This final report describes the objectives, activities and outcomes of a federally funded initiative to train and assist early childhood interagency teams in a model of planning systems and services for all young children, including children with disabilities and other special needs. The project is based on the value of stakeholder ownership in decision making. A key requirement asked of communities and state planners is to agree to establish a planning team of policy-level individuals including administrators, parents, practitioners, education agencies, childcare, Head Start and others. The project then assists the team to establish a shared goal or vision; assess policies and resources; develop action plans; target resources; and evaluate implementation. The unique systems-level focus of the training and technical assistance provided increases the ability of interagency teams to create coordinated systems of early childhood services, improve communication, blend resources so that all children can be together in inclusive settings, and make scarce resources go farther. The report includes information about each replication site's stakeholders, vision, objectives and final products. Also provided is a bulleted list of lessons learned, information about the project's dissemination activities and evaluation outcomes, and copies of four final documents produced by the project. (Author/SG)
The Collaborative Planning Outreach Project: 
Building Comprehensive Early Childhood Systems 
H324R 9800 47

Outreach Project
(CFDA No. 84.324R)
10/98 - 9/01 - 9/02 (no cost extension)

Final Report

Submitted to the Office
Of Special Education Programs, USDOE

Barbara J. Smith, Ph.D.
Principal Investigator
School of Education
Center for Collaborative Educational Leadership
University of Colorado at Denver
1380 Lawrence, Suite 650
Denver, CO 80204
303.556.3324 (voice)
303.556.3310 (fax)
barbara_smith@ceo.cudenver.edu

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PROJECT SUMMARY

The Collaborative Planning Project (CPP) was a federally-funded initiative to train and assist early childhood interagency teams in a model of planning systems and services for all young children — including children with disabilities and other special needs. This model was developed by the Research Institute for Preschool Mainstreaming, Grant # H024K9002. The institute studied the strategies used by communities nationwide who felt that they were making progress toward creating community-wide systems and services for all young children and families. While a great deal of attention has been paid to the short and long-term impact of quality early childhood experiences for children, families and society, there exists a severe shortage of quality programs (Cost Quality and Child Outcomes Study Team, 1995). Secondly with mounting evidence of the importance of including children with disabilities in typical early childhood settings, the U.S. Department of Education reports that less than 50% of young children with disabilities are in natural environments; and a shocking 40% are educated in separate classes or school (USDOE, 1996).

With concerns like these and the shrinking of resources, planners need to explore ways to stretch every resource while also proving program quality. The Collaborative Planning Project is based on the value of stakeholder ownership in decision-making. A key requirement we ask of communities and state planners is to agree to establish a planning team of policy-level individuals including administrators, parents, practitioners, education agencies, childcare, Head Start and others. We then assist the team to establish a shared goal or vision; assess policies and resources; develop action plans; target resources; and evaluate implementation. The unique systems-level focus of our training and technical assistance increases the ability of interagency teams to create coordinated systems of early childhood services, improve communication, blend resources so that all children can be together in inclusive settings, and make scare resources go farther.

PROJECT OBJECTIVES

Objective I: Manage Project Effectively. As described in the original proposal, we utilized effective management techniques to ensure that: a) quality personnel were hired, b) all proposed activities were carried out, c) all objectives were met, d) evaluation plans were carried out, and e) resources were used wisely. Staffing during the final year of the Collaborative Planning Project included the following personnel:

Barbara Smith, Principal Investigator
Linda Frederick, Project Coordinator
Alison Ramsey, Professional Research Assistant
Phil Strain, Evaluation Coordinator (in kind FTE)
Deb Nolan, Administration/Budget Manager (in kind FTE)
Effective Use of Resources – Budget Justification

<table>
<thead>
<tr>
<th>As of 11.22.02</th>
<th>Budgeted</th>
<th>Spent</th>
<th>Difference</th>
<th>Outstanding</th>
<th>End*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries</td>
<td>$150,070.00</td>
<td>$130,513.39</td>
<td>$19,556.61</td>
<td>$0.00</td>
<td>$19,556.61</td>
</tr>
<tr>
<td>Benefits</td>
<td>$29,706.00</td>
<td>$28,881.03</td>
<td>$824.97</td>
<td>$0.00</td>
<td>$824.97</td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>$115,446.23</td>
<td>$126,330.35</td>
<td>($10,884.12)</td>
<td>$5,288.33</td>
<td>($16,172.45)</td>
</tr>
<tr>
<td>Travel</td>
<td>$24,890.00</td>
<td>$29,099.10</td>
<td>($4,209.10)</td>
<td>$0.00</td>
<td>($4,209.10)</td>
</tr>
<tr>
<td>F &amp; A</td>
<td>$124,843.77</td>
<td>$122,781.34</td>
<td>$2,062.43</td>
<td>$2,062.45</td>
<td>($0.02)</td>
</tr>
<tr>
<td>Total</td>
<td>$444,956.00</td>
<td>$437,605.21</td>
<td>$7,350.78</td>
<td>$7,350.78</td>
<td>$0.01</td>
</tr>
</tbody>
</table>

*Salaries: Changes in personnel over the project’s three year time period were reported in each year’s continuation grant, resulting in $19,556.61 difference.

*Benefits: Changes in personnel contributed to the difference of $824.97.

*Operating Expenses:
Due to changes in personnel and geographical locations of 50% of replication sites, an independent contractor was hired to facilitate work with four sites in Rhode Island.

*Travel:
Presentations on project findings at key national early childhood conferences were added to this line item, increasing this amount by $4,209.10.

*Facilities & Administrative Costs:
The University of Colorado at Denver’s negotiated rate for Indirect Cost was 39%.

Objective II: Finalize Replication Sites. The second objective in the outreach process was to verify site participation and establish an understanding of the process involved and secure commitment by all parties. The Collaborative Planning Project (CPP) was based upon a planning model that requires all stakeholders or representatives to participate. Therefore, the agreements with the sites stress the importance of team make-up. The two critical features of the site teams were that:

1) Members reflect the level of planning, e.g., systems planning requires the participation of representatives of systems-level issues (policy makers from the community such as school district superintendents, elementary school principals, social services directors, school board members, childcare association presidents, Head Start directors).

2) Members reflect all stakeholders: families; administrators; trainers; early intervention, child care, Head Start, and early elementary teachers; other local planning groups such as systems change teams; and local Interagency Coordinating Councils, etc.
All replication sites met participation criteria by demonstrating the following:

a) a commitment to expanding inclusionary options,
b) a commitment to collaborative decision-making,
c) a financial or other in-kind commitment to the Outreach effort,
d) a willingness to meet on a monthly basis as teams or work groups,
e) a willingness to participate in evaluation procedures, and
f) equal access policies.

Objective III: Provide Replication Training.

YEAR ONE – 1999-2000

<table>
<thead>
<tr>
<th>Community/-Stakeholders</th>
<th>Replication Site Vision, Objectives &amp; Final Products</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denver, CO</td>
<td></td>
</tr>
<tr>
<td>-Public Schools</td>
<td></td>
</tr>
<tr>
<td>-Part C</td>
<td></td>
</tr>
<tr>
<td>-Child Development Center</td>
<td></td>
</tr>
<tr>
<td>-Community DD Services</td>
<td></td>
</tr>
<tr>
<td>-Social Services</td>
<td></td>
</tr>
<tr>
<td>-Health</td>
<td></td>
</tr>
<tr>
<td>-Hospital NICU consortium</td>
<td></td>
</tr>
<tr>
<td>-Parents of young children</td>
<td></td>
</tr>
<tr>
<td>-CO Department of Education</td>
<td></td>
</tr>
<tr>
<td>-CO Department of Human Resources</td>
<td></td>
</tr>
<tr>
<td>-CO Department of Health Care Financing</td>
<td></td>
</tr>
<tr>
<td>-The Children’s Hospital</td>
<td></td>
</tr>
<tr>
<td>-JFK Partners (UAP)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>To make the early childhood systems(s) in Denver work better; starting with service coordination, IFSP development, child identification and referrals.</td>
</tr>
<tr>
<td></td>
<td>To analyze current status and develop written procedural interagency agreements for service coordination in accordance with Part C.</td>
</tr>
<tr>
<td></td>
<td>Interagency Memorandum of Understanding for Part C</td>
</tr>
<tr>
<td></td>
<td>Service Coordination</td>
</tr>
<tr>
<td></td>
<td>Shared Consent Form</td>
</tr>
<tr>
<td></td>
<td>Shared IFSP Form</td>
</tr>
<tr>
<td>Acadia Parish, LA</td>
<td></td>
</tr>
<tr>
<td>-Head Start parents</td>
<td></td>
</tr>
<tr>
<td>-Head Start teachers</td>
<td></td>
</tr>
<tr>
<td>-Even Start Home Visitors</td>
<td></td>
</tr>
<tr>
<td>-School Board</td>
<td></td>
</tr>
<tr>
<td>-Child Search (Child Find)</td>
<td></td>
</tr>
<tr>
<td>-Title I</td>
<td></td>
</tr>
<tr>
<td>-Cooperative Extension Services</td>
<td></td>
</tr>
<tr>
<td>-Health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>To develop a networking system for all available services for children, birth through kindergarten.</td>
</tr>
<tr>
<td></td>
<td>To outline components of and define responsibilities for the network. To raise public awareness for the networking system.</td>
</tr>
<tr>
<td>Las Vegas, NV</td>
<td></td>
</tr>
<tr>
<td>-Special Children's Clinic</td>
<td></td>
</tr>
<tr>
<td>-Equal Opportunity Board</td>
<td></td>
</tr>
<tr>
<td>-District Preschool</td>
<td></td>
</tr>
<tr>
<td>-NV 619 Coordinator</td>
<td></td>
</tr>
<tr>
<td>-Family Learning Center</td>
<td></td>
</tr>
<tr>
<td>-Special Children’s Clinic</td>
<td></td>
</tr>
<tr>
<td>-Division of Child &amp; Family Services</td>
<td></td>
</tr>
<tr>
<td>-Seigle Center</td>
<td></td>
</tr>
<tr>
<td>-Part C</td>
<td></td>
</tr>
<tr>
<td>-Air Force Base Child Development Center</td>
<td></td>
</tr>
<tr>
<td>-NV Parent Training &amp; Info Ctr.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>To develop a shared vision and a vehicle of communication that results in the enhancement of early childhood services for children aged birth through eight and their families</td>
</tr>
<tr>
<td></td>
<td>To raise public awareness of community resources for young children and their families.</td>
</tr>
<tr>
<td></td>
<td>Contact information for Child Find resources was disseminated through participating agencies.</td>
</tr>
</tbody>
</table>
### Westerly, RI
- Family representatives
- Parent Partnership Program
- Parents as Teachers
- Head Start
- Community Action
- Early Intervention
- Public School
- YMCA Nursery School

Contributing Ad Hoc Members
- RI Dept. of Health
- Special Education Director
- Womens’ Health Center

**To increase the involvement of parents and the community at large in the education and care of their children ages birth to six with and without disabilities with emphasis related to the needs of unidentified, unserved, and underserved children who have developmental delays and behavioral challenges.**

(a) Strengthen linkages with physicians
(b) Provide training and other supports for families to understand child development and access early childhood systems.

- Wheel of Child Development for families
- “Prescription Pad” referral form for physicians
- Physician Outreach Effort
- Child Development workshops for families
- Parents as Teachers (grant)
- Gift Bags (information for new parents)
- Even Start Grant

### Central Falls, RI
- Public Schools
- YMCA
- Child Opportunity Zone
- Early Head Start
- Early Intervention Services
- Families with young children
- Head Start
- State Head Start Office
- Progreso Latino
- Parents as Partners
- Visiting Nurses

**To promote quality, inclusive, culturally competent and seamless early education & care services.**

To develop strategies to ensure that (1) all agency staff & families have equal access to a common set of information on community resources related to children and their families and (2) families have access to this information either via a key community agency or via a call to the resource and referral line.

- “Single-stop” resource & referral phone line along with a computerized service directory of early care and education resources in the area.

### YEAR TWO – 2000-2001

<table>
<thead>
<tr>
<th>Community/Stakeholders</th>
<th>Replication Site Vision, Objectives &amp; Final Products</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Longmont, CO</strong></td>
<td>To work together to examine, create, and implement optimal early childhood care, support, and education for children (birth through five) and their families in the St. Vrain community.</td>
</tr>
</tbody>
</table>
| - Public Special Ed Preschool
- Mental Health
- Head Start
- Private Preschool
- Public Health
- Childcare Center
- Part C
- DD Service Providers
- Family Connects
- Rocky Mountain Preschool
- Bright Beginnings
- Children’s Family Services | To develop a collaborative system to ensure (1) the availability and accessibility for early identification of children with special needs or who are at risk for future developmental concerns and (2) family supports. |
|                         | Developed Community Resource Matrix                   |
|                         | Revised State Early Childhood PR Brochures             |
|                         | Created Early Childhood Interagency Council            |

| Cranston, RI            | To increase collaboration among agencies providing early |


- Early Intervention
- Early Start
- Head Start
- Easter Seals
- Child Opportunity Zone
- Public Schools
- Project READY
- Child Care Network
- YMCA
- PTA President (family member)
- Kid’s Kingdom
- Sunshine Preschool

**South Kingstown, RI**
- Children’s Mental Health
- Diversity Task Force
- Early Intervention, Health
- Early Literacy Program
- Elementary School Admin.
- Family representatives
- First grade teacher
- Head Start
- Parents as Teachers
- Child Outreach
- Community Action
- School Committee
- School superintendent
- Child Development Center
- YMCA

Contributing Ad hoc members:
- Child Care Center
- Eliminate Poverty Campaign
- Welfare to Work Program
- Health Center
- Housing Authority
- Library
- Parks & Recreation
- Police Department

**Objective IV: Information dissemination and product development.**

Project materials have been shared with project participants, conference presentation attendees (see following list), OSEP project directors, NEC*TAS support staff, and NEC*TAC website “Keys to Inclusion”,
http://www.nectas.unc.edu/inclusion/collab/natlcollab.asp

**Presentations** on the Collaborative Planning Project include:
- 1999 International DEC Conference, Washington DC
- 1999 CASE Conference, Phoenix, AZ
- 2000 CEC Conference, Vancouver, BC
- 2000 NEC*TAS Inclusion Conference, Chapel Hill, NC
- 2001 NAECY Conference, Anaheim, CA
Papers developed by the Collaborative Planning Project for Comprehensive Early Childhood Systems at the University of Colorado at Denver include (also attached):


Replication guidebook – A Road Map for Facilitating Collaborative Teams, by Peggy Hayden, Linda Frederick and Barbara J. Smith – published by Sopris West (2003) and is attached. The guidebook will be advertised by Sopris West in their catalog. We will send notice of the book’s availability to Part C and 619 Coordinators, Technical Assistance Networks, Early Childhood Projects, State Interagency Coordinating Councils, Head Starts, NAEYC and other related organizations thru their listservs and email contact information. Chapters of the guidebook discuss the following topics:

Chapter I – The Road Ahead - Introducing the Collaborative Planning Project
- Use of This Manual
- Overview of CPP and Local CPP Teams
- CPP Model

Chapter II – The Tour Guide- Facilitator Selection and Role
- Team Stages and Behavior
- Individual Team Member Impact
- Facilitator Role and Tasks

Chapter III – Getting Started – Establishing Shared Leadership Commitment and a Team Structure for Collaboration
- Getting Shared Leadership Commitment and Recruiting Collaborative Team Participants
- Conducting the Organizational Meeting to Get Acquainted, Assess the Current Community Context, and Determine the Team’s Initial Focus
• Creating an Effective Structure for the Team’s Operation Including Team Ground Rules Are We There Yet?

Chapter IV – Fellow Travelers for the Journey – Developing Meaningful Stakeholder Relationships and Involvement
• Fostering Team Member Commitment
• Fully Engaging a Variety of Stakeholders
• Developing Strong Teams Built on Effective People-to-People Relationships
• Are We There Yet?

Chapter V – Determining the Destination – Establishing a Shared Vision
• Developing a Shared Team Vision Meaningful to All Team Members
• Extending the Vision Beyond the Team to Key Community Stakeholders and Keeping It Alive Over Time
• Are We There Yet?

Chapter VI – Mapping the Journey – Setting Priorities and Action Planning
• Setting Priorities
• Action Planning
• Are We There Yet?

Chapter VII – Being on the Road – Implementing Plans, Allocating Resources, and Evaluating Accomplishments and Teamwork
• Implementing Action Plans
• Allocating Resources
• Monitoring and Evaluating Team Accomplishments and Teamwork
• Are We There Yet?

Chapter VIII – Checking the Rearview Mirror – Lessons Learned
• Helping Teams Transition from One Facilitator to Another
• CPP Top Ten Rules of the Road for the Journey Toward Systems Change
• Concluding Remarks

Chapter IX – Looking Through Our Scrapbook – Profiles and Products from CPP Teams
• Crowley, LA, Acadia Parish Team Profile
• Central Falls, RI, CPP Team Profile
• Cranston, RI, CPP Team Profile
• Denver, CO, CPP Team Profile
• Las Vegas, NV, Greater Metropolitan Clark County CPP Team Profile
• South Kingstown, RI, CPP Team Profile
• Longmont, CO, St. Vrain Early Childhood Council CPP Team Profile
• Westerly, RI, CPP Team Profile

Objective V: Conduct evaluation activities of the project and outcomes.
<table>
<thead>
<tr>
<th>Evaluation question</th>
<th>Measurement</th>
<th>Outcomes</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did we do what we said we would do?</td>
<td>List of trips completed</td>
<td>6 visits minimum to each site</td>
<td>Sites were not asked to reimburse facilitators for travel costs, because all but two sites were within driving distance of facilitator’s homes.</td>
</tr>
<tr>
<td></td>
<td>Event evaluations</td>
<td>Collected &amp; compiled for each meeting with CPP facilitator</td>
<td>Majority of comments rated team member experience as positive</td>
</tr>
<tr>
<td></td>
<td>Community Profile</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Final Team Survey</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Copies of brochures, letters, mail lists, workshops, published manuscripts,</td>
<td>Mail lists for each site</td>
<td>Disseminating through conference presentations, ERIC, and website have been cost effective.</td>
</tr>
<tr>
<td></td>
<td>website</td>
<td>5 published papers</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>8 presentations at national conferences</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 website</td>
<td></td>
</tr>
<tr>
<td>Did the project achieve the anticipated outcomes?</td>
<td>Stakeholder questionnaires</td>
<td>Collected pre and post participation</td>
<td>Documented in Replication Guidebook</td>
</tr>
<tr>
<td></td>
<td>Written vision and action plans</td>
<td>Documented in Replication Guidebook</td>
<td>Disseminated to individual team members, all CPP sites</td>
</tr>
<tr>
<td></td>
<td>Written policy recommendations</td>
<td>Documented in Replication Guidebook</td>
<td>State and local collaborative efforts</td>
</tr>
<tr>
<td></td>
<td>Number of inclusion sites, pre, post or planned</td>
<td>Documented in Community Profiles of Replication Guidebook</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community Resource Maps</td>
<td>Community Profile</td>
<td>Community Profile</td>
</tr>
<tr>
<td></td>
<td>Number of products, publications &amp; training events</td>
<td>5 Papers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Produce &amp; disseminate Replication Guidebook</td>
<td>8 Presentations</td>
<td>Complete</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8 Outreach Sites</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>In press by Sopris West 12/02. Marketed via Sopris West catalog, email and</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>listservs</td>
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</table>
Lessons Learned from the Collaborative Planning Project

CPP Top Ten Rules of the Road for the Journey Toward Systems Change
From *A Road Map for Facilitating Collaborative Teams*,
Hayden, Frederick & Smith, 2002, Sopris West

1. **You can't mandate what matters.**
   - The more complex the change, the less it can be forced.
   - Mandates are important. But, for desired change to become reality, people must act.
     For action to occur, people need not only external motivation (e.g., mandate) but also internal motivation (they see the need).
   - People need a plan for implementing the mandate or change along with the necessary knowledge, skills, resources and a feedback loop to ascertain if the change is beneficial.

