations will be completed within 60 days,
- #2: There will be no disruption exceeding 30 days in the delivery of educational and mental health services to students requiring such services,
- #3: The suspensions rate for students with disabilities will be less than 3.3 of the suspension rate for regular students,
- #4: 99.9% of students eligible for services through special education or Section 504 will have no documented disagreements regarding the appropriateness of their educational programs or placement,
- #7: The Special Education Services Branch (SESB) will provide technical assistance to all complexes in Level 1 of the CIMIP, and
- #8: 100% of the complexes will submit annual monitoring review reports in a timely manner.

The following infrastructure and performance goal indicators will continue without change in the report. However, at a later date revisions may be necessary to support the current system functions in the Department of Education:

A. Infrastructure Goals:

- #1: Qualified teachers will fill 90% of the special education teacher positions in classrooms.
- #2: 95% of the schools will have 75% or greater qualified teachers in special education classrooms.
- #3: 85% of the complexes will have 85% or greater qualified teachers in special education classrooms.
- #4: 95% of all Educational Assistant positions will be filled.
- #5: 75% of the SBBH professional positions are filled.
- #10: The Department will maintain a system of contracts to provide services not provided through employees.
- #11: Administrative measures will be implemented when expenditures exceed the anticipated quarterly expenditure by 10%.

B. Performance Goals:

- #9: 95% of all special education students will have a reading assessment prior to the revision of their IEP,
- #13: The SBBH Program performance measures regarding service utilization will be met,
- #14: a) 60% of a sample of students receiving SBBH services will show improvement in functioning on the Teacher Report form of the Achenbach, b) Student functioning as described on the Achenbach TRF scores on students selected for Internal Reviews will be equivalent to those of a national sample, and
- #15: System performance for students receiving SBBH services will not decrease.

The Departments have developed and continue to maintain a system infrastructure and performance necessary to meet the needs of students requiring educational and mental health supports. The following goals will be deleted since longitudinal data demonstrates the system has sustained acceptable student and system outcomes or goals may no longer be relevant to current practices:

A. Infrastructure Goals:

- #6: 80% of the identified program specialist positions are filled.
- #8: eCSSS will provide reports to assist in management tasks.
- #9: School, district and state level administrators will use eCSSS.

B. Performance Goals:

- #5 The rate of students requiring SBBH, ASD and/or Mental Health Services while on Home/Hospital Instruction will not exceed the rate of students eligible for special education and Section 504 services requiring such services,
- #6 100% of complexes will maintain acceptable scoring on case-based reviews,
- #10 95% of all special education teachers will be trained in specific reading strategies,
- #11 90% of all individualized programs for special education students will contain specific reading strategies, and
- #12 System performance for students with ASD will not decrease.

The revised 2009-2010 Integrated Performance Monitoring Report will contain relevant data since it will be integrated into the ongoing requirements under IDEA 2004 and will demonstrate current practices within the Department.

Child and Adolescent and Mental Health Division's Proposed Changes

The Child and Adolescent Mental Health Division (CAMHD) has closely reviewed specific CAMHD performance goals and identified areas where streamlining and changes are necessary. These changes are bulleted below with an explanation included. At this point, no new performance indicators have been identified to be included in the biannual reports.

- **New/Recurring Admissions and Discharges** – for clarifying purposes an additional table has been included (Table 1. Admissions and Discharges) which

clearly identifies Total CAMHD registered youth, number of newly admitted youth, youth with repeat admissions, and youth with discharges.

- **Goal: 100% of complexes will maintain acceptable scoring on internal and external reviews** – As a result of the Department of Education’s change in monitoring process to the General Supervision and Support Process (GSSR), this measure is no longer relevant for reporting purposes.
- **Goal: 100% of provider agencies are monitored annually** – As the benchmark for this goal has been continuously met at 100% for the past six (6) fiscal years and this is an operational component of the Performance Management Office, this measure will no longer be reported on.
- **Goal: 85% of those with case-based reviews show acceptable child status (as measured through the DOE External/Internal Review process)** – As a result of the Department of Education’s change in their monitoring process to the General Supervision and Support Process (GSSR), this measure is no longer relevant for reporting purposes.
- **Internal/External Reviews Performance Section** – As a result of the Department of Education’s change in their monitoring process to the General Supervision and Support Process (GSSR), this section of the report will no longer be included.

