Research and Training Center on Service Coordination

University of Connecticut A.J. Pappanikou Center for Excellence in Developmental Disabilities Education, Research, and Service

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The Research and Training Center (RTC) has completed five studies on service coordination. To read what we are learning, see our complete data reports, available in PDF downloadable formats, on our Web site at http://childandfamily.uchc.edu.

SPOTLIGHT: DELPHI STUDY: OUTCOMES AND PRACTICES

Our latest study was designed to gain a consensus among key stakeholder groups on the most desirable outcomes of high-quality service coordination. These outcomes were based on the stakeholders' responses to the following question, "If service coordination were of the highest quality for children, families, and systems, how would you know it?"

Forty-seven focus groups representing six stakeholder groups were held in four focal states, Connecticut, Indiana, Massachusetts, and North Carolina, to identify a list of outcomes. These focus groups involved 395 participants, including 80 family members, 86 program administrators, 144 service coordinators. 54 childcare professionals, 22 service providers (from Indiana only), and 9 physicians (from Connecticut and North Carolina only). Eighty-nine percent of the participants were female and 11% were male. Participants were recruited from a variety of population densities with 36% from rural areas, 36% from suburban, and 28% from urban areas. A majority of participants, between 85 and 94 percent, were Caucasian. African Americans constituted between 1 and 14 percent and Latinos between 1 and 11 percent respectively.

The focus groups resulted in a list of 250 outcomes; 15 of the outcomes were from physicians (N=9), 42 from childcare providers (N=54), 64 from program administrators (N=87), 19 from service providers (N=22), 54 from service coordinators (N=144), and 56 from family members (N=80). This list of outcomes was distributed in the first round of the Delphi study. A Delphi method was selected as the best way to prioritize the outcomes. This technique involves collecting data in a series of "rounds" where participants are polled separately, and each person's opinion is given equal weight in the process of reaching a consensus.

In the first Delphi round after the focus group meetings, each participant received one list of outcomes generated by their respective stakeholder group across all states and a second list of outcomes generated by all of the stakeholders in their state. Participants were asked to rate the desirability of each outcome on both lists as it relates to service coordination. RTC staff then reviewed the newly-rated list created by the individual stakeholder groups across all states, ranked each outcome, and by selecting the toprated outcomes, reduced the list from 250 to 75. This included 6 outcomes from physicians, 11 from childcare providers, 22 from program administrators, 4 from service providers, 14 from service coordinators, and 18 from families.

In the second round, participants received the list of 75 outcomes and were again asked to rate them on their desirability. When these lists were returned, RTC staff ranked and assigned a score to each of the 75 outcomes. Additionally, center staff reviewed and ranked the second list of outcomes from round one that was created across all stakeholder groups in each individual state. The outcomes rated as most desirable and most representative of all stakeholder groups between the two lists were retained. A final list of 8 outcomes was generated and included the following:

- 1. Children and families receive appropriate supports and services that meet their individual needs
- 2. Children reach their full potential
- 3. Children are healthy
- 4. Children's development is enhanced
- 5. Children have successful transitions
- 6. Families are involved in decision making
- 7. Families are informed about resources and services
- 8. People work together as a team

This list of outcomes is consistent with the intentions of Part C of IDEA. Unfortunately, research has shown that a clearly identifiable relationship between ideal service coordination outcomes and the practices of service coordinators is not always evident. Additional studies recently completed by the Research and Training Center have revealed a lack of coordinated efforts between and within states with regard to training and practices of service coordinators which has unfortunately lead to inequitable service delivery for families. Therefore, what families expect from service coordination and what they receive are two different things. We hope that by providing the service coordination field with a common set of outcomes, we can take the first step toward consistent. high-quality service ensuring coordination for families and children.

The next step in this study involves achieving consensus on the specific practices that lead to the accomplishment of the 8 outcomes identified above. We are currently completing focus groups for the second Delphi study, which will identify practices related to outcomes of high-quality service coordination. Beginning in April 2001, 39 focus groups were convened in the four focal states with the following four stakeholder groups: program administrators, families, service providers (in Indiana only), and service coordinators. Participants represented diverse locations, cultures, and socioeconomic groups. Over 1,000 practice statements resulted, and they are currently undergoing data analysis.

WHAT'S COMING UP?

As previously mentioned, RTC is currently in the process of conducting additional focus groups in the four focal states (CT, IN, MA, and NC) to determine the practices that lead to the 8 highquality service coordination outcomes listed above. In addition, we are recruiting 100 families in our four focal states to participate in individual interviews that center around the question "If service coordination was working for your family, how would you know it?" This information will be compared to data collected through the focus groups. These data will eventually result in a list of outcomes and recommended practices for service coordination. This will be the focus of our next newsletter.

For more information, please contact:

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Special Note: On July 1, 2001, the Division of Child and Family Studies became a part of the University of Connecticut A.J. Pappanikou Center for Excellence in Developmental Disabilities Education, Research, and Service (formerly a University Affiliated Program).

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