   **Site Report:** “While not visible, there are “boundaries” that separate state agency representatives from local program directors, and, as such, they do not operate as equals or colleagues in a functional sense. Thus, state agency representatives may encourage the development of a local vision, but they can not impose their vision upon the locals. Ultimately, state level representatives must find ways to cultivate leadership at the local level so that the vision resulting in systemic change is homegrown.” Greater Metropolitan Clark County (Las Vegas, NV) CPP Team

2. **Collaborations must be needs driven and context embedded.**
   - Collaboration is not an end in itself. Use it as a means for team members to resolve a common problem/address issues of mutual need.
   - New policies, procedures, forms, services, or activities proposed by the team should be embedded in the current context in order to be sustainable over time.
   - For collaborations to be successful, they must be based on needs perceived as important and relevant to the collaborators.
• Involve stakeholders beyond the core team whose support is needed for implementation in planning and evaluating the collaboration so that plans will be based on their needs and relevant to their contexts.

• There are various methods of effectively involving stakeholders. Choose those that are meaningful both to those stakeholders and to the team.

**Site Report:** “Each agency in this rural, low income area was well aware of the needs and challenges of stretching resources. The CPP team meetings provided a chance for individuals to think outside the specific demands of their daily work and look at the early childhood system comprehensively. With few additional resources, they were able to compile a very detailed and user-friendly resource guide to increase accessibility to the resources available in the community.” Acadia Parish, LA CPP Team

3. **Local collaborations are facilitated by both top down and bottom up support.**

While people at the local level are the ones who must ultimately plan, implement and evaluate the collaborations, state agencies can support local collaborations via:

• demonstration that collaboration is a priority through resource allocation, policies and modeling collaboration at the state level;

• training, technical assistance and other resources;

• recognition such as showcasing sites;

• opportunities for networking and mentoring among sites; and

• clarification of legal or other issues that appear to be collaboration barriers.

**Site Report:** The state level RI Early Childhood Interagency Task Force used its annual statewide conference on early childhood collaboration to showcase the efforts of CPP sites and other collaborative endeavors and to facilitate networking among local teams. Collaborations in additional communities were stimulated as a result. The Task Force also provided an Interagency Technical Assistance Guide including a side-by-side of legal requirements, suggested collaboration strategies, information on key resources in the state, and local team profiles and samples.

**Site Report:** CPP teams impacted state systems as follows.

**Acadia Parish, LA:** CPP Team members are now part of a statewide task force to develop Performance Indicators for all Pre-K students in Louisiana.

**Denver, CO:** They identified service coordination and its lack of “coordination” as the team’s biggest challenge. They communicated that to the state which responded by
dedicating resources to statewide training/TA for core competencies on service coordination, rewriting state guidelines for using family resources and insurance, and working closely with the Denver team to create an understanding of funding streams and a hierarchy for using different resources. The Denver team now sees state agencies as being much more accountable and responsive to local day-to-day challenges.

St. Vrain, CO - Provided input as a team on revisions to the CO Department of Education’s “Staying on Track” brochure.

4. **Commitment to collaboration evolves over time as a result of people working together on mutually beneficial activities.**

   - As much commitment as possible is desirable at the beginning, but in reality, this buy-in is commitment “in concept”.
   - Genuine commitment comes after the team has worked together long enough to see team results that they perceive are worth their time.
   - Commitment is a by-product of successful collaborations.

**Site Report:** “After working together over time, we no longer see kids as belonging to any one agency. These are Westerly’s kids.” Westerly, RI CPP Team

5. **Build a vision/team goals based on assessment of the current community context.**

   - Make the vision as concrete and doable as possible so that it will seem “real” to team members and not just “words on paper”.
   - It will be easier for people to think about how they would like to see things in the future (vision) if they assess first what is happening in their current context.
   - Although the team should articulate a vision early on, a “true” and meaningful vision will take time to emerge, evolving after team members have had a chance to have success at working together and begin to have team “ahas” about the possibilities that collaboration can bring. When the vision becomes truly meaningful, it will ignite dedication to stay the course even when obstacles appear.

**Site Report:** We have made so much progress but also a long ways to go and much to do in this community. We just lost in the election that would have raised funds for an early childhood center and many more schools for the district. We’ll try again next year!” St. Vrain, CO CPP Team
6. **Think big and start small.**
   - Thinking big helps the team cultivate a “systems” perspective and see how the challenges they are addressing fit into the big picture of the community.
   - The big picture is often too abstract for many people and can seem overwhelming - “we’ll never be able to do that!”
   - Starting small gives the team something concrete on which to work.
   - Help the team choose initial activities that will give them a quick and public victory.

<table>
<thead>
<tr>
<th>Site Report: Systems change doesn’t happen in one electrical moment – seemingly small changes impact people and systems!” Denver, CO CPP Team</th>
</tr>
</thead>
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<tr>
<th>Site Report: “We wanted to our services be to ‘a good fit’ for families rather than forcing families to fit our services. We were able to break down barriers to accessing services in our community. Because of our work, families will no longer have to experience several intake processes and tell their stories several times.” Central Falls, RI CPP Team</th>
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</table>

7. **Having an outside facilitator is not essential - but very helpful, particularly during the team’s early stages.** A “neutral” facilitator:
   - is perceived by all team members to be non-partial;
   - allows everyone to be a team member, focusing on accomplishing team work rather than having to be concerned about running the meeting;
   - can focus on helping the team build its capacity rather than promoting his/her agenda; and
   - should remain with the team until it is self-sustaining as evidenced by being organized as a team, having accomplished at least one concrete task, and having a plan for further collaborations. This can usually be accomplished in 5 to 6 meetings (every 4 to 6 weeks).

8. **Sustaining the collaboration requires at least one champion on the team who**
is willing to provide leadership to bring the team together;
is committed to collaboration and making it work;
is perceived by the team to be fair, a good leader with the team’s interest in mind (not only his/her own);
has good facilitation and organizational skills related to the mechanics of meetings, keeping the group on target; and
can carry on as facilitator if an external facilitator is used in the team’s early stages and then leaves.

9. **Focus training, technical assistance and team facilitation on capacity building.**
- Help team members build positive working relationships.
- Support learning how to operate as a productive team using effective meeting and organizational dynamics.
- Build team member knowledge and skills related to the task(s) they choose to tackle, because plans don’t perform, people do.

10. **Team facilitation is a developmental process with the facilitator’s role evolving commensurate with the team’s capacity.**
- As the team is forming, the facilitator is a foundation builder.
- When the team is storming and expressing differing perspectives, the facilitator is a referee/nominalizer.
- When the team has solidified and is tending to focus more on socializing than working, the facilitator is a task manager.
- When the team becomes high performing, the facilitator is an observer and process adviser.
- When the team reaches a key turning point due to task accomplishments, changes in the community context or membership turnover, the facilitator supports the team in reflecting on its what it has done and how it has worked together so that the team can transform itself in order to stay relevant to team member needs and the community context.
Developmental Facilitation: Helping Teams Promote Systems Change

Collaborative Planning Project for Planning Comprehensive Early Childhood Systems

Peggy Hayden
Linda Frederick
Barbara J. Smith
Alison Broudy

April 2001

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The Collaborative Planning Project (CPP) for Comprehensive Early Childhood Systems was a federally funded outreach project based at the Center for Collaborative Educational Leadership, University of Colorado-Denver. Funded through the Individual with Disabilities Education Act, the project provided training and technical assistance (TA) to local interagency teams to do collaborative planning at the community systems level. The project’s purpose was to facilitate the establishment of local collaborative teams to work on one or more mutually agreed upon challenges associated with putting in place a long term vision for systems change to achieve inclusive, quality, comprehensive early care and education services to young children birth through 5 (or up to age 8) and their families. The project provided a facilitator to work with local community teams for approximately six sessions, after which, it was hoped that the team would be self-sustaining, having: (1) organized as a team; (2) accomplished at least one concrete task; and (3) put in place a team structure and a written plan for further collaborations (Hayden, Smith, Rapport, and Frederick, 1999).

Implementation of the CPP model yielded learnings related to how internal or external facilitators can support teams in promoting meaningful change in their communities. These learnings are presented in this paper as a model for developmental facilitation. The paper is organized as follows:

1. an overview of evidence-based change and team development theories related to this topic and
2. a description of a model for facilitation through five developmental stages of change: (a) current context, (b) change initiation, (c) growing competence, confidence & commitment to the change, (d) full change implementation, and (e) desired change now current context. In the descriptions of these five developmental levels, reference is made to various activities that the facilitator can use with the team. Many of these
activities can be found in another paper produced by this project, *Tasks, tips, and tools for promoting collaborative community teams* (Hayden, Smith, Frederick, and Broudy 2001).

**Overview of Evidence-Based Change and Team Development Theories**

Systems change is a process of moving through various developmental stages. It is not an isolated event. Movement through these stages necessitates changes not only in the system but also in the agencies and individuals that compose the system. It also requires various levels of intervention strategies used by individuals who serve as system change facilitators (Fullan, 1993; Fullan, 1990; Senge, 1990; Fay and Doyle, 1982; Hall, Wallace and Dossett, 1973).

**Change Process:** Peter Senge (1990) depicts the change process as movement through various developmental stages beginning with an assessment of the current context and a determination of a vision for the desired change (how the current context will be changed at some point in the future). As systems and people begin to change, they experience “creative tension” which results in conflicting feelings of wanting to go back to the “old ways” of what was the “current context” as well as motivation to move on toward the vision. Success is reached when the vision for the desired change is achieved. This results in the desired change becoming the new current context, that is, a point for reassessment and creation of a new vision. Moving from the “current context” to the “vision of the desired change” necessitates having (1) a clear sense of direction or vision, (2) strategies to ensure that teams and individuals have/acquire the necessary skills, incentives and resources needed to implement the change, and (3) an action plan identifying activities, timelines and persons responsible for moving from the current context to achieving the vision (Ambrose, 1987).

**Team Behaviors and Individual Team Member Impact:** People working together to affect change also go through changes themselves, both collectively and individually. (Sparks, 1994). Collectively, teams demonstrate various behaviors as they evolve: forming, storming, norming, performing and transforming (Fay and Doyle, 1982). According to the “Concerns-Based Adoption Model” (C-BAM), individuals on these teams also go through
various levels of concern (motivation), decision (about what to do) and behaviors (based on their concerns and decisions) (Hall, Wallace and Dossett, 1973).

**Facilitator Roles and Tasks:** Because of these various developmental stages in the change process itself and the involved teams and individuals, persons in the role of system change facilitator must adapt accordingly rather than use a single approach. The facilitator's role begins as director and foundation builder as the team is forming when the team is assessing its current context. The facilitator's role shifts to that of capacity builder, referee and nominalizer as the team is storming when the team initiates the change process and determines its direction/vision. The team must then develop a plan and initiate implementation. This is referred to as forming during which the facilitator is task manager, coach and supporter. When the team is performing the desired change, the facilitator helps sustain this change by serving as delegator and process advisor and cheerleader for the team's accomplishments. Full change implementation results in the "desired change" becoming the "new" current context. The facilitator then assumes the role of analyst and synthesizer assisting the team in reflection as it transforms itself.

Figure 1 presents a “Developmental Facilitation Model” which depicts an integration of these various change and team development theories. The remaining sections of this paper explore each of the five developmental stages of the change process depicted in Figure 1 including the accompanying team behaviors, individual team member impact and facilitator roles and tasks. It is important to note from the outset that these are “general stages” of evolution and there is no guarantee that a particular team will successfully go through all five developmental stages. A variety of variables can cause the team to stall or stop completely in an early stage. Moreover, even teams at a “higher” stage (e.g., norming or performing) can revert to an earlier stage of team development. This may be due to factors such as: turnover in team membership (in which they may need to re-form and re-storm in order to re-norm); inadequacy of training, incentives or resources necessary for making the change work; too many changes being imposed at one time, etc. Finally, there is no set period of time allocated to each of these developmental stages. This varies from team
to team. With these caveats, this Developmental Facilitation Model is intended to provide facilitators with useful information and strategies to support teams and individuals engage in successful systems change.

Figure 1

Developmental Facilitation Model
How Facilitators Can Support Teams & Individuals in the Change Process

<table>
<thead>
<tr>
<th>DEVELOPMENTAL LEVEL RE: THE CHANGE PROCESS</th>
<th>CURRENT CONTEXT</th>
<th>CHANGE INITIATION: COMPLIANCE WITH LOSS OF SECURITY &amp; SENSE OF COMPETENCE</th>
<th>GROWING COMPETENCE, CONFIDENCE &amp; COMMITMENT</th>
<th>FULL IMPLEMENTATION OF DESIRED CHANGE</th>
<th>DESIRED CHANGE ACHIEVED - NOW CURRENT CONTEXT</th>
</tr>
</thead>
<tbody>
<tr>
<td>TEAM BEHAVIORS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Forming</td>
<td>• Storming</td>
<td>• Norming</td>
<td>• Performing</td>
<td>• Transforming</td>
<td></td>
</tr>
<tr>
<td>• Reactive</td>
<td>• Authoritarian</td>
<td>• Social / Casual</td>
<td>• Effective Teamwork</td>
<td>• Reflecting, refocusing, self-starting</td>
<td></td>
</tr>
<tr>
<td>INDIVIDUAL TEAM MEMBERS IMPACT (C-BAM STAGE)</td>
<td>Needs information</td>
<td>• Implements change mechanically &amp; superficially</td>
<td>• Implements change routinely, evaluating outcomes &amp; networking</td>
<td>• Seeks ways to improve or replace practice to be even better</td>
<td></td>
</tr>
<tr>
<td>FACILITATOR ROLE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Director</td>
<td>• Capacity Builder</td>
<td>• Task Manager, Coach</td>
<td>• Delegator</td>
<td>• Analyst</td>
<td></td>
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<tr>
<td>• Foundation Builder</td>
<td>• Referee</td>
<td>• Supporter</td>
<td>• Process Advisor</td>
<td>• Synthesizer</td>
<td></td>
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<tr>
<td>• Nominalizer</td>
<td>• Nominalizer</td>
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<tr>
<td>FACILITATOR TASKS</td>
<td></td>
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</tr>
<tr>
<td>• Create awareness</td>
<td>• Share divergent ideas on direction to develop mutual understanding &amp; work toward a shared vision &amp; plan</td>
<td>• Implement plans with supports</td>
<td>• Implement plans with supports</td>
<td>• Reflect on &amp; evaluate strategies used re: applying learnings to &quot;new&quot; reality - so future can be built on past successes</td>
<td></td>
</tr>
<tr>
<td>• Orient to task</td>
<td></td>
<td>• Collect &amp; analyze data</td>
<td>• Track outcomes &amp; impact on context</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Organize</td>
<td></td>
<td></td>
<td>• Celebrate</td>
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</table>

Peggy Hayden, 2001
Developmental State 1: Current Context

Change Process: This is the beginning of the change process. Some force, internal or external, has resulted in one or more people determining that the way things are now (the current reality) needs to be different. A team of people is assembled to begin the process of collaborating toward a common end. Initial steps require that they become familiar with the task and with each other.

Team Behaviors: During this developmental stage, the team is “forming”. Team members need to learn about the team’s purpose, what task(s) are before them. They need help in getting organized. They are cautious as they “test the waters” in approaching this “new” endeavor. Even if they know each other in other ways, when a team is being formed, members must get to know each other in the context of the task at hand and as fellow team members. This requires spending time together over time. People are talking however, full and effective communication is not taking place. This is due in part to people initially having a “me” rather than a “we” mentality. It is also due to their needing to spend some time becoming aware of the task before them, how this is going to impact them and how they are going to work together as a team. This awareness building will become the foundation on which true understanding and effective communication will occur.

Individual Team Member Impact: During this developmental stage, individual team members have agreed to meet together as a team, but they are a team in name only. Individuals need to become aware of the task at hand, the current context, who will be involved and how they will work together. Individual member commitment is likely to be “in concept” and in “seeing where this might go”. They need information at this stage. True commitment or buy-in will not come until later stages when the nature of the collaboration is more specifically articulated and team members have gained confidence that they can work together productively. Just like the change process itself, buy-in is a process, not an event.

Facilitator Role and Tasks: The facilitator’s role begins as director and foundation builder during this stage of the development, helping the team with the following:

1. Getting Acquainted With Each Other:
   Assist them in getting to know each
other, both as agencies and as individuals. As agencies, the facilitator can help them learn more about each other by filling out agency information sheets with key data: agency contact person, services, service schedule, eligibility, number and types of people served, location(s), things about which they are most proud, issues on which they would find collaboration to be a helpful tool, etc. As individuals, the facilitator can help them "break the ice" by using one or more "get acquainted" activities.

2. Getting Acquainted With Their Task:
Provide them with information on why they have been called together, helping them assess their current context and establish a basic direction. The following is a helpful activity for this. Have the team assess their community's early care and education system related to its Strengths, Weaknesses, Opportunities and Threats (SWOTs). This assessment is an identification of internal issues or strengths and weaknesses, such as perspectives of staff and consumers; existing mandates, policies and procedures; demographic information; recent successes and challenges; data on services; staffing patterns. The assessment also examines external issues or opportunities and threats, such as potential funding sources; new mandates; competition; increased demand for services / waiting lists.

Assessing the current context helps team members see where they have common ground. Using this as a foundation, the facilitator can help the team identify one or more issues that will be their initial team focus, issues that would benefit them as individual agencies / constituencies as well as benefiting the community as a whole.

3. Developing a Structure for Collaboration:

- Team Member Role Clarification: It may be premature to ask them to appoint a chair or leader early on before they have clear direction as a team and before they have really worked through team dynamics. Instead, it is suggested that they start with a "convenor" who will be responsible for meeting logistics. Someone else should be appointed to serve as a facilitator (this can be an internal team member or someone external to the team). The facilitator leads team meetings in a way that is
perceived to be fair, helping the team stay focused, and supporting the building of relationships needed for effective work. A recorder takes minutes and disseminates them to the team within 1-2 weeks of the meeting. A timekeeper keeps track of time allotments on each meeting’s agenda and reminds the team of time remaining for each agenda item so that the team can complete items in a timely manner or adjust agenda as needed.

- **Membership Solidification:**
  Determination also needs to be made regarding who needs to be regular team members vs. ad hoc or consultative members. It is suggested a “core” team be established, keeping the size manageable with 5 to 9 members, no more than 12. Core members have an immediate stake in the team and the time and expertise required to help the team accomplish its tasks. Others with a more secondary interest or with time limitations can then be involved via attending periodic meetings at which their interest is discussed or via having a core team member solicit their input on relevant issues through personal contact or survey.

- **Ground Rules Establishment:** Have the team decide how they want to address issues such as: team dynamics (people-to-people issues); rules for operating an effective meeting; meeting logistics of how often they will meet and at what times (regular monthly meetings are recommended); where they will meet (all in one location or rotating among agencies represented on the team); team member expectations; absentees; and how they will make decisions, including dealing with the chains of command of the agencies represented on the team.

- **Running Effective Meetings:** The facilitator can provide “meeting embedded” professional development to the team on this issue by modeling good meeting behavior or by stopping periodically throughout the meeting to de brief on meeting process techniques. In so doing, the facilitator can underscore the importance of such issues as having an agenda, staying focused and on task in meetings, and having minutes to summarize discussion and decisions and to clearly define next steps. Team members can learn a variety of meeting facilitation techniques by experiencing activities such as visioning; assessing
community strengths, weaknesses, opportunities and threats (SWOTs); or developing written action plans. After such activities, the team can debrief on how the particular technique could be used for carrying out other team tasks, e.g., how a particularly technique for generating SWOTs could also be used for brainstorming ideas. The facilitator can also reinforce how to do active listening by example and instruction and use facilitation strategies that encourage positive team effectiveness and interactions.

Developmental Stage 2: Change Initiation with Compliance and a Loss of Security and Sense of Competence

Change Process: Once the team’s foundation is built, it begins the process of change initiation. This starts with helping the team determine its direction by way of articulating its vision and an action plan related to the issue(s) the team identified as its focus. Once the vision and action plan are in place, implementation begins. As the team starts to implement its plan, members will be asked to do things the “new way” described in the plan. In so doing, they will likely experience what Senge refers to as “creative tension”, that is, conflicting feelings of both wanting to go back to the “old ways” of how things have always been done and being motivated to do “new” things that will move them toward their vision. In short, the “current reality” pulls them backwards and the vision pulls them forward. The more progress they make toward the vision, the more they will buy-in to seeing that vision become a reality.