The Child and Adolescent Mental Health Division will continue to review the report for any areas that may need streamlining due to benchmarks being continuously met, changes in system policies/procedures, or operational changes to the collection of data. Changes will be clearly defined with explanations given.

Status of Key System Commitments

Over the past decade of service system development, key commitments have remained priorities because they represent the infrastructure and practices necessary for Hawaii to maintain an effective system of service delivery that reflects community values. These commitments are tracked and reported on in this report primarily through data presentation, including the tracking and interpretation of trends. Key findings for this reporting quarter are:

1. The system will continue to hire and retain qualified teachers and other therapeutic personnel necessary to educate and serve children consistently.

For this reporting period, the Department of Education allocated more than 2,186 special education teacher positions in the classrooms throughout the state. Eighty-seven point five (87.5%) percent of the positions were filled by qualified special education teachers. The Department maintains its continuous recruitment and hiring of qualified teachers to meet the ongoing needs for all schools and complexes across the State. The Department continues to deal with the challenge of filling all of the educational assistant positions needed in the classrooms. As of June ‘09, 89% of School-Based Behavioral Health services continue to be provided to students by employee-based personnel within the Department and the balance through contracted providers.

During the quarter, the Child and Adolescent Mental Health Division (CAMHD) experienced fewer vacancies in the Family Guidance Centers (FGCs) than in the previous quarter. Over the reporting period, CAMHD saw a slight improvement in filling Care Coordinator (CC) positions, but meeting the targeted performance goal of 95% of positions filled continued to be elusive. There was an average of 89% of Care Coordinator positions filled statewide this quarter, versus 85% filled last quarter.

This quarter, three of CAMHD's FGCs met the goal of having 95% of their care coordinator positions filled – Central with 96%, Windward with 100%, and Hawaii FGC with 96%. The range among all FGCs was between 74% and 100% filled care coordinator positions. With the budgetary constraints, the ability to fill vacant positions will continue to be impacted.

The overall population decreased by one (1) youth this quarter, as compared to the previous reporting quarter of January to March 2009. CAMHD experienced a 2% year-to-year decrease in its registered population compared to the same period last year (April to June 2008).

The statewide average caseload for the fourth quarter was inside the desired range at 18.0 youth per full time care coordinator equivalent (FTE). This is a slight increase in performance from the previous quarter. Caseloads were over the range at Leeward, with 25 youth per care coordinator. This represents a decrease from the Leeward's average last quarter of 30.

2. The system will continue to purchase the necessary services to provide for the treatment of children appropriate to the individual needs of the child.

The Department of Education maintains 30 different contracts with private agencies to provide the following services: assessments, behavioral interventions, behavioral instructional support services, paraprofessional services, psychiatric services, and intensive learning centers and special school.

CAMHD maintains a comprehensive array of community-based services for youth with more intensive mental health issues.

3. The system will monitor itself through a continuous quality management process.

The Department of Education maintains an electronic Comprehensive Student Support System (eCSSS) to monitor and sustain high levels of system performance. Key system performance indicators for this quarter provided evidence of the system meeting the goals for timeliness, accessibility, and appropriateness of support and services.

For this reporting period, 99.9% of students eligible for services through special education or Section 504 had no written complaints or telephone complaints. For SY 2008-2009, three complexes conducted case-based reviews. All three achieved acceptable scores in both Overall Child Status and System Performance areas.

CAMHD's Performance Management system monitors performance at all levels of service delivery and actively uses data to make decisions about adjustments to its program. Overall performance of the system declined somewhat this quarter with 65% of CAMHD's measures met. Please reference page 35 for a detailed listing of those measures that met, exceeded, or did not meet the benchmark. Improvements were noted in several areas. In those areas where a significant decline in benchmark was noted, strategies will be developed to achieve each goal.

The average numbers of youth in out-of-state placements increased by one youth, to an average of five youth in out-of-state placement during the quarter. Hospital-based Residential and Community-Based Residential service utilization decreased from the previous quarter. The percentage of families in the CAMHD population receiving intensive in-home services was the same as last quarter at 26.6%. Multi-Systemic Therapy utilization increased over last quarter (6.3%) to 6.5%. Utilization of Therapeutic Foster Homes increased slightly compared to the previous quarter.

Previous and current performance data for the Departments are available through Departmental websites: (<http://165.248.6.166/data/felix/index.htm> and <http://hawaii.gov/health/mental-health/camhd/library/pdf/ipmr/index.html>).

4. The system will ensure teachers, therapists, and other support staff continue their professional development and improve their skills and knowledge of effective educational and therapeutic methods and techniques.

The Department of Education continued to conduct training for teachers in data collection and analysis; classroom management, strategies, and content; and the referral process, among others. Online courses continue to be offered statewide for teachers in a variety of subject areas to improve classroom instruction. Technical assistance by resource teachers were conducted with follow up observation and visits with special education and regular education teachers. As of June '09, 378 of 380 (99%) of the newly hired special education teachers have been trained on reading strategies for special needs students.

CAMHD's Practice Development Section (PD) continues to provide quarterly training to providers, Family Guidance Center (FGC) staff and agency partners through a Provider Foundation Training series known as "CAMHD 101." CAMHD 101 is a prerequisite to a series of training sessions on evidence-based practice elements called the "What Works Shop" series. During this last quarter, the trainings provided were, "Disrupting Disruptive Behaviors I," (4 sessions – Oahu, Hilo, Kona) "Engagement and Motivation I" (2 sessions – Oahu, Hilo). In addition PD established a What Works Shop website that provides easy access to training materials and a forum to discuss implementation issues: www.whatworksshop.blogspot.com. There is a certification program for those completing the What Work Shop trainings who can demonstrate integration into their practice.

CAMHD continues to disseminate an Internet based search engine via PracticeWise which provides access to an extensive database on evidence-based practices. Like the Blue Menu and Biennial report, the database contains up-to-date information from controlled research findings for psychosocial (non-medication) youth treatments

in the problem areas of anxiety, attention/hyperactivity, delinquency, depression, substance use, traumatic stress, eating disorders, and autistic spectrum disorders.

CAMHD maintains its active participation in the Hawaii Mental Health Transformation Grant (MHT-SIG). As part of the obligation of receiving the MHT-SIG, the State must implement Proof of Concept studies of transformational efforts in both the adult and child populations. A controlled trial of care project is currently in development, which will look at the efficacy of an innovative transformation of the CAMHD systems with federal oversight of the results.

In addition, CAMHD, in partnership with the Queens Family Treatment Center, received a small grant from the MHT-SIG. Funding will be used for training on Life Space Crisis Intervention (LSCI) for residential providers statewide. LSCI is a therapy for turning crisis situations into learning opportunities for youth and families. CAMHD also partnered with the University of Hawaii Department of Psychology, and was awarded an MHT-SIG grant to conduct a study that will look at training and early intervention for youth with emerging schizophrenia and psychotic disorders.

Report Format

Following this brief introductory overview, the report format is as follows:

- The second section reports on the results of Integrated Monitoring (Internal/External Reviews) conducted by the DOE and DOH during the quarter. Complexes and Family Guidance Centers conduct this evaluation of system performance through aggregated data and results of case-based reviews. Community members also participate in the reviews that continue to provide information for local service delivery improvements.
- The third section presents information specific to the DOE. This section has two major sections: Infrastructure and Performance.
- The fourth, fifth, and sixth sections contains information specific to the Department of Health (DOH). Within this section are reports from Child and Adolescent Mental Health Division, the Developmental Disabilities Division, and the Early Intervention Section.

Within each of the sections, primarily in the summary, the Departments include their specific commitments to address issues that are identified. For issues related to Integrated Performance Monitoring, both Departments make the improvement commitments jointly.