Team Behaviors: Most teams will go through a period of “storming” for a number of reasons. First, team members frequently start with overly ambitious expectations about the team’s vision and action plan. They are likely to exchange divergent perspectives about team direction. Thus, the facilitator will have to help them find common ground around doable goals. Problem solving and brainstorming can be productive exercises but also run the risk in this stage of being opportunities for conflicts and blaming. Members may become polarized, competitive, and confrontational with less concern for team relationships and more concern for personal or agency-specific needs. As a result of these interchanges, a “pecking order” may
emerge. To some degree, this is a natural evolution of team leadership. However, the facilitator should also seek to nominalize the group as much as possible so that all members feel they have “equal” value on the team even though their respective agency roles or authority may not be the same. Although some work is actually accomplished during this stage (establishing a vision and action plan on paper and initiating plan implementation), members may become impatient with no real “results” early on.

Individual Team Member Impact:
Individuals are preoccupied with how this collaboration will impact their current workload. They may struggle to balance team interests and self-interest. They are wondering things such as, “what’s in it for me”, “do I have time for this”, “is it worth it”, “do I have the knowledge and skills necessary to do this” or “it was easier the way we used to do it”. They are also concerned about doing the new things they are being asked to do in order to produce the desired change. They may be unsure if they or their agencies are capable of carrying out the desired change. They may express resentment over what they feel is compromising their own autonomy for the common good or team decisions. This may manifest itself in team discussions that are one-way communications. As they begin to implement the change, it may appear that they are “only going through the motions” of complying with “letter” of the team decisions but not the full intent.

Facilitator Role and Tasks: The facilitator’s role shifts to that of capacity builder, referee and nominalizer, helping the team with the following:

1. Establishing a Shared Vision: After the team has assessed its current context of “how things are”, the facilitator helps the team articulate a vision which (1) describes what we would like things to be like at some point in the future (usually three to five years); (2) builds on the past and present but does not simply extend it; (3) is concrete and reasonably attainable, including doing some new things and taking some risks; and (4) is uplifting, compelling people to action. It is essential that all team members agree to this vision as it will be the focal point for their work.

2. Seeing “What’s in it for Me AND Us”:
The facilitator will need to help team
members develop buy-in that will result in their committing time and energy to team efforts. Frequently, people working with teams complain about team members having “personal agendas”. This is not a reason for criticism. It is just a reality. Most people look out for their own interests. In fact, it is those constituent-specific interests that members have a duty to represent on the team. What the facilitator can do is help the team identify common ground among those personal agendas, so that the team’s efforts will meet both individual and collective interests. In the long term, the group will progress faster if team members are encouraged to air their hopes and concerns and identify how the team’s direction relates to them and their constituencies.

3. Developing an Action Plan: With the vision in place, the facilitator helps the team identify and prioritize challenges that the team must address in order to achieve its vision. In priority setting, the facilitator should first have the team establish the criteria they will use in making decisions about their choices, e.g., (a) is it consistent with our vision; (b) can we afford it; (c) do we have the time and expertise needed to do this; (d) is the timing right for us to pursue this; (e) will it meet individual and collective needs of the team. These challenges are then translated into objectives for action planning. Common action plan components include: (a) objectives to move the team toward the vision; (b) strategy(ies) to address each objective; (c) action steps to achieve the strategy; and (d) for each action step, person responsible, resources needed, and timeline. For example, the challenge might relate to people not knowing how to implement recommended practices. The objective(s) would identify what we want people to know, have or be able to do. The strategies articulate the overall approach, such as (1) in-service training, (2) job-embedded professional development, (3) coaching and (4) study groups. Then action steps list step-by-step what will be done to design, implement and evaluate each of these four strategies along with who will do it, with what resources and when.

4. Developing Skills, Incentives and Resources to Implement Change: Action plans don’t perform. People do. Therefore, the team should take steps to
ensure that the people implementing the action plans have the knowledge, skills, motivation and resources to do so. The facilitator should coach the team, supporting them in considering in their action plans not only “what needs to be done” but also the needs of the people who will be implementing the action plan. These needs might include professional development in the form of training, job-embedded professional development, a study group, assigning a mentor and other such steps to ensure people have the knowledge and skills needed to implement the plans. Without these, they will be less likely to embrace the change, because they will be concerned about their level of competence in doing this “new” thing. This concern for competence may erode their confidence in themselves and their support for the change initiative all together. Incentives should also be provided to support change implementation. Incentives may include strategies such as the opportunity to attend training, release time, financial incentives, professional development credits, recognition within one’s agency or on a community level. Finally, implementers must also have the resources needed to implement the desired change. Depending on what that change is, resources could be instructional materials, funding for a project, technology, forms, etc.

5. *Anticipating disagreement and desire to “go back”:* The facilitator can help the team by anticipating that storming will likely occur. It may be helpful to explain to the team when it is being formed about the different stages of team development. Then, as they enter a particular stage, call it to their attention. In other words, “they may be storming, but at least, that is “developmentally appropriate”. This will help them feel less like they are the only team that has ever experienced this. If they become negative with remarks like, “yes, but”, “I don’t have time for this” or “it can’t work”, ask “why”, and then ask “what would work”. Support team members in establishing reasonable tasks that are meaningful to them and that they have the time and expertise to accomplish.

6. *Using effective team interpersonal dynamics:* The facilitator can support the team in developing active listening skills by suggesting these as part of the team’s
ground rules, having the team practice these skills, and modeling active listening for the team on an ongoing basis. Throughout team interchanges, it is critical that the facilitator honor all members and show no favoritism to one over another.

7. Developing Win-Win Solutions: The facilitator can help nominalize the team by helping it focus on issues and not positions. A position presents only one way in which a problem can be resolved, e.g., “we think this child should be placed in this particular classroom with this particular teacher”. An issue oriented approach identifies key characteristics of what the team is trying to achieve, giving them room within which to negotiate, e.g., “we think that this child should receive services in a setting that has these characteristics...” Win-win solutions address legitimate interests of all members to the extent possible in a way that resolves conflict fairly, that takes common interests into consideration and that is durable (Fisher and Ury, 1981).

8. Thinking Big and Start Small: The facilitator should help the team set realistic goals within a more comprehensive community vision. Thinking big helps them cultivate a “systems” perspective and see how the change that they are addressing fits into the big picture. However, when implementation begins, the big picture can seem too abstract and overwhelming for many people - “we’ll never be able to do that”! With the big picture in mind, have the group select something concrete on which to work that will give them a quick and public victory (Fullan, 1993). Many teams choose a task such as compiling a service directory as an initial activity. While the authors of this paper don’t intend to infer that all collaborative teams need to develop a directory, it serves as an example of a task that helps teams in their early stages feel a sense of accomplishment and, thus, motivates them to continue collaboration. A task similar to creating a service directory is beneficial because: (a) it helps them learn about each other; (b) it is low risk and low cost; (c) it results in a concrete product/evidence of collaboration that does not take an undue amount of time to produce; (d) it is something they can use immediately as a resource with staff and families; and (e)
the act of doing it builds their capacity to work together and provides them with information on their current capacities which can serve as a means of needs assessment.

**Developmental Stage 3: Growing competence, confidence & commitment to the change**

**Change Process:** Change implementation necessitates that the team has in place a vehicle for tracking the implementation of their action plan. As mentioned earlier, action planning should include supports for skill development, incentives and resources needed to implement the change. They need these supports to carry out the change and to sustain them through a fairly typical period of “implementation dip” when the newness of the change diminishes and team members have to deal with the day-to-day implementation of the change.

**Team Behaviors:** During this developmental stage, the team is “norming”. An outgrowth of successfully negotiating the “storming” is that team members now have mutual trust and skills for sharing and problem solving. They are working as a cohesive group in accordance with their roles and ground rules, revising these as needed in light of changing circumstances. Often, it is in this stage that team leaders clearly emerge and a chair or co-chair can be named to serve for a period of time (typically one year). The team proceeds with plan implementation and begins to see results of their collaboration.

**Individual Team Member Impact:** At this stage, individuals have initiated the change. Because this change requires them to do things differently, they are operating at a more superficial or mechanical level. The change is dominated by their need to fit it in to their existing routine. Because it is a new activity, it generally takes extra time for materials preparation, reviewing instructions, working in new ways. Individuals need feedback and support to fully establish this new activity as a “habit” which can be performed more naturally with confidence and competence.

**Facilitator Role and Tasks:** This is a stage during which the team will be working well together and will want to socialize. Socialization is good to a point to reinforce positive relationships. However, it also places the facilitator in the role of needing to be task manager, coach and supporter.
1. **Building their Capacity to Work Together as a Team in Monitoring and Evaluating the Change:** Ask the team to review their action plans at each meeting to assess if they have accomplished what they set out to do and, if feasible, what impact plan implementation is having in moving them toward their vision. Help them see progress even in small steps to maintain momentum and move forward, boosting their competence and confidence. A key incentive for maintaining momentum is feedback on the positive performance and impact of the change on children, families and/or relations with other agencies. The facilitator can help the team develop practical tools for data flow and analysis.

2. **Maintaining Team Minutes:** From the very beginning of the team’s work together, each meeting should include minutes that summarize (a) participants, (b) expected outcomes for the meeting, (c) a summary of discussion and decisions, (d) next steps, and (e) a communication plan. The next steps should specify who on the team will be responsible for follow-through. Each meeting should begin with a review of follow-through in relation to these next steps. This will promote team accountability. It will also help them have a sense of accomplishments.

3. **Documenting Team Decisions:** This can be done through (a) developing written collaborative agreements, (b) incorporating team decisions into individual agency policies and procedures, (c) adopting common forms, (d) maintaining minutes, (e) using team memos and newsletters, and (f) developing team products such as a community brochure, skill hierarchy to facilitate transition, etc.

4. **Addressing Professional Development and Related Needs:** As mentioned in the previous section, action planning should include not only plans for implementing the change itself but also plans to ensure staff have the skills, incentives and resources needed to implement the change. All too frequently, such supports are provided only at the beginning of change implementation through initial training or initial resource allocation. To ensure effective change, the facilitator should help the team put in place ongoing supports to help staff move from gaining a basic awareness of the change to acquiring more knowledge about it to
skill development and having a chance to practice the change in the actual job context with appropriate and timely feedback. Mastery occurs only over time and with supports. These supports result in the evolution of staff competence, confidence and commitment to the change.

**Developmental Stage 4: Full Implementation of Desired Change**

**Change Process:** Success is reached when the vision for the desired change is achieved or at least when primary action plans directed at that vision are implemented to the extent that there has been a substantial change in the current context.

**Team Behaviors:** The team is now “performing”. Team members have clarity regarding their task, their relationships with each other and how to work successfully as a collaborative team. Through working successfully together, they have developed a high level of commitment to the team, even to the point where they are willing to make individual changes for team benefit. The team is operative in a creative and synergistic way, accomplishing much work. They deserve recognition for their accomplishments and a chance to celebrate.

**Individual Team Member Impact:** At this developmental stage, individuals have incorporated the change into their routine. Because they are now comfortable with the task, they are now wondering if the change is doing any good. They are also interested in networking with others for information sharing and problem solving. They continue to need feedback not only on their performance but also on the impact that the change is having on others, e.g. children, families and/or relations with other agencies. In short, are the things that people are doing taking us toward our vision?

**Facilitator Role and Tasks:** When the team is performing the desired change, the facilitator supports sustaining this change by serving as delegator, process advisor and cheerleader through the following:

1. **Promoting Their Ability to Reflect on their Teamwork:** It is beneficial to end each meeting by having the team evaluate the session. Frequently, this ends up being an evaluation of the facilitator. Instead, the facilitator should help the team learn to evaluate itself related to how it is working together. One method for doing so is to review the degree to which the team is adhering to
its ground rules. Another option is to ask the team to identify Pluses and Wishes, that is, what contributed to making this a successful meeting (pluses) and what do we wish we'd done differently (wishes). The facilitator should also encourage the team to formally reflect on its activities on a periodic basis.

2. Tracking Plan Implementation, Monitoring and Evaluation: During this stage, they will continue to monitor and evaluate plan implementation and impact. It is important that this be more than reporting. That is, the facilitator should guide the team in sharing ideas and timely problem solving that can lead to improved practices and continuity across agencies. Such sharing is also important in order to deepen team members’ understanding about the changes they are causing and the change process itself.

3. Celebrating Accomplishments: The team should also take time to celebrate accomplishments. This can be done informally at each meeting. However, having a special treat or event to celebrate a major accomplishment is helpful. This sense of efficacy will reinforce them to continue their efforts.

It reinforces not only their actual accomplishments and teamwork and contributes to “team spirit”.

4. Sustaining Team Growth: By this point, if the facilitator is an external facilitator, it is a time when the external facilitator can exit the collaborative planning process. In doing so, the facilitator should take steps to ensure that the team has a structure in place to sustain them with continued plan implementation, monitoring and evaluation. Hopefully, as a result of activities in which they have engaged up to this point, the facilitator will have supported them in building team capacity so that they are equal to the task.

Developmental Stage 5: Desired Change Is Now Current Context

Change Process: When the desired change is achieved, it becomes the new current context, that is, a point for reassessment and creation of a new vision.

Team Behaviors: The team has a real sense of accomplishment. The desired change is in place. Now that its “task” is done, the team needs to decide whether or not it needs to continue to exist.
Individual Team Member Impact: The new practices are well established and individuals will likely continue to seek ways to improve or even replace these practices with even more effective practices.

Facilitator Role and Tasks: When the desired change becomes the “new” current context, the facilitator can serve as an analyst and synthesizer to assist the team in “transforming”.

1. **Providing Closure**: Confirm that the task has been completed. Support the team in reflecting on learnings about the team. The team should consider both how it has worked as a team as well as what it has accomplished. These learnings can serve as the basis for planning next steps, if any.

2. **Determining Next Steps**: Help the team determine if there are remaining priorities that they would like to address together. If not, end the team. Continuing on without a clear commitment and focus will result in team meetings becoming a waste of time. If there are priorities that the team wants to pursue together, the team should then proceed to transforming.

3. **Transforming the Team**: In effect, the team returns to Developmental Stage 1. The team should reassess the current context and set its focus. It then determines what people or agencies need to be represented in addressing this new focus. It may be that the former team membership is not a good fit for the new task. If this is the case, provide a graceful way for these members to exit prior to moving on. Then continue with the steps as outlined in this paper.

**Summary**

This paper has provided a model for developmental facilitation based on learnings from the experiences of the Collaborative Planning Project (CPP) for Comprehensive Early Childhood Systems. It is hoped that these learnings will assist others in working with local collaborative teams that are striving to put in place inclusive, quality, comprehensive early care and education services to young children and their families.
REFERENCES


Other helpful references


Tasks, Tips and Tools
for Promoting Collaborative Community Teams

Collaborative Planning Project for Planning Comprehensive Early Childhood Systems

Peggy Hayden
Linda Frederick
Barbara J. Smith
Alison Broudy

Collaborative Planning Project
University of Colorado at Denver
Denver, Colorado

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For more information about The Collaborative Planning Project contact Linda Frederick at the Center for Collaborative Educational Leadership, 1380 Lawrence St., Suite 650, Denver, CO 80204, (303) 556-3330, Linda_Frederick@ceo.cudenver.edu.

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BACKGROUND

The Collaborative Planning Project (CPP) for Comprehensive Early Childhood Systems was a federally funded outreach project based at the Center for Collaborative Educational Leadership, University of Colorado-Denver. Funded through the Individual with Disabilities Education Act, the project provided training and technical assistance (TA) to local interagency teams to do collaborative planning at the community systems level. The project's purpose was to facilitate the establishment of local collaborative teams to work on one or more mutually agreed upon challenges associated with putting in place a long term vision for systems change to achieve inclusive, quality, comprehensive early care and education services to young children birth through 5 (or up to age 8) and their families. The project provided a facilitator to work with local community teams for approximately 6 sessions, after which, it was hoped that the team would be self-sustaining, having: (a) organized as a team; (b) accomplished at least one concrete task; and (c) put in place a team structure and a written plan for further collaborations. Through its work with these local community teams, project staff developed the tasks, tips and tools presented in this paper.

ACKNOWLEDGMENTS

The project wishes to acknowledge the contributions of the following state and local collaborative teams. Input and learnings from their collaborative efforts provided valuable direction for the development of this document.

State Level Collaborative Teams

- Rhode Island Early Childhood Interagency Task Force
- West Virginia Early Childhood Transition Steering Committee

Local Community Collaborative Planning Project (CPP) Teams

- Denver, CO CPP Team
- Acadia Parish, LA CPP Team
- Central Falls, RI CPP Team
- South Kingstown, RI CPP Team
- St. Vrain, CO CPP Team
- Las Vegas, NV CPP Team
- Cranston, RI CPP Team
- Westerly, RI CPP Team

ACCESSING THIS DOCUMENT VIA THE INTERNET

You can access this document via the National Early Childhood Technical Assistance-System website at www.nectas.unc.edu. Click on the Keys to Inclusion page, then on Collaborative Activities, then on National Projects and then on the section on the Collaborative Planning Project. The document is in Adobe PDF format. In order to open the file, you first must have the Adobe Reader software. This is available to download free of charge at Adobe's website [http://www.adobe.com/products/acrobat/readstep.html]. After opening the file, you can print and re-create sections on your own word processing program to adapt document materials to meet your own needs.
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Tasks, Tips and Tools
For Promoting Collaborative Community Teams

Document Overview

When representatives of multiple agencies collaborate as community teams, they can produce many positive results for children and their families. Collaboration areas can include: (1) family involvement; (2) child outreach/child find screening, referrals, and evaluations; (3) service eligibility; (4) individual program planning, e.g., Individualized Family Service Plans (IFSPs) for children with disabilities ages birth to 3 years and their families and Individualized Education Programs (IEPs) for children with disabilities ages 3 through 5 years; (5) primary and related services; (6) service delivery in settings which typical for the age of the child and which serve children with and without disabilities; (7) resource sharing which may include, but not be limited to, facilities, materials and equipment, collaborative services, and screening; (8) transition; (9) confidentiality; (10) records transfer; (11) joint staff training; and (12) sharing child count data.

But, what are the tasks needed for starting and sustaining such teams? What are tips for doing this effectively? What are practical tools teams can use for working and planning together? This paper presents such tasks, tips and tools related to the following issues that collaborative teams should address:

1. Deciding Why to Collaborate
2. Recruiting Collaborative Team Participants
3. Conducting the Organizational Meeting
4. Creating an Effective Structure for the Team’s Operation
5. Creating a Shared Community Vision Grounded in the Community’s Current Context
6. Developing Action Plans to Achieve the Vision
8. Tracking and Evaluating Collaborative Efforts

Tasks and tips compose the first half of this document. The second half provides a various tools that are referenced in the tasks and tips section. Tools include formats for organizing and running effective meetings (e.g., invitation letter for the organizational meeting, sample agenda, minutes shell, ground rules) and instructions for team activities such as assessing the community context, visioning, and action planning.
TASKS AND TIPS

Deciding Why To Collaborate

**Tasks**

1. Collaboration is more than meeting together. It is working together toward one or more common goals. Therefore, consider first why you need to collaborate. What is motivating you to do so?

2. Consider external factors. For example, will federal and state legal requirements and/or grants or other resources influence your collaborative efforts?

3. Consider internal factors.
   - What "internal" agency needs will be met by potential participants in collaborative efforts?
   - Why would people find it beneficial to spend already limited time working together?
   - What is "in it for you" and for the agencies with which you would like to collaborate?

**Tips**

Start with activities for which agencies need each other in order to accomplish in a truly effective way:

- Transition
- Child Find/Outreach
- Developing a Community-Wide Service Directory
- Community-Wide Screening
- Public Awareness re: Benefit of Early Childhood Services

Recruiting Collaborative Team Participants

**Tasks**

1. After deciding on a tentative team focus, the team "organizer(s)" can then decide which agencies need to be involved on the collaborative team. Choose agencies that have a legitimate and direct interest in the topics of proposed collaboration focus. Those with a more "indirect" interest in the team's focus will likely lose interest and not attend regularly.

2. Decide which agency staff to include on the team. It is important to have the "right players at the table" with job roles relevant to the team’s particular focus. Staff with some administrative authority or access to it (e.g., a designee) is advised in order to expedite collaborative team decision-making.

**Tips**

- Start with those genuinely interested even if the team is small. As the team has successes, others will likely want to join.

- Research shows that task oriented teams function best with 5 to 9 members, 12 maximum. You can get input from those who are not team members in other ways, e.g., interviews, surveys, or ad hoc involvement.
3. Many teams find it beneficial to include not only staff but also family representatives. Family members provide the team with “consumer” perspectives. They may also offer the team many assets that agency staff do not have, e.g., special skills because of their personal or professional background and/or contacts with community leaders. In some instances, family members can represent the team’s “cause” more effectively than staff.

4. Personal contact such as a 1:1 meeting or a phone call to invite team participation increases the likelihood of involvement. The team organizer can use these contacts to ascertain the needs of the participants, that is, the various issues that are both motivators and concerns related to collaboration.

5. Once the personal contacts have been made, a follow-up letter should be sent to participants to confirm the organizational meeting (see Tools section). It is helpful to ask each agency to bring information about itself, e.g., a brochure or via completion of an Agency Profile (see Tools section) to provide basic agency information.

See the Tools section of this document which contains:

- Sample Letter Asking Potential Team Members to Attend the Organizational Meeting - It is recommended that this letter be sent out as a follow-up to some type of personal contact.

- Agency Profile which potential team members can complete for use at the team’s organizational meeting in order to help the team “get acquainted” and learn more about the various resources in the community.

Conducting The Organizational Meeting

Tasks

1. The focus of the initial meeting is to help the team get organized. Design the agenda to help them become acquainted with each other and their task (see Tools section).

2. Review Agency Profiles at the organizational meeting to help them get acquainted with each other. Even though agencies may have worked together in various ways in the past, they benefit from sharing information about each other.

3. At the first or second meeting, have the team do an assessment of the community’s current context. A helpful process for doing this is through an analysis of community Strengths, Weaknesses, Opportunities and Threats - SWOTs (see SWOT Activity in the Tools section). If the team’s focus has not been determined in advance, this community assessment can help lead the team to decide its focus (see Activity to Determine a Team’s Initial Focus in the Tools section). If the focus has already been determined, the SWOT activity can help to further define that focus. NOTE: Some
teams enjoy becoming "SWOT" teams to attack community issues. Other teams prefer replacing the word "weaknesses" with "concerns", making community assessment a "SCOT" process.

4. The team should confirm the initial focus of its collaboration as soon as possible. Sometimes, this will be determined prior to the organizational meeting. This may be an outgrowth of the organizer's personal contacts. In other instances, direction may emerge from the team's discussion of community needs. Deciding on this initial focus is key. It helps make collaboration "more concrete". That is, people are able to then name the topic(s) on which they will be spending their time and that will increase the likelihood that attending team meetings will be more meaningful to members.

5. There are an infinite number of areas around which collaboration can occur. Each agency will likely have its own issues on which it would like the team to focus. Moreover, there may be various funding and time constraints impacting the ability of people to be involved in collaborative activities. With these factors in mind, it is recommended that the team start with a focus that is doable within a reasonable amount of time by "thinking big AND starting small".

6. The organizational meeting should conclude with the team developing ground rules for its operation. It is often helpful to provide a sample of basic ground rules that the team can adapt to meet its needs rather than starting from scratch (see Tools section). Common ground rules address issues such as:

- **Team Membership** - Having a decision on the team's basic focus helps the team decide on team membership, that is, whom they need on a regular and ad hoc basis to address this focus. If they are unsure about whom to involve OR if they would like to get input from others who will likely not be regular team members, then, they can use some process such as that suggested by the Input Form in the Tools section.

- **Team Roles** - Deciding who will serve as convener, facilitator, recorder, timekeeper and in other roles as determined by the team.

- **Decision Making Process** - Determining how decisions will be made and what will be done if the team cannot agree.
• Task Focus - Making a commitment to having effective meetings including having a regular time and location for meetings.

• Attendance - Deciding what to do if people miss meetings.

• Interactions - Deciding how to handle interpersonal dynamics in meetings.

• Communicating with Others in Our Agency and Community - Discussing involvement of key stakeholders and respective agency chains of command.

• Orientation of New Members - Deciding how to involve new members so that they feel welcomed on the team and so that they can be effective contributors.

See the Tools section of this document which contains:

• Collaborative Team Organizational Session Agenda. This agenda is for an extended time frame to allow the team to discuss critical organizational issues. If needed, it could be split into 2 meetings. After the initial meeting, it is suggested that team meetings be approximately 3 hours in length. Future agendas can be developed using this Organizational Session Agenda as a model. Over time specific agenda items will likely address issues such as information gathering and sharing, visioning, priority setting, planning, problem solving, development of procedures and products, tracking and evaluating collaborative efforts.

• Activity: Assessing Your Community's Strengths, Weaknesses, Opportunities and Threats

• Activity: To Determine a Team's Initial Focus. This can be used to decide on a focus(es), e.g., Transition or Inclusive Services. If a basic focus has already been determined, this activity can be used to further clarify or specify the particular issues within that basic focus that the team wishes to address.

• Sample Ground Rules - Use these rules as a starting point for discussion and adapt as appropriate to the situation.

• Collaborative Planning Team Input Form - Use or adapt this form to get input from those in the community that are not regular team members but whose input and support are important to the team's efforts.

CREATING AN EFFECTIVE STRUCTURE FOR THE TEAM'S OPERATION

Tasks

At its first meeting, the team will negotiate ground rules as described above. Among these rules are giving attention to team authority, the collaborative decision making process, logistics and leadership.
1. Clarify the team’s authority and collaborative decision making process. The team needs to decide on the degree to which it has authority to make decisions. Depending on the nature of the team this may include having:

- agency representatives authorized to participate in and make decisions affecting their agencies (that is, the team is free to decide); OR

- a collaborative decision making process responsive to the decision making processes of member agencies’ chains of command as well as to collaborative needs (that is, team members must get the approval of their respective “bosses” prior to the team’s making a final decision); OR

- some combination thereof. There may be some topics on which the team will have the authority to decide and others that will require the approval of member agencies’ chains of command.

2. Provide opportunities for participants to get to know each other as individuals. Building people-to-people relationships has a major positive impact on collaborative relationships and should be built into team activities, e.g. coffee prior to meeting, lunching together before or after a meeting, joint projects, etc.

3. Establish a regular meeting date, time and location. Monthly meetings of approximately 3 hours are recommended. Rotating the meeting location promotes cross program visitation and team ownership. On the other hand, members may find it more convenient to consistently meet at one location. It helps people to both plan ahead and to remember meeting dates if the time and date are consistent (e.g. 3rd Tuesday, 4th Wednesday, etc.).

4. Have a leadership structure and role clarification (e.g. convener, facilitator, recorder, etc.) as described in the Ground Rules in the Tools section. Team members should all know and be able to carry out their respective meeting roles. Also, make provisions for leadership election and rotation schedule. Choose leaders who are perceived to be fair by all participants, who will lead this as a community team and not as a vehicle for promoting his or her own agency agenda.

Tips
- People skills are key to effective collaboration.
- People like to be treated with respect and to be able to trust and be trusted.
- People like recognition and good news. Give each other positive feedback.
- People want to be understood. Seek to understand their programs and issues.
- People will be less likely to change a position if they are forced to defend it.
It is also important for the leader and members to have good skills at facilitating meetings, problem solving, conflict resolution, etc. In some instances, it may be helpful to have an outside facilitator, particularly during the team's early stages, e.g. to help with team organization and priority setting, for problem solving activities, for assisting the team in evaluating it's efforts, and for similar activities.

5. Pay attention to basic standards for effective meetings. Each meeting should have clear and purposeful agendas with mutually agreed to outcomes clarifying what the team wants to know, have or be able to do by the time the meeting is over. At the end of each meeting, outcomes should be established for the next meeting. The meeting should adhere to meeting starting and ending times, adjusting agenda time as needed but making every effort to conclude discussion of each agenda item within the time set on the agenda.

6. Meetings should have minutes summarizing discussion and decisions (see Minutes Shell in the Tools Section). Minutes should include specific next steps for follow-through by team members prior to the next meeting. These should be circulated promptly, within 1 to 2 weeks of the meeting so that team members have “next steps” reminders and absent members can have quick feedback on meeting outcomes.

Tips

- People will initially focus on their own agendas. That is normal; don't condemn them. Rather, seek to find common ground among individual agendas. In so doing, people will buy into collaborative activities that meet one of their own needs - as well as a community need. That increases the likelihood that the collaborative team will be relevant to them and worth their time. It helps to foster true commitment.

- Convert “me” mentality to a “we” mentality. Typical losers of “us” and “them” mentalities are the children and families we are all here to serve.

See the Tools section of this document which contains:

- Collaborative Planning Team Minutes Shell - This form can be adapted so that the recorder can print notes on the form and, thus, minutes can be copied from this form without transcription. Or, the format can be put on a disk, allowing the recorder to take notes on a laptop during a meeting or as a follow-up to the meeting. The latter is preferred as it makes it easier for the recorder to be an active meeting participant.
CREATING A SHARED COMMUNITY VISION GROUNDED IN THE COMMUNITY'S CURRENT CONTEXT

Developing a shared vision that focuses on "community" interests is a critical early step in establishing an effective structure to support collaboration (see Tools section). A shared vision is one which is responsive to participating agencies but transcends individual concerns, focusing on common goals to which all agencies are united in their commitment.

A vision describes where the team wants to be at some future point. It builds on what is currently in place, but does not necessarily extend it. Rather, the vision articulates what the team would like their future reality to look like. It is specific and reasonable. It is the statement that "pulls" the team forward, giving it direction in setting priorities.

Tasks

1. The team can start by (1) first defining its current context (SWOTs) and then its vision or (2) vice versa. Strategy one is preferred, because it is more concrete and, thus, more meaningful to participants.

2. The team can then assess gaps between the current context and the vision. Gaps are challenges the team will need to address so that their vision will ultimately become a reality. Challenges may be apparent as a result of assessing the community's current context (SWOTs) and visioning. If there is no consensus on challenges, the team will need to conduct an activity for this purpose (see Tools section for Activity to Identify Challenges the Team will Address via Action Planning). In order to "think big and start small", the team should review the challenges and set priorities for which tasks to tackle first. Priority challenges then evolve into objectives for the team's action planning.

Tips

- Target the scope of your vision depending on the developmental stage and interests of the team (e.g., is it a newly forming team, a high performing team with a long history, a team where you have trouble getting everyone to the table).
- Research shows it is preferable to "think big and start small". It may be more meaningful for participants in the early stage of team development to limit visions to a specific, commonly agreed upon need, e.g., transition or community-wide screening, rather than a vision for a comprehensive service system.

See the Tools section of this document which contains:

- Visioning Activity
- Activity to Identify Challenges the Team will Address via Action Planning
DEVELOPING ACTION PLANS TO ACHIEVE THE VISION

Tasks

1. In order for the vision to be realized, the team must develop a clear and specific plan to address the identified challenge(s).

2. Recommended components for action plans include:
   - objectives that are measurable statements of what you want to accomplish in order to overcome the challenge(s) and move the team toward its vision;
   - strategy(ies)/action steps to achieve each objective;
   - person(s) responsible for each strategy/action step;
   - resources needed for each strategy/action step;
   - timeline for each strategy/action step.

3. Some teams will have a single priority and, thus, will need only a single action plan; however, if the team has multiple priorities that it wants to address at the same time, multiple action plans will be needed. In this case, the team may find it helpful to establish "action plan teams" or committees to develop an action plan for each of the priority challenges. Action plan members can be confined to collaborative team members or this can be an opportunity to involve other stakeholders who are not regular collaborative team members. This is a particularly good way to involve people/agencies who may have expertise related to the challenges the team is addressing when such people are not regular team members. Involve people who have a stake in the outcomes of the action plan topic, such as people:
   - whose support you need such as agency heads or representatives on agencies who are not regular team members; or
   - who will be involved in implementing the changes necessitated by the plan such as staff; or
   - who will be impacted by the plan such as families.

4. Once developed, the team's actions plans should be reviewed at each meeting in order to guide the team's activities and keep it on track.

Tips

- Action plans are a task analysis of each thing you must do to carry out your strategy and achieve your objective. For example, a challenge might relate to increasing staff knowledge and skills. The objective might be to establish a training program on a certain topic. Strategies/action steps are then your specific "to do list" of things you intend to do to set up, implement and evaluate the training program.

- Plans should be specific enough to guide the team's work and keep it accountable and, yet, the team should also be flexible, adjusting the plan as needed based on new information which may result from plan implementation and evaluation.
See the Tools section of this document which contains:

- Action Planning Form and Form Completion Instructions
- Action Planning Activity
- Activity for Round Robin Editing of Multiple Action Plans

METHODS FOR IMPLEMENTING COLLABORATIVE DECISIONS, PLANS, POLICIES AND PROCEDURES

Tasks

It is important to use methods to document and communicate team decisions in writing. This helps reinforce a common understanding of and commitment to issues on which there has been agreement. It also facilitates implementation, activity tracking and evaluation. In addition to written action plans as described above, other options for documenting and communicating team decisions include the following tasks.

1. A collaborative agreement is one option. It is required by federal or state regulations. To be more than just "another piece of paper to be in compliance", this agreement should not be an end in itself but rather a document that reflects collaborative planning and problem solving. Moreover, it should be a fluid document which evolves from year to year as changes occur among the collaborative agencies and in the various areas in which they are collaborating. The Tools section provides a Generic Format for an Interagency Collaboration Agreement which communities can adapt as needed.

2. Consideration should also be given to incorporating areas of agreement within individual agency contexts and documents. This helps to increase individual agency buy-in, particularly beyond the administrative level. The team should consider reflecting areas of collaborative agreement in the participating agencies policies and procedures, calendars, staff job descriptions, etc.

Tips

Create a team file with various folders or a notebook for:
- Meeting agendas and minutes
- Team mailing list and member information (profiles, brochures, fact sheets)
- Ground rules, Interagency agreement/policies, procedures and forms
- Team plans
- Team products
- Resources for access by team

In team ground rules, identify who will maintain the "master" file/notebook and how this will be used to orient new members.
3. The use of commonly adopted forms is another method that assists in implementing areas of common agreement. It also facilitates communication among agencies and provides continuity for families as they move from one service agency to another.

4. Minutes, memos, letters, newsletters and related communication devices can be used to transmit information on collaborative activities and areas of agreement to a variety of audiences including participating agencies' leadership, staff, families, governing agencies, and the community at-large.

5. Materials which describe the team are beneficial for sharing with families and other service providers. Such materials may include a brochure describing the various agencies and how they work together or a commonly adopted vision or mission describing the team's purpose.

Team accomplishments will result in needed changes. Such changes may take the form of new transition procedures, new forms, strategies to promote program continuity among agencies, new or expanded services, increased family involvement and so forth. It is not enough for the collaborative team members to understand and buy-in to these new things. Carrying out these team decisions and plans also requires that the people who will be involved in implementation have the skills, motivation and resources needed to do so. Tasks that can help achieve this are:

1. Building buy-in by getting staff and family input in the change through involvement on action planning teams or via surveys, interviews, focus groups, or asking for review and comment on documents.

2. Conducting joint training among agency staff and/or families.

3. Conducting cross program visitation for staff and/or families so that they can become familiar with the various services in the community. If time is not readily available, such visits can be carried out by having speakers from other agencies, reviewing brochures of other agencies, or, if available, taking a “video tour”.

Tips

- Collaborative team members should “walk the talk” of collaboration within their own agencies. If people begin to complain about implementing a new collaborative strategy or demonstrate an “us and them” mentality, team members should not join in such talk. Rather, they should positively support the change, working with the collaborative team to resolve problems if needed.

- Joint staff training and study groups are effective ways to build staff-to-staff relationships and commitment to collaboration, because staff learn not only about the training topic but also about each other.
4. Looking at options to provide release time for staff to work together in "study groups" within and across agencies in implementing collaborative changes.

5. Providing feedback to and recognition of staff who are involved in implementing changes brought about by the collaboration.

6. Locating resources to provide staff with the resources needed to implement the change. Many government agencies, foundations and businesses look favorably on funding collaborative efforts.

See the Tools section of this document which contains:

- Generic Format for an Interagency Collaboration Agreement

TRACKING AND EVALUATING COLLABORATIVE EFFORTS

Ongoing mechanisms need to be in place to track and report on the implementation of collaborative activities. This will help the team be aware of implementation status and provide an opportunity for addressing inevitable problems in a timely manner. Such mechanisms should help determine if planned activities are:

1. being implemented as planned;

2. proving to be workable; and

3. having the desired impact on the community challenge(s) being addressed.

The team should also evaluate itself. That is, a collaborative team is not a static entity. It will evolve over time as there are changes in individual and agency membership, changes in funding and regulatory structures, changes in the community, or new needs emerging among children and families. The team will also change as it develops a history of working together. That is, success in addressing initial challenges may create team momentum. Relationships and team learnings from early collaborations may serve as a foundation for addressing more complex and comprehensive challenges.

Thus, in addition to ongoing activity tracking and evaluation, it is recommended that the team formally evaluate its overall operation at least annually related to the team's accomplishments and challenges, operational structure and team member relationships and involvement. The tasks delineated below can assist the team in this effort.
Tasks

1. Review the team’s priorities.
   - Have they been met?
   - How well?
   - Is working on these priorities benefiting both the collaborative team/community and the participating agencies?
   - What priorities remain or are emerging?
   - Do previously set priorities continue to be relevant to all members of the team?
   - What changes in internal (agency) and external (community, state, federal) environments are likely to impact priorities of this team?

2. Assess membership involvement.
   - Are all members actively involved? Why or why not?
   - What can be done to get active involvement of all members?
   - Do activities or membership need to change so that active involvement of all members will be more likely?
   - As new individuals or agency members are added to the team, what is done to help them adapt to the team and to help the team adapt to them (e.g., orientation or refocusing priorities to address new members' interests)?

3. Evaluate the outcomes and impact of team activities.
   - Did we do what we said we would do?
   - Are these helping to achieve the goals set for each of the priorities?
   - Are they effective?
   - Are they beneficial enough to warrant the time and other resources allocated to them?
   - Can we replace any current activities to make with other activities that now may be more worthwhile?
   - Do members consider these activities a good of their time considering their individual agency responsibilities?

Tips

- The team, if formed properly, was initially pulled together in order to have the “right people” together to address a particular focus or priority. As priorities of the team change, it is important to discuss if the people need to change too. Perhaps, some members will no longer find the team relevant as it addresses these new priorities. Perhaps new members will need to be added. Revamping membership should in no way be considered as a negative but rather as a practical strategy to ensuring effective teamwork.

- As the team “reforms” around new priorities and/or membership, use the tasks, tips and tools in this document in charting your new direction.
4. Consider the team’s continued existence.

- Does the team need to continue to exist?
- Whom does it benefit?
- Given the time and effort involved, is there a return on investment?

If the benefit derived from the team’s continued existence is questionable, celebrate accomplishments and bring the team to an end. If the team is determined to be effective, identify next steps for team continuation. This should include reaffirmation or revision of the team’s focus and consideration of who needs to be involved as you proceed in your efforts to promote collaboration to benefit children and families in your community.
TOOLS for Collaborative Teams

This section provides tools to help teams carry out the tasks and tips contained in this document. Document users should feel free to adapt these tools to meeting their own needs. Tools include the following.

- Sample Letter Asking Potential Team Members to Attend the Organizational Meeting
- Agency Profile
- Collaborative Team Organizational Session Agenda
- Assessing Your Community’s Strengths, Weaknesses, Opportunities and Threats (SWOTs)
- Activity to Determine a Team’s Initial Focus
- Sample Ground Rules
- Collaborative Planning Team Input Form
- Collaborative Planning Team Minutes Shell
- Visioning Activity
- Activity to Identify Challenges the Team will Address via Action Planning
- Action Planning Form and Form Completion Instructions
- Action Planning Activity
- Activity for Round Robin Editing of Multiple Action Plans
- Generic Format for an Interagency Collaboration Agreement
Sample Letter
Asking Potential Team Members to Attend the Organizational Meeting

TO:

FROM:

DATE:

RE: Organizational Meeting for Community Collaborative Team

I appreciate your interest in forming a community collaborative team and willingness to attend our organizational meeting. Our purpose will be to look at ways in which we can work together, ways that will benefit children and families, our individual agencies and our community-at-large. Our organizational meeting will be:

Date/Time: ________________________________

Location: ________________________________

To help us prepare for this meeting, I am enclosing:

1. An agenda for our meeting

2. An agency profile form. Please complete this and bring ___ copies to share at our meeting. This will help us get acquainted with the services we each provide. Please feel free to bring any brochures or other materials that seem appropriate.

3. A tentative list of collaborative team members

I look forward to seeing you at our meeting. If you have any questions, please call me at ________________.
**Agency Profile**

**Profile Purpose:** To learn what services we have in our community to help us (1) get to know each other and (2) have information to use in our planning.

**Instructions:** Provide information on services relevant to the education and care of children ages birth-8, including children with and without disabilities. Keep responses brief - a basic, reader-friendly description of what you do. If you have multiple resources/programs, copy as many of these forms as you need to complete this activity.

**Agency:**

<table>
<thead>
<tr>
<th>Resource/Program Name</th>
<th>Population Eligible (age, income, special needs, etc.)</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th># of Children Enrolled</th>
<th>Service Hours</th>
<th>Service Location(s)</th>
<th>Funding Source(s)</th>
<th>How Families Access Services</th>
<th>Parent Fees, If Any</th>
<th>Potential Collaboration Topics</th>
<th>Contact Person</th>
<th>Other Comments</th>
</tr>
</thead>
<tbody>
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</table>

Collaborative Planning Project, 2001
Collaborative Team Organizational Session Agenda

Date/Time: Location:

What to Bring:
1. This agenda
2. Completed agency profile, brochures and other related information (enough to share)

Meeting Purposes: The team will have
1. A common understanding of the agencies represented at this meeting
2. An identification of their communities' strengths, weaknesses, opportunities and threats
3. Confirmation of the team's focus
4. Confirmation of team ground rules, including meeting schedule and membership
5. A plan for next steps.

Agenda

8:30    Welcome, Introductions and Agenda Review - Team organizer(s)
8:45    Learning about each other: Reviewing agency profile with Q & A
10:00   Break
10:15   Assessing Community Strengths, Weaknesses, Opportunities & Threats (SWOTS)
10:45   Confirming the Team's Focus based on Agency Profiles Info and our SWOTS
        Based on what we have just discussed, what particular topic(s) or focus should this team pursue that would benefit children and families, the agencies represented here and the community at large.
11:15   Establishing our Ground Rules: Reviewing and editing the sample and confirming our team mailing list
Noon   Next Steps: Follow-up after this meeting and plans for next meeting
12:15   Evaluating our Time Together: Team discussion about what made the meeting effective and things we could do to improve it
12:30   Adjourn
Assessing Your Community’s Strengths, Weaknesses, Opportunities and Threats*  
“Making You a SWOT Team to Attack Community Issues”

1. Appoint a facilitator, recorder and timekeeper.

2. The recorder sets up a story board** with the following columns:

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
</table>

3. Ask each team member to identify what he or she sees as their community’s major strengths, weaknesses, opportunities and threats. They should write these on note cards with a magic marker - one idea per card. When they are through, they should post their cards under the appropriate columns on the flip chart.

4. Starting with Strengths, the facilitator leads the team in “merging” common ideas under this column on the story board. As these groupings are developed, a name or title for each grouping is identified which summarizes the grouping. For example, there may be multiple “groupings” of strengths, each with its own name or title.

5. The facilitator continues to help the team with the merging activity until all columns are completed.

6. This activity should take approximately 30-45 minutes. The timekeeper helps the team track its time.

* Some teams enjoy becoming “SWOT” teams to attack community issues. Other teams prefer replacing the word “weaknesses” with “concerns”, making the community assessment a “SCOT” process.

** This activity calls for a story board. This is created with flip chart paper taped to the wall, usually 2 or more overlapping pages. These pages are then sprayed with 3M Spray Mount Artist’s Adhesive. This is a temporary adhesive which feels like the “sticky part” of a post-it. Because it is a temporary adhesive, you can stick note cards or similar materials to the story board and then move these materials around on the story board.

In the case of this activity, the facilitator leads the team in grouping or merging cards under the 4 columns set up on the story board. Upon completion of the activity, the recorder can take a piece of scotch tape and run it from the top to the bottom of the column of cards. This will allow for removal of a whole column of cards so that these can be transported more easily and used later by the person transcribing the minutes.
Activity to Determine a Team's Initial Focus

Focus Question: Based on what we have learned through our discussion of our Agency Profiles and our SWOTS, what particular topic(s) or focus should this team pursue as its initial focus to benefit children and families, the agencies represented here and the community at large.

1. Appoint a facilitator, recorder and timekeeper.

2. The recorder sets up a story board* of 2 flip chart pages taped side-by-side to the wall, making one large chart with a heading of “Our Team Focus”. The focus question is written on flip chart paper and posted.

3. Each team member each identifies 1-3 answers to the focus questions, recording 1 answer per post-it with a magic marker.

4. Each team member posts all post-its on chart.

5. Facilitator presents the focus question to the team and leads them in merging similar ideas into groups.

6. The recorder notes the name/title of each grouping near that grouping. These names/titles become the characteristics describing the focus we want to take.

7. The facilitator leads the team in deciding which of the grouping(s) to pursue as its initial focus or direction. It is recommended that the team start with one primary focus and make note of the other ideas generated for future reference. Then, when the initial focus is achieved, they can reconsider the other ideas generated, building on the success of initial accomplishments.

8. Timekeeper helps the team track time (30 minutes).

* This activity calls for post-its. It can also be done using a story board as described in the activity for Assessing Your Community’s Strengths, Weaknesses, Opportunities and Threats. If a story board is used, as the facilitator leads the merging of cards into groups that are set up as vertical columns. At the top of each column, leave a blank card on which the name/main theme of the cards in the column can be written by the recorder.
Sample Ground Rules for the Team to Adapt As Appropriate

TEAM NAME:

Roles

1. Agencies Represented on Team/Individual Participants = Participate fully. Communicate with the constituencies you represent. To keep the team manageable, the number of participants should be 5 to 9...12 at the very most.
   What Agency Who

2. Convener = Handle logistics of meetings. NOTE: This role may be shared if the team believes that it is helpful to rotate meeting locations.
   Who:

3. Facilitator = Lead team meetings in a way that is perceived to be fair, helping the team stay focused, and supporting the building of relationships needed for effective work. NOTE: This role may be shared. It may also be the same person as the Convener.
   Who:

4. Recorder = Take minutes and disseminate to team. Maintain team's "master" file or notebook.
   Who:

5. Timekeeper = Keeps track of time allotments on agenda and reminds team of time remaining for each agenda item so that the team can complete items in a timely manner OR adjust agenda as needed.
   Who:

6. Other Community Members = Not necessarily on team as regular members but involved on an "as needed basis" via survey, interviews, special projects, etc. as needed to accomplish particular tasks.
   What Agency Who

Collaborative Planning Project, 2001
Sample Ground Rules (continued)

Decision Making Process

1. We will use consensus. Consensus as used here means modified consensus, adhering to the test of “can we live with it and publicly support it”? If not, what needs to be changed so that we can?

2. If we cannot achieve consensus on an item, we will (choose one or more)
   ___ not include it in our plan. “When in doubt, leave it out.”
   ___ take a vote (by member or by agency?)
   ___ refer this to the respective agency heads of the agencies we represent for decisions, providing for them the various perspectives on this team
   ___ decide on an individual basis how best to proceed
   ___ other (specify)

3. Other rules at the team’s discretion -

Task Focus

1. We will start and end on time.

2. Stay outcome focused - using a “Parking Lot”/flip chart on which to record/“park” good ideas not directly related to stated meeting outcomes...ideas that might get us off task.

3. Meeting Logistics
   • Regular meeting dates and times -
   • Meeting location -

4. Maximize our time together and between meetings.

5. Other rules at the team’s discretion -

Attendance

1. Attend team meetings regularly.

2. Missed meeting - contact another member for follow-up

3. Other rules at the team’s discretion -
Sample Ground Rules (continued)

Interactions

1. Be realistic; respect others' right to say no.

2. Share ideas and air time.

3. All ideas have value...even ones with which we disagree.

4. Honor confidentiality.

5. Other rules at the team's discretion -

Communicating with Others in Our Agency and Community

1. With respective agency decision makers re: team recommendations -

2. With agency decision makers to ensure they are "in the loop", supportive/not blocking -

3. With line staff for input as we develop, implement and evaluate our efforts to make sure that any procedures or activities affecting them will be relevant -

4. With families for input as we develop, implement and evaluate our efforts to make sure that any procedures or activities affecting them will be relevant -

5. With "others" in the community with an indirect interest in our efforts -

Orientation of New Members

1. Identify a team member to orient each new member and to be that person's "buddy" during the first year on the team.

2. Provide a notebook or file of team orientation materials.

3. Other rules at the team's discretion -

Other Ground Rules Topics at the Team's Discretion
Collaborative Planning Team Input Form

Name of Person Interviewed: 
Agency: 
Address: 
Phone: Fax: 
E-mail: 
Team Member Completing This Form: 

Instructions to Collaborative Team Member Conducting a Phone Call or Meeting to Obtain this Input: Please review the team’s focus with the person you are interviewing and have them answer these questions. Record neatly in a dark color so that clear copies can be made to share with team members.

1. What is your reaction to the focus this team is taking?

2. Which elements of this focus relate to things that you or your organization are doing? What are things we need to know about so that we can coordinate our activities with you?

3. How might the team involve you with what we are doing in addition to #2 above?
   - Include you as a regular member of our team.
   - Access your input on a consultative basis (e.g., have you attend a meeting when we discuss particular topics, call you for relevant input, send you relevant materials for review and comment).
   - Include you on our mailing list as an "ex-officio" member to get our meeting minutes.
   - Other

4. What other questions or comments do you have?
Collaborative Planning Team Minutes

Date:

In attendance:

Next Meeting Plans:
Date and Time:
Location:
Purposes:

Issue I. Summary of Discussion & Decisions on the Topic of:

Issue II. Summary of Discussion & Decisions on the Topic of:

Issue III. Summary of Discussion & Decisions on the Topic of:

Issue IV: Plan for Next Steps including communicating, as needed, with other stakeholders including people within the agencies represented on the team.
Visioning Activity

Focus Question: Related to our chosen area(s) of team focus, what is the “desired” reality you want our team to create in our community? What concrete and doable procedures and/or services do you want to see in place? How are children and families benefiting?

1. Appoint a facilitator, recorder and timekeeper.

2. The recorder sets up a story board* of 2 flip chart pages taped side-by-side to the wall, making one large chart with a heading of “Our Vision”. The focus question is written on flip chart paper and posted.

3. Each team member each identifies 3-5 answers to the focus questions, recording 1 answer per post-it with a magic marker.

4. Each team member posts all post-its on chart.

5. Facilitator presents the focus question to the team and leads them in merging similar ideas into groups.

6. The recorder notes the name/title of each grouping near that grouping. These names/titles become the characteristics describing the vision we want to create.

7. Timekeeper helps team track time (25 minutes).

* This activity calls for post-its. It can also be done using a story board as described in the activity for Assessing Your Community’s Strengths, Weaknesses, Opportunities and Threats. If a story board is used, as the facilitator leads the merging of cards into groups that are set up as vertical columns. At the top of each column, leave a blank card on which the name/main theme of the cards in the column can be written by the recorder.
Activity to Identify Challenges the Team will Address via Action Planning

Note: Challenges may be apparent as a result of assessing the community’s current context (SWOTs) and visioning. If there is no consensus on challenges, the team will need to conduct an activity such as the one below for this purpose.

Focus Question: Given our SWOTs (our current context) and our vision, what are challenges we will need to address via action planning so that our vision can be achieved?

1. Appoint a facilitator, recorder and timekeeper.

2. The recorder sets up a story board* of 2 flip chart pages taped side-by-side to the wall, making one large chart with a heading of “Team Challenges”. The focus question is written on flip chart paper and posted.

3. Each team member each identifies 2-4 answers to the focus question, recording 1 answer per post-it with a magic marker.

4. Each team member posts all post-its on chart.

5. Facilitator presents the focus question to the team and leads them in merging similar ideas into groups.

6. The recorder notes the name/title of each grouping near that grouping. These names/titles become the challenges that the team will consider pursuing.

7. The facilitator leads the team in deciding which grouping(s) to pursue. The team may decide to start with only one challenge and make note of other challenges for future reference. Then, when the initial challenge is addressed, they can reconsider the other identified challenges. They may also choose more than one challenge or all. Keep in mind that teams are encouraged to “think big and start small” choosing challenges to address that are not only beneficial but also doable in a reasonable amount of time. If the team cannot arrive at this decision via discussion, the facilitator may ask the team to “vote for” the challenge that they think is the top priority.

8. Timekeeper helps team track time (30 minutes).

* This activity calls for post-its. It can also be done using a story board as described in the activity for Assessing Your Community’s Strengths, Weaknesses, Opportunities and Threats. If a story board is used, as the facilitator leads the merging of cards into groups that are set up as vertical columns. At the top of each column, leave a blank card on which the name/main theme of the cards in the column can be written by the recorder.
COLLABORATIVE PLANNING TEAM ACTION PLAN FORM

TEAM:

VISION:

CHALLENGE:

<table>
<thead>
<tr>
<th>Objective</th>
<th>Strategies/Action Steps</th>
<th>Resources</th>
<th>People</th>
<th>Timeline</th>
<th>Outcome</th>
</tr>
</thead>
</table>

COLLABORATIVE PLANNING PROJECT, 2001
<table>
<thead>
<tr>
<th>Objective</th>
<th>Strategies/Action Steps</th>
<th>Resources</th>
<th>People</th>
<th>Timeline</th>
<th>Outcome</th>
</tr>
</thead>
</table>

Collaborative Planning Project, 2001
INSTRUCTIONS FOR COLLABORATIVE PLANNING TEAM ACTION PLAN

<table>
<thead>
<tr>
<th>Objective</th>
<th>Strategies/Action Steps</th>
<th>Resources</th>
<th>People</th>
<th>Timeline</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tangible things we want to accomplish to overcome the challenge and move toward the vision, e.g., parent training and support groups, transition policies and procedures, community resource directory, committee/structure to address interagency issues on an ongoing basis, mechanism for communicating with physicians on child and system basis, etc.</td>
<td>For each objective, list the series of steps that your team will need to take in order to accomplish that objective.</td>
<td>Identify the resources (money, people, training, materials, etc.) that you will need in order to implement your action plan. Your strategy column should include steps to access the resources.</td>
<td>Identify the people who will be responsible for implementing each step in the strategy column.</td>
<td>Identify the timeframe during which each step in the strategy column will be completed.</td>
<td>Leave this column blank so that the team can use this planning form to document plan implementation and evaluation. That is, you can make notes here: ✓ Did you do what you said you would do? ✓ Did it produce the results you wanted? ✓ What have you learned as a team as a result of plan implementation? ✓ What are next steps?</td>
</tr>
</tbody>
</table>

TEAM: PERIOD COVERED: Generally preferable to have action plans with a timeframe of a year or less.

VISION: What you want to see at some point in the future (usually 3 to 5 years) as a result of challenges having been overcome. In effect, what you are working toward.

CHALLENGE: A problem you are trying to solve that is standing in the way of achieving your vision, e.g., staff lacking the knowledge and skills that they need to perform critical functions.
1. Appoint a team facilitator, recorder, and timekeeper.

2. The recorder makes "Header Cards" and posts on the story board that is 2 sheets of flip chart paper high and 2 sheets wide so that it looks like this:

   **Action Plan Objective**

<table>
<thead>
<tr>
<th>Strategies/Action Steps</th>
<th>Resources</th>
<th>Person Responsible</th>
<th>Timeline</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

   These pages are then sprayed with 3M Spray Mount Artist's Adhesive. This is a temporary adhesive which feels like the "sticky part" of a post-it. Because it is a temporary adhesive, you can stick note cards or similar materials to the story board and then move these materials around on the story board. The recorder places a note card with the appropriate heading at the top of each column as shown here.

3. Facilitator asks team members to generate strategies on note cards to respond to the following focus question:

4. What are strategies we should undertake to help us achieve our action plan objective...that will take us toward our vision?

5. If the group is 4 or less, participants can respond as individuals. If the group is 5 or more, have them work in "small groups" of 2 to 5 members (depending on the size of the group) to generate strategies. The facilitator should also participate in this activity...either as an individual or as part of a small group.

6. Participants/Small Groups write with magic markers on the cards ONE STRATEGY PER CARD. If you are using small groups, give them about 10-15 minutes to talk about and agree to the strategies that their group want to share. It is helpful to set a timer (e.g., a kitchen timer) or have a timekeeper remind them about how much time they have left at various points in the activity to help keep them focused.

7. When time is called, participants take their cards up to the board and post them on the story board. They do not need to worry about sticking them under the strategy column. They can just place their cards anywhere on the story board.
8. **Facilitator** leads the team in reviewing the strategies that have been generated and removing any duplicates. In some cases, you may decide to "merge" 2 or more common strategies into a new statement. In this case, the team's **recorder** will write this new strategy on a card and give to the facilitator for posting.

9. Once the team has non-duplicative strategies, the **facilitator** leads the team in putting these in order/chronological sequence under the strategies column. That is, what will we do first, then second, etc. As you post the cards, DO NOT overlap the note cards. Just place them close together, one under another. In doing this sequencing, the team will likely determine the need to rewrite a strategy, add a strategy or delete a strategy. The **recorder** will write revised/new strategies as needed and give to the facilitator for posting.

10. Once the strategies column is complete, the **recorder** puts blank note cards under the each of the columns remaining.

11. The **facilitator** reviews each strategy and asks the team as a whole the following:

   - **Resources** - What, if any, resources do we need to carry out this strategy/action step (e.g., a survey, a fact sheet on our program to share, people whose input we need, fiscal resources, meeting space, etc.)? The facilitator or recorder records their response. If no resources are needed, leave the card blank. Do not remove the card.

   - **Person(s) responsible** - Identify the people who will be responsible for implementing each strategy/action step in that column.

   - **Timeline** - Identify the timeframe for completing strategy/action step in that column.

   - **Outcome** - Leave this column blank so that the team can use it to document plan implementation and evaluation. As you proceed with plan implementation, review the action plan at each of your team meetings, making notes in this column re:

     ✓ Did we do what you said we would do?

     ✓ Did it produce the results we wanted?

     ✓ What have we learned as a team as a result of plan implementation?

     ✓ What are next steps?
12. When the planning process is complete, the **facilitator** will help the team wrap-up and evaluate how they felt about the process and what they accomplished. If necessary, the facilitator will help the team plan next steps, such as scheduling another meeting, conducting investigations related to the action plan, etc.

13. The **recorder** will take the scotch tape and start with the first header card (strategies) and run the tape down the column, thus taping all of the cards in that column together. Then, start with the header card and pull the column off of the paper. You may need to hold the edge of the paper so that it does not pull off of the wall while doing this. Once the taped column is removed, fold it up accordion style. Repeat the process until all columns are removed. The recorder will use this material to transcribe the plans on to the action planning form. In transcribing, it is often helpful to tape the columns on a wall to "recreate" the story board and then transcribe from that.
Round Robin Activity for Editing Multiple Action Plans

Purposes:

1. To help the team achieve consensus on action team plans - if the team develops action plans addressing multiple challenges.

2. To help the team review all action plans to get a sense of the “big picture” so that final plans resulting from the action teams are “congruent” across all of the team’s action plans.

Preparations:

1. Each team is assigned a different colored marker with which to make edits, e.g., team 1 edits with a red marker, team 2 with a blue, and so on. It is also helpful to have 4” x 6” post-its and extra note cards that can be used, where necessary for recording new ideas or idea modifications.

2. This activity takes place at a point when initial drafts of multiple action plans have been developed (see previous Action Planning Activity). These are posted on flip chart paper on which cards are posted with the various components of the plan as follows:

<table>
<thead>
<tr>
<th>Action Plan Objective</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategies/Action</td>
<td>Resources</td>
<td>Person Responsible</td>
<td>Timeline</td>
<td>Outcome</td>
<td></td>
</tr>
<tr>
<td>Steps</td>
<td></td>
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</tbody>
</table>

Instructions - These instructions presuppose the team has 4 action plans. Obviously, the number of action plans would vary depending on the team’s priorities and might range from 2 action plans to several. If this is the case, adapt the following activity according to the number of plans you actually have.

1. Each team assigns one person to stay behind as “home team” facilitator, while the rest of the team moves to another team’s work.
Round Robin Editing Activity (continued)

2. Each team rotates so they have a chance to review and comment on the work of all other teams. Set time allocations for each rotation. 10-15 minutes is usually adequate. If you had 4 teams, it would operate as follows:

<table>
<thead>
<tr>
<th>Round 1</th>
<th>Round 2</th>
<th>Round 3</th>
<th>Round 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team 1 is at</td>
<td>Station 1</td>
<td>Station 2</td>
<td>Station 3</td>
</tr>
<tr>
<td>Team 2 is at</td>
<td>Station 2</td>
<td>Station 3</td>
<td>Station 4</td>
</tr>
<tr>
<td>Team 3 is at</td>
<td>Station 3</td>
<td>Station 4</td>
<td>Station 1</td>
</tr>
<tr>
<td>Team 4 is at</td>
<td>Station 4</td>
<td>Station 1</td>
<td>Station 2</td>
</tr>
</tbody>
</table>

3. When a new team arrives, the “home team” facilitator clarifies but does not defend “home” team ideas.

The visiting team edits ideas by asking themselves, “can we live with and publicly support within our own agencies the ideas that we see posted here?” If not, the team should edit the ideas by:

1. adding new ideas;
2. deleting or marking through (but not eradicating) ideas; or
3. otherwise modifying the home team’s ideas.

Each team can edit any work appearing at the station...even putting back in ideas another team “deleted”. They should review the “persons responsible” if their names are mentioned on another team’s plan in order to confirm that this is something they are willing to do. If their name is NOT assigned to a strategy in which they have an interest, they should be encouraged to “sign up”.

4. The “home team” facilitator listens to the visiting team’s comments, asking questions as needed to “seek to understand” their rationale for their edits. When the set time has expired, teams rotate to the next station, continuing to do so until they have visited each team’s work and returned “home”.

5. When teams return to their home stations, the “home team” facilitator leads them in a debrief through which the team attempts to come up with a final set of recommendations that reflect ALL the teams’ ideas. These are then presented to the large team for a final review. Usually, the team is able to accept the recommendations fully...or with only minor edits.

Collaborative Planning Project, 2001
Generic Format for an Interagency Collaboration Agreement

**EXPLANATION:** The following provides a generic format for an interagency collaboration agreement. The **bolded items** reflect topics typically included in such agreements. The **none-bolded information** provides instructions for the user re: adapting this format to meet unique community needs.

---

**Interagency Collaboration Agreement**

**Participating Agencies:** (List agencies signing the agreement.)

---

**I. Purpose of Collaboration**

Briefly describe the reason for the collaboration addressed in this agreement, such as to achieve a shared vision, provide high quality services to children and families, maximize resources, meet community needs, and so on.

---

**II. Period Covered by the Agreement**

Identify when the agreement will take effect and when re-consideration of the agreement will take place (unless reconsideration is requested sooner by any of the participating agencies).

---

**III. Brief Description of the Collaboration**

Summarize the basic nature of the collaboration. Potential areas of collaboration include, but are not necessarily limited to, the following 12 collaboration areas:

1. Family Involvement;
2. Child Outreach/Child Find, screening, referrals, and evaluations;
3. Service eligibility;
4. Individual program planning (e.g., Individual Family Service Plans and/or Individual Education Programs);
5. Primary and related services delivery (If the collaboration is for the purpose of blending direct services among two or more agencies, include a description of the proposed model, number of days, hours per day, service area, agencies involved, services to be provided, numbers of children to be served, etc.);
6. Service settings that, to the maximum extent possible, work with children in natural settings typical for age of child and which educate children with disabilities along with children without disabilities;
7. Resource sharing including, but not limited to, facilities, materials, and equipment, collaborative services, screening, etc.);
8. Transition;
9. Confidentiality;
10. Records transfer;
11. Joint staff training;
12. Sharing child count data.
IV. Applicable Legal Requirements

Indicate if this agreement is pursuant to any state or federal legal requirements. If so identify policy, regulation, statute, etc. and who will be responsible for ensuring compliance.

V. Contact Person(s) in Each Participating Agency

For each participating agency, indicate by position title, persons responsible for decision-making and problem-solving for each agency related to the collaboration agreement. Provide contact information for these people, current as of the date of the agreement signing.

VI. Participating Agencies' Responsibilities

For each participating agency, describe activities, timelines, and persons to be held accountable. A variety of formats may be used for providing this information:

1. Topical listing in narrative/paragraph form in which a collaboration area is identified (e.g., Child Find) followed by the respective responsibilities of each of the participating agencies.

2. Agency listing in narrative/paragraph form in which each of the participating agencies are listed. Under each agency, all responsibilities relevant to the agreement are listed.

3. Chart format in which the areas of collaboration are listed down one column with applicable participating agencies' responsibilities being listed across corresponding columns.

VII. Mechanism for Coordinating Agreement Implementation

Describe how participating agencies will coordinate agreement implementation, including provision for how:

1. decisions will be made and by whom and
2. representatives from the participating agencies will meet to plan activities and resolve issues as they arise. Include a schedule for meetings and who should attend.
VIII. Evaluation and Program Improvement

Delineate the schedule and process for evaluating the outcomes and impact of the collaboration, including how this information will be used for program improvement. This should be done preferably by a team comprised of representatives from participating agencies. It should include formal and informal feedback on progress and needs for change from administrators, staff and families directly involved in the collaboration as well as data on child impact, as appropriate. Include an agreed-upon process for annual assessment of the partnership itself.

IX. Resource Sharing

Include a description of resources that may be shared such as direct services, facilities, materials, equipment, personnel, food services, transportation, training resources for staff and/or families, etc. As described above under the section on "Participating Agencies' Responsibilities", a variety of formats may be used for providing this information.

X. Amendments to the Collaboration Agreement

Indicate what process will be necessary and who will need to sign-off on amendments.

XI. Termination of Agreement by Either Party

Indicate process by which the agreement can be terminated. Include timelines, notifications, and authorization required.

XII. Signatures

For each participating agency, provide that agency head's or his/her designee's signature, name (typed), title, agency, and date.
The Collaborative Planning Project

IDEA and Early Childhood Inclusion

Barbara J. Smith, Ph.D.
and
Mary Jane K. Rapport, Ph.D., P.T.

Collaborative Planning Project
University of Colorado at Denver
Denver, Colorado

September 1999

The authors would like to acknowledge the contributions of several colleagues whose work assisted either directly or indirectly in the preparation of material for this paper: Michael J. Guralnick, Deborah Rose, Phil Strain and Sharon Walsh. Note: Portions of this paper are excerpted from: Smith, B. & Rapport, M. (in press). Public policy in early childhood inclusion: necessary but not sufficient, in M.J. Guralnick (Ed.), Early Childhood Inclusion: Focus on Change. Baltimore, MD: Paul H. Brookes.

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For more information about The Collaborative Planning Project contact Linda Frederick at the Center for Collaborative Educational Leadership, 1380 Lawrence St., Suite 650, Denver, CO 80204, (303) 556-3330, Linda_Frederick@ceo.cudenver.edu.

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"Even though IDEA does not mandate regular class placement for every disabled student, IDEA assumes that the first placement option considered for each student by the student's placement team, which must include the parent, is the school the child would attend if not disabled, with appropriate supplementary aids and services to facilitate such placement. Thus, before a disabled child can be placed outside of the regular educational environment, the full range of supplementary aids and services that, if provided, would facilitate the student's placement in the regular classroom setting, must be considered."
(34 C.F.R. Appendix A, Page 12471)

According to Seekins and Fawcett (1986), public policies commit the government to certain goals, determine whose interests and values will prevail, and regulate and distribute resources. In the United States, public policies exist as laws, regulations, executive orders, guidelines, etc., that have been promulgated at the federal, state, or local levels. Gallagher (1996) describes public policy as a social hypothesis that certain procedures will enhance the welfare of the target group of citizens for which it was designed. Additionally, he and his colleagues define public policy as the rules and standards by which scarce public resources are allocated to meet social needs (Gallagher, Harbin, Eckland, & Clifford, 1994). Public policy has been described as evolutionary – changing with the times and circumstances (LaVor, 1976a). Indeed, if it is a social hypothesis, it follows then, that as society's values and knowledge change, so to will public policy.

Inclusion policy has evolved in many ways. It has evolved as the thinking, database and values about inclusion in our society evolves. The terminology used to describe children with disabilities being with their non-disabled peers has changed over time in the consumer and professional literature as well as in policy (Odom, Horn, Marquart, Hanson, Wolfberg, Beckman, Lieber, Li, Schwartz, Janko & Sandall, 1999). Terms such as “mainstreaming,” “least restrictive environment (LRE),” “continuum of alternative placements,” “integration,” “inclusion,” and “involvement and progress in the general curriculum” represent different points in time and
different valued outcomes over the last two decades. The provisions related to inclusion in the original Individuals with Disabilities Education Act (IDEA), which was passed in 1975 as the Education for all Handicapped Children Act (P.L. 94-142), only referred to least restrictive environments and to a continuum of placement options. Updated recently, the IDEA amendments of 1997 contain many provisions for ensuring access to the “general curriculum” for 3-21 year olds and to “natural environments” for birth-2 year olds. These concepts and policies reflect a more proactive and purposeful policy with a clear preference for children with disabilities to be educated and receive services with their non-disabled age-mates in typical early childhood settings. These examples of policies and how they impact services to children point out the importance of parents and professionals being involved in the details of policy development. This involvement can help guide the policy toward best practice, as well as current values and knowledge.

National policy evolved most recently in the 1997 amendments to IDEA (P.L. 105-17). The 1997 amendments represent a major milestone. While the main purpose of IDEA remains the assurance of a free and appropriate public education for children with disabilities, the ‘97 amendments and the attendant regulations published in March of 1999, make clear the preference for inclusion. The amendments and accompanying regulations have taken the concept of LRE much further toward meaningful inclusion. Many of the new provisions are described in the following sections. IDEA ’97 attempts to address many of the previous challenges to inclusion. IDEA ’97 includes prohibitions on state education funding formulas that have the effect of segregation by funding classrooms rather than services that can be delivered anywhere [see 34 Code of Federal Regulations (C.F.R.) § 300.130], and the Individualized Education Program (IEP) provisions now require consideration of the child’s involvement in the general education curriculum and the participation of regular educators in the IEP process (34 C.F.R. § 300.340-350).

IDEA does not use the term “inclusion.” Instead, IDEA uses terms such as “LRE”, “participation in the general curriculum,” and “natural environments.” Below, in Table 1, the relevant provisions of Part C of IDEA, the Early Intervention Program for Infants and Toddlers with Disabilities, which
governs services to children from birth to three years old are reviewed, then, Part B of IDEA, Assistance to States for the Education of Children with Disabilities, is described for children from three to twenty-one years old in Table 2.

**Part C of IDEA, The Early Intervention Program for Infants and Toddlers with Disabilities**

In IDEA ’97, Part H, the Infant and Toddler Program, was changed to Part C. Regulations for Part C, the Early Intervention Program for Infants and Toddlers with Disabilities, were issued by the U.S. Department of Education in April 1998, and reopened for comment in 1999. These regulations incorporated statutory changes from the 1997 Amendments to IDEA as well as changes to provide consistency between Part C and Part B of IDEA. Final regulations for IDEA ’97 were issued in March 1999, and the Part C section contained several technical changes that were not included in the previous regulatory changes issued in 1998.

The Part C regulations include an emphasis on the provision of early intervention services in “natural environments.” The concept of natural environments, as an extension of the least restrictive environment (LRE) requirement under Part B, was first included in the then Part H regulations following the 1991 Amendments of IDEA.

Both the federal statutory and regulatory language emphasize the importance of providing services in natural environments. Part C of IDEA contains the legal presumption for providing early intervention services for infants or toddlers in natural environments. Early intervention services are defined in the IDEA ’97 statute as “developmental services that to the maximum extent appropriate are provided in natural environments, including home and community settings in which children without disabilities participate” (P.L. 105-17 § 1432). Natural environments are further defined in regulations as “settings that are natural or normal for the child’s age peers who have no disabilities” (34 C.F.R. § 303.18).

Federal law includes both the legal requirements for early intervention and the foundation for implementation of services in natural environments, but the specifics as to how such requirements should be addressed are left up to each state. As such, IDEA requires that states develop policies and
Table 1. Part C of IDEA
Early Intervention Program for
Infants and Toddlers with Disabilities – Inclusion Provisions

| Federal Regulations: 34 C.F.R. Part 303 |
| Early Intervention Program for Infants and Toddlers with Disabilities |

<table>
<thead>
<tr>
<th>Section 303.12</th>
<th>EARLY INTERVENTION SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Natural environments</td>
<td>To the maximum extent appropriate to the needs of the child, early intervention services must be provided in natural environments, including the home and community settings in which children without disabilities participate.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 303.18</th>
<th>NATURAL ENVIRONMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>As used in this part, natural environments means settings that are natural or normal for the child’s age peers who have no disabilities.</td>
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<table>
<thead>
<tr>
<th>Section 303.167</th>
<th>INDIVIDUALIZED FAMILY SERVICE PLANS (IFSPs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each application must include --</td>
<td></td>
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<tr>
<td>(c) Policies and procedures to ensure that –</td>
<td></td>
</tr>
<tr>
<td>(1) To the maximum extent appropriate, early intervention services are provided in natural environments; and</td>
<td></td>
</tr>
<tr>
<td>(2) The provision of early intervention services for any infant or toddler occurs in a setting other than a natural environment only if early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment.</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Section 303.344</th>
<th>CONTENT OF AN IFSP</th>
</tr>
</thead>
<tbody>
<tr>
<td>(d) Early intervention services</td>
<td></td>
</tr>
<tr>
<td>(1) (ii) The natural environments, as described in Sec. 303.12(b), Sec. 303.18, in which early intervention services will be provided, and a justification of the extent, if any, to which the services will not be provided in a natural environment.</td>
<td></td>
</tr>
</tbody>
</table>
procedures to ensure that, to the maximum extent appropriate, early intervention services are provided in natural environments and occur elsewhere only if early intervention cannot be achieved satisfactorily in a natural environment. In an effort to facilitate implementation around providing services in natural environments, Part C also requires that each IFSP identify the natural environment in which services are to be provided and justify the extent, if any, to which the services will not be provided in the natural environment. Thus, the legal interpretation indicates that all early intervention services should occur in settings that are natural for the child’s nondisabled age peers, unless there is justification of the need for the delivery of early intervention supports and services in some other setting. This exception should occur only when the IFSP team, including the child’s parent(s), determines that goals and objectives related to the child’s development cannot be achieved satisfactorily through intervention in settings that are natural for other children of the same age.

Part B of IDEA, Assistance to States for the Education of Children with Disabilities (3-21)

Part B of IDEA applies to the education for children with disabilities 3-21 years old. The requirements for 3-5 year olds are, therefore, contained in Part B of IDEA, not Part C.

In Part C of IDEA, the Infants and Toddlers Program, the concept of “natural environment” is used to refer to inclusive settings for birth-2 year olds (see Table 1). In Table 2, the provisions in the regulations governing Part B that pertain to serving 3-21 year olds in inclusive settings are described. The Congress used different terminology for preferred settings in Part C for infants and toddlers than for children 3-21 governed by Part B. The term “natural environments” used in Part C refers to settings that are natural or normal for the child’s age peers who are nondisabled. The terms used in Part B are more educational-setting based, i.e., “least restrictive environment,” “general curriculum,” etc. This is an artifact of the preschool provisions being “housed” in Part B – the part of the law that primarily describes services for the school-aged population.
There are other attempts in Part B to recognize the importance of procedures that may need to be different for 3-5 year olds from the school age procedures. This is evident in the section of the law governing the IEP. Under this section, when it refers to requiring a statement in the IEP of “how a child’s disability affects the child’s involvement and progress in the general curriculum” it makes a distinction for preschoolers: “for preschool children, as appropriate, how the disability affects the child’s participation in appropriate activities” (34 C.F.R. § 300-347). The regulations did not respond to field requests to the U.S. Department of Education to describe what “appropriate activities” might refer to. It was the recommendation of the Division for Early Childhood (DEC) of the Council for Exceptional Children that “appropriate activities” be defined as: “activities, materials and environments that are chronologically age relevant and developmentally and individually appropriate” (DEC, 1998). In another example of age-related adaptations related to the LRE provisions, Appendix 1 of the regulations (“Analysis of Comments”), includes the following guidance for preschool placement options: “The full continuum of alternative placements at 34 C.F.R. § 300.551, including integrated placement options, such as community-based settings with typically developing age peers, must be available to preschool children with disabilities” (pg. 12639).

We have included in Table 2 many of the provisions related to the IEP, because the IDEA priority to include children in typical settings and in the general curriculum is woven throughout the IEP requirements. The IEP is primary to enhancing the child's involvement in regular education settings. The IEP describes the services to be provided to the child and the setting in which they will be provided. The priority for inclusion is reflected in the provisions related to (a) the content of the IEP; i.e., statements regarding access to the general curriculum and appropriate activities (34 C.F.R. § 300.347) and justification for nonparticipation in regular class and activities (34 C.F.R. § 300.347); and (b) requirements of the IEP team; i.e., the requisite involvement of a regular education teacher (34 C.F.R. § 300.344) and access to and knowledge of the IEP by all teachers and related service providers of the child (34 C.F.R. § 300.342). These are new requirements and emphases.
Table 2. Part B of IDEA
Assistance to States for the Education of Children
with Disabilities – Inclusion Provisions

Federal Regulation: 34 C.F.R. Part 300
Assistance for Education of All Children with Disabilities

| Section 300.28 |
| SUPPLEMENTARY AIDS AND SERVICES |
| As used in this part, the term *supplementary aids and services* means, aids, services, and other supports that are provided in regular education classes or other education-related settings to enable children with disabilities to be educated with nondisabled children to the maximum extent appropriate in accordance with section 300.550-300.556. |

| Section 300.130 |
| LEAST RESTRICTIVE ENVIRONMENT |
| (a) General. The state must have on file with the Secretary procedures that ensure that the requirements of sections 300.550-300.556 are met including the provisions in section 300.551 requiring a continuum of alternative placements to meet the unique needs of each child with a disability. (b) Additional requirements, (1) If the State uses a funding mechanism by which the State distributes State funds on the basis of the type of setting where a child is served, the funding mechanism may not result in placements that violate the requirements of paragraph (a) of this section. (2) If the State does not have policies and procedures to ensure compliance with paragraph (b) (1) of this section, the State must provide the Secretary an assurance that the State will revise the funding mechanism as soon as feasible to ensure that such mechanism does not result in placements that violate that paragraph. |

| Section 300.235 |
| PERMISSIVE USE OF FUNDS |
| (a) (1) Funds provided to an LEA under Part B of the act may be used for the following activities: (1) For the costs of special education and related services and supplementary aids and services provided in a regular class or other education-related setting to a child with a disability in accordance with the IEP of the child, even if one or more non-disabled children benefit from such services. (2) to develop and implement a fully integrated and coordinated service system... |

| Section 300.340 |
| DEFINITIONS RELATED TO IEPs |
| Individualized education program or IEP means a written statement for each child with a disability that is developed, reviewed, and revised in accordance with section 300.341-300.350 |

Table continues
### Section 300.342
**WHEN IEPs MUST BE IN EFFECT**

(b)(2) The child's IEP is accessible to each regular education teacher, special education teacher, related service provider, and other service provider who is responsible for its implementation; and (3) Each teacher and provider described in paragraph (b) (2) of this section is informed of -

(i) His or her specific responsibilities related to implementing the child's IEP; and (ii) The specific accommodations, modifications, and supports that must be provided for the child in accordance with the IEP.

### Section 300.344
**IEP TEAM**

(a) The public agency shall ensure that the IEP team for each child with a disability includes - (1) The parents of the child; (2) At least one regular education teacher of such child (if the child is or may be, participating in the regular education environment); (3) a representative of the local educational agency who is knowledgeable about the general curriculum...

[the other provisions related to Team membership do not relate to LRE]

### Section 300.346
**DEVELOPMENT, REVIEW AND REVISION OF IEP**

(d) Requirement with respect to regular education teacher. The regular education teacher of a child with a disability, as a member of the IEP Team, must, to the extent appropriate, participate in the development, review and revision of the IEP, including assisting in the determination of - (1) appropriate positive behavioral interventions and strategies for the child and (2) supplementary aids and services, program modifications, or supports for school personnel that will be provided for the child....

### Section 300.347
**CONTENT OF IEP**

(a) General. The IEP for each child with a disability must include -

(1) A statement of the child's present levels of educational performance, including - (i) how the child's disability affects the child's involvement and progress in the general curriculum (i.e. the same curriculum as for nondisabled children); or (ii) For preschool children, as appropriate, how the disability affects the child's participation in appropriate activities;

(2) A statement of measurable annual goals, including benchmarks or short-term objectives, related to-(i) Meeting the child's needs that result from the child's disability to enable the child to be involved in and progress in the general curriculum; or for preschool children, as appropriate to participate in appropriate activities and (ii) Meeting each of the child's other educational needs that result from the child's disability;

(3) A statement of the special education and related services and supplementary aids and services to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for the school personnel that will be provided for the child- (i) To advance appropriately toward attaining the annual goals; (ii) To be involved and progress in the general curriculum in accordance with paragraph (a) (1) of this section and to participate in extracurricular and other nonacademic activities; and (iii) To be educated and participate with other children with disabilities and nondisabled children in the activities described in...

Table continues
(4) An explanation of the extent, if any, to which the child will not participate with nondisabled children in the regular class and in the activities described in paragraph (a) (3) of this section.

(i) A statement of any individual modifications in the administration of State or district-wide assessments of student achievement that are needed in order for the child to participate in the assessment; and (ii) If the IEP Team determines that the child will not participate in a particular State or district-wide assessment of student achievement (or part of an assessment), a statement of - (A) Why that assessment is not appropriate for the child; and (B) How the child will be assessed.

Section 300.550-556
LEAST RESTRICTIVE ENVIRONMENT (LRE)
(b) Each public agency shall ensure - (1) that to the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are non-disabled; and (2) that special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Section 300.551
CONTINUUM OF ALTERNATIVE PLACEMENTS
(a) Each public agency shall ensure that a continuum of alternative placements is available to meet the needs of children with disabilities for special education and related services. (b) The continuum required in paragraph (a) of this section must- (1) Include the alternative placements listed in the definition of special education under section 300.26 (instruction in regular classes, special classes, special schools, home instruction, and instruction in hospitals and institution); and (2) Make provision for supplementary services (such as resources room or itinerant instruction) to be provided in conjunction with regular class placement.

Section 300.552
PLACEMENTS
In determining the educational placement of a child with a disability, including a preschool child with a disability, each public agency shall ensure that - (a) The placement decision - (1) Is made by a group of persons, including the parents, and other persons knowledgeable about the child, the meaning of the evaluation data, and the placement options; and (2) Is made in conformity with the LRE provisions of this subpart, including section 300.550-300.554; (b) The child's placement - (1) Is determined at least annually; (2) Is based on the child's IEP; and (3) Is as close as possible to the child's home; (c) Unless the IEP of a child with a disability requires some other arrangement, the child is educated in the school that he or she would attend if nondisabled; (d) In selecting the LRE, consideration is given to any potential harmful effect on the child or on the quality of services that he or she needs; and (e) A child with a disability is not removed from education in age-appropriate regular classrooms solely because of needed modifications in the general curriculum.
Section 300.553
NONACADEMIC SETTINGS
In providing or arranging for the provision of nonacademic and extracurricular services and activities, including meals, recess periods, and the services and activities set forth in section 300.306, each public agency shall ensure that each child with a disability participates with non-disabled children in those services and activities to the maximum extent appropriate to the needs of that child.

Section 300.554
CHILDREN IN PUBLIC OR PRIVATE INSTITUTIONS
Except as provided in section 300.600(d), an SEA must ensure that section 300.550 is effectively implemented, including, if necessary, making arrangements with public and private institutions (such as a memorandum of agreement or special implementation procedures).

Section 300.555
TECHNICAL ASSISTANCE AND TRAINING ACTIVITIES
Each SEA shall carry out activities to ensure that teachers and administrators in all public agencies - (a) Are fully informed about their responsibilities for implementing section 300.550; and (b) Are provided with technical assistance and training necessary to assist them in this effort.

Section 300.556
MONITORING ACTIVITIES
(a) The SEA shall carry out activities to ensure that section 300.550 is implemented by each public agency.
If there is evidence that a public agency makes placements that are inconsistent with section 300.550, the SEA shall - (1) Review the public agency's justification for its actions; and (2) Assist in planning and implementing any necessary corrective action.
Other inclusion-related provisions include the definition of "supplementary aids and services" (34 C.F.R. § 300.28). The term is defined in such a manner as to make it clear that these non-special education and related services are to be provided if necessary to successfully include a child with a disability in a regular education setting and/or the general curriculum. Therefore, services such as teacher training, and other supports beyond special education and related services must be provided in the regular education setting if it enhances the successful inclusion of a child with a disability. The amendments also include: (a) prohibitions on state education funding formulas that have the result of creating segregation, e.g. formulas that pay for classes rather than services, etc. (34 C.F.R. § 300.130), and (b) a clear preference for education in the regular classroom to the extent that 34 C.F.R. § 300.235 clarifies that IDEA funds are to be used for special education, related services and supplementary aids and services in the regular class even if non-disabled children in that setting benefit from them.

While IDEA '97 emphasizes a preference for inclusion for infants and toddlers and preschoolers with disabilities, implementation strategies at the state and local levels will play an important part in actualizing that preference. Implementation will need to address people's concerns about inclusion, policy and administrative challenges to inclusive systems and the quality of services. These three areas of challenge must be systematically assessed and improved to ensure that inclusion is achieved and results in positive experiences and outcomes for children, families and the personnel who serve them.
REFERENCES


Facilitating Change in Comprehensive Early Childhood Systems

Collaborative Planning Project for Planning Comprehensive Early Childhood Systems

Peggy Hayden
Barbara J. Smith
Mary Jane Rapport
Linda Frederick

September 1999

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Facilitating Change in Comprehensive Early Childhood Systems
Collaborative Planning Project for Planning Comprehensive Early Childhood Systems
Peggy Hayden
September 1999

OVERVIEW

Facilitating comprehensive early childhood systems is an ongoing process of complex change. It necessitates having both an awareness of research on effective practices related to systems change as well as an effective model for promoting such change. This paper presents a summary of systems change research and the Collaborative Planning Project’s (CPP) model of planning comprehensive early childhood systems (Smith & Rose, 1993). This model includes: (1) Facilitator Role; (2) Stakeholder Involvement; (3) Leadership Commitment; (4) Assessing the Current Context, (5) Visioning; (6) Determining Priority Challenges to Address; (7) Strategy Development and Action Planning; and (8) Plan Implementation, Monitoring and Evaluation.

Systems change is not an isolated event in which you “change the system” by passing legislation or developing policies and procedures. As Michael Fullan (1993) puts it, “You can’t mandate what matters” and “the more complex the change, the less you can force it.” (p. 22). “Events” such as mandates are important. However, for the desired change to become reality, people must act. Ensuring such actions requires systemically planning, implementing and evaluating strategies that impact both organizations and individuals (Guskey & Huberman, 1995; Fullan, 1993; Senge, 1990). Research shows that we must address a variety of system issues such as: (1) having a clear sense of our current context including analysis of those features we would like to change; (2) articulating a “shared vision” that describes what change implementation would look like; (3) providing professional development to ensure people have the necessary knowledge
and skills to enact the change; (4) ensuring adequate fiscal, human and facility resources; (5) offering incentives for change promotion; (6) providing ongoing supports to assist people with change implementation; and (7) having methods of monitoring and evaluating change implementation and impact. (Guskey & Huberman, 1995; Fullan, 1993 & 1991; Senge, 1990).

Moreover, systemic change is not accomplished through plan development and implementation in a “neat”, step-by-step linear cause and effect mode, because systems are dynamical - ever evolving (Mintzberg, 1994; Fullan, 1993; Senge, 1990). At the same time that we are implementing systemic changes, we must have an effective means of continuous planning and system adaptation in order to reflect both our learnings from plan implementation and the ever changing context in which the plan is being implemented related to new mandates, staff turnover, budget cuts, program growth, and so on. In short, planning is not a project we “do” and then we’re done!

Applying systems change to facilitating comprehensive early childhood systems is complicated because multiple agencies and consumers make up the system. In reality, it is a “system of systems”. Promoting change in just one agency can be challenge enough! Change on an interagency basis requires each participating agency to change to some degree both internally and in the ways they work with other agencies. Thus, to ensure the change process is meaningful, it must be embedded in and responsive to the needs of those agencies both individually and collectively. The following sections present key features of the Collaborative Planning Project’s (CPP) model for planning comprehensive early childhood systems.

**CPP Model**

**Facilitator Role**

The change “facilitator” may be one person or a team. For our purposes, the term “facilitator” will refer to one person both for simplicity and because typically there is a single facilitator. The facilitator is “a person who is acceptable to all members of the group”, is “substantively neutral”, does not have authority over the group, and helps the “group improve the way it identifies and solves problems and makes decisions, in order to increase the group’s effectiveness” (Schwarz, 1994, p. 4). Having an “outside”
facilitator is ideal, particularly with interagency groups. However, a person in the group can serve in this role (e.g., a chair) as long as the group believes this person to be neutral in the way s/he facilitates the group and as long as processes are designed so that s/he can step in and out of the facilitator role as needed to also serve in the role as an agency representative.

Throughout the facilitation process, the facilitator’s role is to build the team’s capacity. Particularly for interagency groups, this group may not have worked together in the past or may even have a “rocky” history. Thus, while all of the members of an interagency group may be “high performing”, the group itself may not be. The group will likely go through stages of team development: (1) getting to know each other and their task (forming); (2) sharing commonalities and differences (storming); (3) developing common ground and a plan of action (norming); (4) working together to implement, monitor, and evaluate the plan (performing); and, finally, (5) making a decision on whether to continue as a group when the plan is completed to address new issues, reconstituting the group as needed (transforming) (Fay & Doyle, 1982).

The facilitator can support group members in building their capacity to work together by helping them: (1) gather background information needed for their task; (2) adopt ground rules and procedures for running effective meetings, including producing minutes and related materials; (3) establish communication procedures among group members and within the respective agencies; (4) determine decision making parameters for the group, including issues over which it does and does not have authority and the process for interfacing with the respective agencies’ chains of command; and (5) develop the necessary structure for working together to sustain plan development, implementation, monitoring and evaluation (Schwarz, 1994; Fullan, 1993). Capacity building also includes developing effective interpersonal skills and relationships, without which plans and interagency agreements, no matter how well written, can only endure on paper but not in practice (Fisher & Brown, 1988). As the capacity of the group evolves, so does the facilitator’s role. The facilitator has a more directive role as the group begins. Over time the facilitator’s role becomes more supportive, letting the group become self-directive so that its long term success is
not dependent on the facilitator. The facilitator’s first role is foundation builder, moving as needed to referee and nominalizer to make all members feel equal and valued despite their roles or job titles (particularly in the early stages). Then, as the group progresses, the role shifts to task management and then finally to process advisor (Schwarz, 1994; Fay & Doyle, 1982).

It is critical that the group believes that the planning will focus on the agenda of the group and not that of the facilitator. Even though the facilitator is “in the front of the room”, the power is not; the power is “in the room”, within the group members. The facilitator’s role is to help the members harness and collectively focus their power. Mintzberg (1994) contends that planners (facilitators) tend to be more reflective and patient with the planning process and are apt to want to plan more comprehensively and deal with more abstract issues, because that is the “meta-position” from which they view the system. Managers (agency staff and consumers) generally view the need for change more narrowly and want to see quick results, because that responds to issues with which they deal on a day-to-day basis. Successful planning requires both. If the initial planning process is successful, they will see a “return on their investment” of their time and resources and be inclined to want to build on that success, tackling additional and more comprehensive issues at a later date. It takes time to build the capacity to work together and to own the planning (Rous, Hemmeter & Schuster, 1999). But this time investment actually saves time in the long run, because it establishes a solid foundation for eventual collaboration on plan implementation and increases the likelihood that actions of the group will produce meaningful change. In short, you must go slow to go fast (Fullan, 1993).

Stakeholder Involvement

Stakeholders include consumers, line staff who will implement the plans, administrators, agency heads and boards, representations of key groups or other agencies not directly tied to the planning process. They are the people who have a stake in the current system and/or in the future system. Their “ownership” of the effort is key to its success. Involving the array of stakeholders does not mean having everyone literally “at the table”. Rather, an effective multi-level mechanism for
stakeholder involvement should be established, including having stakeholders: (1) serve on the core team that coordinates the planning with a manageable number of key representatives in decision-making/administrative positions and consumers literally “at the table”; (2) serve on action planning teams established to address priority challenges and report to the core team (usually chaired by core team members); and (3) provide input to the planning process via surveys, interviews, focus groups, supplying data/information, and/or reviewing and commenting on plans. The key is designing stakeholder involvement activities that are meaningful to the planning process and meaningful to the stakeholders themselves.

It is advisable to start with a core team of stakeholders to serve as the steering committee for the planning process. Keep the group from five to nine members, no more than twelve if at all possible, to ensure that the group size is manageable for the planning task (Daniels, 1986). The core team will decide on the planning focus which, once decided, will make it easier to identify other stakeholders to be involved and how. Frequently, in an effort to be participatory, people are recruited who “ought” to share a common interest but do not. These people are not able to see, “How this applies to me.” These are usually the people who either get the group sidetracked (because they are trying to make the group’s discussion relevant to them) or more often, they are the people who do not come to the meeting. Unfortunately, people frequently blame the poor attendance on “their lack of commitment”, when in fact, there may not be a good fit between the players and the issues being addressed.

There are three groups of critical stakeholders: (1) agency decision-makers who will need to approve and likely finance the plans; (2) agency staff who will implement the plans; and (3) the consumers who will be impacted by the plan. It is not uncommon for members of an interagency planning team to reflect varied levels of decision making authority relative to the agencies they represent. The core team will also need to prepare for resistance to change among these stakeholders that is natural but, nevertheless, still disruptive and potentially destructive (Kanter, 1984). As Peter Senge (1990) says, “People don’t resist change, they resist being changed” (p. 155).

The core team can take a number of steps to get the support of the three critical
stakeholder groups: (1) soliciting input as issues are being discussed; (2) keep these stakeholders informed and involved as planning is occurring through various ways; (3) consider any “decisions” of the team as only “recommendations” until adequate input from these stakeholders can be obtained; (4) clarify decision-making parameters for the core team in light of the decision-making policies and chains of command with the various agencies; and (5) ensure that stakeholders are actively involved in fine tuning the plan during implementation as well as in monitoring plan progress and evaluating its impact. Using these strategies helps stakeholders develop ownership, influence the change in a way that is more meaningful to them, prepare for the change, and access support during the change process. Without the ownership of key stakeholders, the plan is nothing more than words on paper.

Identifying the tentative focus of the collaborative planning will assist in identifying which agencies should be invited to participate in a “core team” which will oversee or steer the planning process. To begin, the number of players needs to be manageable. It is preferable that agency representatives be people who are in decision-making/administrative capacities. One or more consumer representatives should also be involved. These individuals need to be “ready” both individually and collectively to work together. If they have a negative attitude toward change and toward each other, they are not ready to start the planning process. Starting the process at their perceived level of readiness and need is key to getting their commitment (Fullan, 1991). It is part of building the group’s foundation and ownership.

Leadership Commitment

The ultimate goal is for group members to “own” the planning process. However, it is highly unusual for this ownership to be fully in place at the beginning of the process. Planning, particularly interagency planning, is charting an unknown course full of potential opportunities but also risks. Because of this uncertainty, the facilitator will need to cultivate commitment. Fullan (1993) points out that commitment is an outcome of people interacting over time resulting in shared “learning that arises from full engagement in solving problems” as a team (p. 31).

To promote commitment, the facilitator should help the members of the team
identify needs of individual agencies as well as the community-at-large, for which collaboration could be a useful process. In short, find out “what’s in it for them”. Needs identification can occur on an individual and/or group basis and is critical to establishing the tentative focus for the group’s comprehensive planning. A second strategy for developing commitment is for the group members to learn of similar efforts that have been successful. This can be accomplished through case studies of other communities or meeting and conversing with people from communities that have planned comprehensive early childhood systems.

Assessing the Current Context

Once a “core team” is in place to steer the planning effort, the facilitator helps them assess the current status of the issue(s) identified as their tentative planning focus. They examine both internal issues (strengths and weaknesses, e.g., perspectives of staff and consumers; existing mandates, policies and procedures; demographic information; recent successes and challenges; data on services; staffing patterns) and external issues (opportunities and threats, e.g., potential funding sources, new mandates; competition; increased demand for services / waiting lists). This assessment helps them see where they have common strengths and needs and how collaboration might be useful to them individually and collectively. A needs assessment promotes collaboration as an outgoing process for problem solving beneficial to all, rather than a “project” that will come to an end at some point. It also helps them confirm that the “tentative” focus is, in fact, the focus they want for their planning efforts.

This assessment process anchors planning in the current context of both individual agencies and the community “system”. In doing so, it both fosters both “systems thinking”, while also making planning more concrete and relevant to the day-to-day agency operations. The more the early plans build on and relate to this agency and systems context, the greater the likelihood that meaningful change and actions will continue when the initial planning effort ends (Rous, Hemmeter & Schuster, 1999; Guskey & Huberman, 1995; Fullan, 1993).

Assessment is also a tool for group capacity building. It helps members see planning as a strategy for dealing with issues over which they may or may not have
control. That is, for issues imposed externally that seem out of members’ locus of control, they come to realize that they can impact these issues through planning their response that is meaningful to their context. This is particularly critical in this age of mandates when one sometimes hears agency staff remark, “is it in the law” or “just tell me what I have to do”. Such remarks indicate a reaction to changes forced on them rather than consideration of changes that they would like to see. These same individuals may think it is pointless to plan because they do not feel they are in control of their “current realities” as Peter Senge (1990) calls it.

Visioning

Based on an assessment of their current context and confirmation of a focus that is meaningful to them, the core team then determines how it would like the current reality to be changed. In short, what is the “vision” they would like to create. A vision: (1) describes what we would like things to be like at some point in the future (usually three to five years); (2) builds on the past and present but does not simply extend it; (3) is concrete and reasonably attainable, including doing some new things and taking some risks; and (4) is uplifting, compelling people to action. This vision should “create a sense of commonality that permeates” the team “and gives coherence to diverse activities” (Senge, 1990, p. 206).

It is important that this vision be “shared”, because, to paraphrase Senge, visions don’t perform, people do. Thus, vision development should include input of not only the core team but also the constituencies they represent. It should be more than a “piece of paper”, rather, a driving force behind the actions of the core planning team and the people who are involved in plan implementation.

Initially, the “vision” may actually be a preliminary articulation of a common goal toward which the core team wants to work. A true vision may then emerge from this. Fullan (1993) echoes Senge (1990) when he explains:

“First, under conditions of dynamic complexity one needs a good deal of reflective experience before one can form a plausible vision. Vision emerges from, more than it precedes, action. Even then it is always provisional. Second, shared vision, which is essential for success, must evolve through the
dynamic interaction of organizational members and leaders. This takes time and will not succeed unless the vision-building process is somewhat open-ended. Visions coming later does not mean that they are not worked on. Just the opposite. They are pursued more authentically while avoiding premature formalization.” (p. 28)

Determining Priority Challenges to Address

Agencies represented on the core team are likely bombarded with increasing numbers of externally driven mandates to change with limited time, resources, and skills to systemically address what Alvin Toffler (1970) calls the “Future Shock”. Given this situation, Fullan (1993 & 1991) advises thinking big and starting small. That is, once the vision is established, the core team should determine the challenges to this vision and a time period in which they want to develop action plans (typically 1 to 2 years). These challenges will be the focus of planning and systems change activities during this timeframe. The facilitator should help the team establish criteria for prioritizing the challenges. Some typical criteria for prioritizing the challenges are:

1. Impact - Does it move us in a meaningful way toward fulfilling our vision?
2. Niche - Is it reflective of the mission we have or want to further develop?
3. Immediacy - Is it timely (a window or opportunity or a cornerstone for other things)?
4. Consequence - How significant is the consequence (e.g., if we do...or do not do)?
5. Likelihood - What is the likelihood that we can do this related to our time, funding, expertise and person power?
6. Acceptability - Is it socially and ethically acceptable? Could we publicly support it?
7. Value - Would we be willing to give up something important to do this?

Similar criteria should be used as the core team makes decisions about selecting priority issues and strategies.

Strategy Development and Action Planning

For each of the challenges articulated, action plans should be developed. Action planning teams should be chaired or co-chaired by members of the core team to help facilitate communication between these two types of teams. Action planning teams are “task groups” composed of five to twelve key stakeholders, such as practitioners and consumers, who have the knowledge to
develop effective strategies to address their assigned challenge (Daniels, 1986). Using such stakeholders in addition to core team members helps to link planning to the “level of use”, that is, using input from the people who will actually implement or be impacted by plans (particularly line staff and families) (Fullan, 1993 & 1991). Plan formats can vary. However, common action plan components include: (1) objective to move the work toward the vision; (2) strategy(ies) to address each objective; (3) action steps to achieve this strategy; and (4) for each action step, person responsible, resources needed, and timeline.

Strategies and action steps should: (1) support both individual and organizational development, including job-embedded professional development; (2) start with “small” steps to effect change by successive approximation and make the change more “doable”; (3) work done in teams for networking, idea sharing and providing support; (4) use of procedures for feedback on results so that implementers are reinforced for what they are doing and/or are directed in appropriate implementation; (5) follow-up support balanced with pressure to achieve results; and (6) the integration of change into existing programs to ensure that it is context relevant (Rous, Hemmeter & Schuster, 1999; Guskey & Huberman, 1995; Barth, 1991; Fullan, 1991). The action plan ultimately becomes the “script” for plan implementation that the team can use for tracking activities and recording outcomes and impact of the strategies.

**Plan Implementation, Monitoring and Evaluation**

Once the plan is written, the team should celebrate. However, this is not the end, but the beginning of the implementation phase. This is where the facilitator’s ongoing efforts in building the team’s capacity to work effectively together pays high dividends by ensuring they have the knowledge, skills and structures necessary to work together as a team and sustain plan implementation, monitoring and evaluation. Moreover, this is the point at which, if an outside facilitator is used, team facilitation is often transitioned to one or more team members. This is all the more reason why capacity building for the team is critical.

Plan implementation, monitoring and evaluation are not three distinct steps but rather interrelated functions. The core team should establish a mechanism to coordinate these functions. Sometimes that means
establishing a new core team but most often the core team that developed the plan will be left in place with a transformed role. This new or transformed team will use the planning document to track activities to see if they are being done, and if so, what is being learned and what plan refinements need to be made. They should also track external variables (e.g., new mandates, funding sources or cutbacks, staffing issues) so that these can be integrated into the current context and aligned with and used for plan refinement - rather than losing focus and leaving the plan half implemented while they move to the new “issue du jour”.

Supports during all phases of implementation are important. People do not automatically get “on board”, embracing the changes called for by the plan. Research shows that as change is initiated, there is a “creative tension” between how people have always done things and the vision they want to create (Senge, 1990). Their vision pulls them forward if the vision is meaningful to them. It motivates them as they try to build new ways of doing things and thinking about things. However, until they have some success at implementing the change, their true understanding of the meaning of the change and its potential benefits is limited and their lack of “competence” erodes their confidence. They are likely to say, “things were so much easier the old way”. Fullan (1991) refers to this as the “implementation dip” in which “things get worse before they get better and clearer as people grapple with the meaning and skills of change” (p. 91).

Like breaking any old habit and developing a new one, it takes time. People go through various stages of concern, decision and behavior related to the change or innovation: (1) moving from needing to be made aware of the proposed change to (2) wanting more in-depth information to (3) deciding how to incorporate the change and (4) building it in to one’s routine, (5) then refining the change based on practice and feedback data, (6) collaborating with others and (7) finally, adapting the change or deciding to take on new changes (Hall, Wallace, & Dossett, 1973). The core team should ensure that team members within each agency and the core team itself have ongoing job-embedded professional development, supports and incentives for plan implementation to ensure that people have the knowledge, skills and attitudes that they need to implement the change (Rous, Hemmeter & Schuster, 1999).

We also know that change should be both top down and bottom up, balancing
both external motivation (e.g., mandates, funding, state or local plans) and internal motivation (e.g., those implementing the change seeing how it will benefit them and others who want to do things differently) (Fullan 1993 & 1991; Senge, 1990). Hopefully, stakeholder involvement has addressed this issue during plan formulation. Likewise, stakeholder involvement is critical during plan implementation, monitoring, and evaluation. Information should be collected and analyzed on an ongoing basis to determine plan status and impact, to adapt the plan to the ever evolving context, and to ensure adequate supports are in place until the changes are adequately institutionalized...at which time, they will become a foundation on which to build new changes.

**CONCLUSION**

This paper has presented a summary of research on systems change and the Collaborative Planning Project’s model of planning comprehensive early childhood systems. It is hoped that the use of this information will assist community agencies in collaborative endeavors that will benefit them, their communities at-large, and, most particularly, the young children and families they serve.
REFERENCES


Other helpful references


Early Childhood Inclusion Policy and Systems:

What Do We Know?

Barbara J. Smith, Ph.D.
and
Mary Jane K. Rapport, Ph.D., P.T.

Collaborative Planning Project
University of Colorado at Denver
Denver, Colorado

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For more information about The Collaborative Planning Project contact Linda Frederick at the Center for Collaborative Educational Leadership, 1380 Lawrence St., Suite 650, Denver, CO 80204, (303) 556-3330, Linda_Frederick@ceo.cudenver.edu.

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Early Childhood Inclusion Policy and Systems:
What Do We Know?
Barbara J. Smith, Ph.D. and Mary Jane K. Rapport, Ph.D., P.T.
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There are few instances in the literature specific to early childhood inclusion policy and systems. In 1988, the National Association of State Directors of Special Education (NASDSE, 1988) and the Great Lakes Area Regional Resource Center (GLARRC, 1988) conducted surveys on early childhood inclusion policies. The two studies reported similar policy issues: (1) ambiguities related to fiscal policies that allow inclusive options for young children, i.e., use of public special education funds; (2) a lack of policy related to agency responsibility for assuring program quality in natural (non-school based) settings; (3) ambiguities related to policies ensuring personnel providing special education services in natural settings meet public school standards; and (4) other concerns about meeting state and federal special education mandates in non-school settings that offer inclusive and natural opportunities.

A limited evaluation of the early childhood provisions of the Individuals with Disabilities Education Act (IDEA) is reported annually by the U.S. Department of Education, Office of Special Education Programs, in its Annual Report to Congress on the Implementation of IDEA. There have been twenty such reports to date; the most recent one reports data from the 1996-97 school year (USDOE, 1998). According to that report, it is unclear how many infants and toddlers are served in natural settings other than the home, and it is unclear how many of those are served in the home as a preferred option of the parents. The report states that 53% of infants and toddlers with disabilities were served in their home, 28% in early intervention classrooms, and 10% in outpatient facilities. For preschoolers, 51.6% were served in regular classes (programs designed primarily for nondisabled children), 31% in separate classes, 10% in resource rooms, and 3% in their home.

Researchers in North Carolina reported that 34% of the early childhood programs they studied included children with disabilities (Buysse, Wesley, Bryant & Gardner, 1999). Finally, as McLean and Dunst (1999) point out, most early childhood inclusion policy or systems studies have focused on classrooms to the exclusion of family day care and other community inclusion opportunities.

In 1990 and again in 1993 the Research Institute for Preschool Mainstreaming conducted national policy surveys, the results of which are discussed below. The types of policy barriers studied included: quality assurance policies, fiscal policies, transportation policies, use of private settings, eligibility policies, and
personnel training and standards. Non-policy issues studied were curriculum and attitudes/beliefs (Smith, Salisbury & Rose, 1992; Smith & Rose, 1993). Following are summaries of the data from the two studies as well as additional information collected for purposes of updating those data (Smith & Rapport, in press).

**Issues in Inclusion Policies for Preschoolers**

A comparison of the data from the two national surveys collected by the Research Institute on Preschool Mainstreaming in 1990 and again in 1993 provides information related to policies and their effects over time. The information represents a sample from various groups directly involved in programs for young children ages 3-5 years with disabilities (e.g., state and local education administrators, child care and Head Start directors, and parents). An examination of the questions and results from the two surveys is contained in Table 1.

Overall, the results indicate a slight increase (+4%) in the amount of preschool mainstreaming/integration that was taking place in 1993 compared with 1990, and fewer people noted a lack of local policy related to preschool mainstreaming/integration. It is difficult to be specific about where the growth in integration might have occurred. These results suggest that more preschool integration was occurring in 1993 along with the existence of more local policies related to integration.

Nearly all barriers to inclusion reportedly declined between 1990 and 1993. However, there was an increase (+4%) between 1990 and 1993 in the percent of respondents who indicated there were values or attitudes that serve as barriers. Comments from several respondents in the 1993 survey described these values or attitudes:

- "Regular early childhood educators and administrators often lack both the knowledge and training to serve children with disabilities objectively."

- "A few persons at state and local levels believe that segregated settings are best for preschool children. Therefore, we sometimes see only one setting offered as placements for preschool children."

- "Some programs strongly believe in special education preschool programs."

- "People are still unsure of children with disabilities being with their "normal" child."

- "Concern re: the special needs child requiring too much of the teacher's time, with not enough attention being given to typical students."

It is important to note that these 1993 comments are nearly identical to the comments about values and attitudes that were reported in 1990 (Rose & Smith, 1993). The beliefs could be categorized as those expressing:
Table 1. Challenges To Inclusion – Comparison of 1990 and 1993 Research Institute on Preschool Mainstreaming Survey Data

<table>
<thead>
<tr>
<th>Question/Issue</th>
<th>1990 results</th>
<th>1993 results</th>
<th>Net change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is preschool mainstreaming/integration taking place?</td>
<td>Yes-88%</td>
<td>Yes-92%</td>
<td>+ 4%</td>
</tr>
<tr>
<td>Is there a lack of local policy related to preschool mainstreaming/integration?</td>
<td>Yes-58%</td>
<td>Yes-46%</td>
<td>-12%</td>
</tr>
<tr>
<td>Are there barriers to preschool integration related to program quality and/or program supervision and accountability policies?</td>
<td>Yes-33%</td>
<td>Yes-28%</td>
<td>-5%</td>
</tr>
<tr>
<td>Are there barriers to preschool integration related to fiscal or contracting policies, e.g. procedures for funding inclusive settings?</td>
<td>Yes-47%</td>
<td>Yes-35%</td>
<td>-12%</td>
</tr>
<tr>
<td>Are there barriers to preschool integration related to transportation policies?</td>
<td>Yes-27%</td>
<td>Yes-23%</td>
<td>-4%</td>
</tr>
<tr>
<td>Are there barriers to preschool integration related to policies governing the use of private agencies/institutions?</td>
<td>Yes-33%</td>
<td>Yes-30%</td>
<td>-3%</td>
</tr>
<tr>
<td>Are there conflicting eligibility policies between public schools and providers of integrated services?</td>
<td>Yes-28%</td>
<td>Yes-14%</td>
<td>-14%</td>
</tr>
<tr>
<td>Are there practices or policy barriers to preschool integration related to personnel training and experience?</td>
<td>Yes-59%</td>
<td>Yes-49%</td>
<td>-10%</td>
</tr>
<tr>
<td>Are there barriers to preschool integration related to curricula or methods?</td>
<td>Yes-27%</td>
<td>Yes-25%</td>
<td>-2%</td>
</tr>
<tr>
<td>Are there values or attitudes that serve as barriers to preschool integration?</td>
<td>Yes-58%</td>
<td>Yes-62%</td>
<td>+4%</td>
</tr>
</tbody>
</table>
a) turf guarding; b) personnel preparation concerns; c) lack of awareness; d) lack of communication/collaboration; and e) beliefs that some children would lose out.

The remaining seven items related to policy barriers all declined in the years between the first and second surveys. The greatest change (-14%) was in the respondents' view of whether there were conflicting eligibility policies between public schools and other providers of service. Many of the policy conflicts noted in 1990 were related to the difference between Head Start eligibility and that of IDEA. The criteria were brought more in line in subsequent amendments to Head Start. Also, in 1990, the Americans with Disabilities Act (ADA) was passed which made it more difficult for child care programs to have discriminatory eligibility requirements. The second largest change was in the reduction of perceived policy barriers related to fiscal or contracting procedures (-12%). The two greatest continuing challenges to preschool inclusion were values/attitudes toward inclusion and issues related to personnel training and experience.

It is important, also, that in the 1990 study, when asked for copies of policies that presented the perceived barrier, respondents later reported that they found that the policy did not, in fact, exist! Rather, the barrier was a misinterpretation of a policy (Smith & Rose, 1993).

There were several new questions included in the 1993 survey. Table 2 summarizes those data. Two of the questions asked respondents whether knowledge of the long-term impact of integration on (a) children with disabilities and (b) those who are typically developing would facilitate the expansion of integrated programs. Eighty-eight percent (for children with disabilities) and 86% (for typically developing children) of the respondents answered that it would make a difference. All of the parent respondents answered affirmatively to this question as well.

Not surprisingly, 65% of respondents said that the possibilities of community-wide integration would improve if children with disabilities could manage their own behavior. And, 79% said that there would be more integrated opportunities if service providers knew how to promote the development of friendships between children with disabilities and their typically developing peers.

Finally, respondents were asked to identify which groups exert the most influence on school district’s policies and procedures related to preschool integration. Almost half (41%) said principals and other administrators exert the most influence. This group was the choice of 100% of the parents and 64% of the Head Start directors. While none of the parents thought they exerted the most influence, 37% of the other respondents named parents as the group with the most influence.
Table 2. 1993 Research Institute on Preschool Mainstreaming Survey

<table>
<thead>
<tr>
<th>Additional Questions/Issues Asked in 1993</th>
<th>1993 Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Would it be helpful to know the long-term impact of preschool integration on children with disabilities?</td>
<td>Yes – 88%</td>
</tr>
<tr>
<td>Would it be helpful to know the impact of preschool integration on typically developing children?</td>
<td>Yes – 86%</td>
</tr>
<tr>
<td>Would options for integration improve if children with disabilities could manage their own behavior?</td>
<td>Yes – 65%</td>
</tr>
<tr>
<td>Would there be more integrated opportunities if providers knew how to promote the development of friendships?</td>
<td>Yes – 79%</td>
</tr>
<tr>
<td>Which group exerts the most control on school district policies and procedures related to preschool integration?</td>
<td>41%</td>
</tr>
<tr>
<td>*Principals and other administrators</td>
<td>37%</td>
</tr>
<tr>
<td>*Parents</td>
<td>20%</td>
</tr>
<tr>
<td>*Teachers/direct service personnel</td>
<td>12%</td>
</tr>
<tr>
<td>*Others</td>
<td>7%</td>
</tr>
<tr>
<td>*The public</td>
<td></td>
</tr>
</tbody>
</table>

To supplement the 1990 and 1993 data, the authors conducted a short survey and one focus group in 1999 asking State Education Agency (SEA) Preschool (Section 619) Coordinators the current status of challenges to inclusive preschool systems and programs in their state. Despite the low response rate to the survey (N=9 or 18%), important trends were noticeable. The states that responded to the 1999 survey and the six participating in the focus group continue to identify similar challenges and barriers that were first identified and discussed in 1990. Among the states, there was variability as to which areas continue to present challenges. Several states indicated that funding policies (e.g., funding for programs for “typically developing children”) continue to be a barrier. Other states reported challenges in program standards assuring compliance with the requirement to provide educational programs and related services in the least restrictive environment (LRE) or in natural settings, i.e., accountability in community settings. In addition, there continue to be challenges related to transportation and coordination between programs. In 1993, Smith & Rose (1993 & 1994) reported that many communities had developed effective strategies for addressing policy changes to inclusion. These strategies are shown in Tables 3 and 4 on the next pages.
Table 3. Strategies for Changing Policy Challenges

<table>
<thead>
<tr>
<th>Program Standards Strategies</th>
<th>Fiscal: Church/State Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Developing standards and non-public school program approval procedures that are specific to preschool environments: using the approval mechanism available through other state agencies which govern preschool and child care, adopting guidelines for approval that are germane to preschool programs such as the accreditation procedures of the National Academy of Early Childhood Programs of the National Association for the Education of Young Children; and then adding the necessary specifications for meeting the needs of children with disabilities such as The Recommended Practices of the Division for Early Childhood.</td>
<td>• Developing a list of assurances that programs located in religious facilities sign:</td>
</tr>
<tr>
<td>• Requiring contracting agencies to sign program quality “assurances” much like those required of the LEA and SEA under Part B, IDEA;</td>
<td>• The program has a Board of Directors separate from the religious body whose members sign a statement indicating that they make decisions independent of the religious facilities’ Board of Directors;</td>
</tr>
<tr>
<td>• Developing a list of “indicators of quality” to guide LEAs and parents in making decisions regarding integrated options;</td>
<td>• The program rents space from the religious facility rather than having the space provided free of charge;</td>
</tr>
<tr>
<td>• Developing compliance monitoring systems for program quality to be used for all programs, whether school-based or community-based.</td>
<td>• The program assures the absence of religious symbols;</td>
</tr>
<tr>
<td>Personnel Standards Strategies</td>
<td>• The program provides an audit trail that ensures separate financing.</td>
</tr>
<tr>
<td>• Ensuring that special education and related services are provided under the supervision of certified special education and related services personnel. These personnel options include itinerant teachers, consultative personnel to the integrated program, and team teaching which couples a special education teacher and a regular education teacher for all services;</td>
<td>Eligibility Strategies</td>
</tr>
<tr>
<td>• Providing incentives for underqualified teachers to upgrade their credentials to meet SEA requirements at no cost to the teacher;</td>
<td>• Schools and Head Start programs work cooperatively in the identification of children who meet LEA criteria or Head Start criteria. For those children who meet only the Head Start criteria, Head Start provides services. For those children who meet both Head Start and LEA criteria, the children are dually enrolled and services are provided by the LEA;</td>
</tr>
<tr>
<td>• Developing state education personnel standards that create new (or recognize other) credentials generic to early childhood settings, i.e., the Child Development Associate, personnel standards of state agencies that govern those sites (e.g., child care licensing);</td>
<td>• Co-locating with Chapter I programs or child care alternatives and combining classrooms; team-teaching with special and regular education personnel in Chapter I programs that have children with disabilities integrated; providing personnel who are funded by both programs and meet all necessary personnel requirements.</td>
</tr>
<tr>
<td>• Providing in-kind technical assistance and training to community-based preschool providers;</td>
<td>Transportation Strategies</td>
</tr>
<tr>
<td>• Providing qualified program personnel in lieu of funding or tuition payments to community programs.</td>
<td>• Providing flexible transportation schedules and routes that coincide with schedules and locations of integrated sites (Head Start, child care, etc.), including flexibility in crossing district boundaries when transporting to integrated sites;</td>
</tr>
<tr>
<td>Fiscal: Allocation and Contracting Services</td>
<td>• Providing for reimbursement to families or others who provide transportation;</td>
</tr>
<tr>
<td>• Establishing state special education funding formulas that provide for combining “fractions” of “units” to equal a full time</td>
<td>• Utilizing the transportation provided by the inclusion site in exchange for other education agency services or resources.</td>
</tr>
<tr>
<td>• Developing funding allocation procedures across programs (special education, Chapter I, at-risk, child care, etc.) that allow for combinations of various funding streams to be “blended” in one integrated program;</td>
<td>Coordination/Cooperation Strategies</td>
</tr>
<tr>
<td>• Allowing for the actual and adequate payment of tuition in integrated sites; or the provision of services such as personnel, personnel and parent training, transportation, related services, etc. in lieu of tuition payments.</td>
<td>• SEA early childhood staff (general and special education) engage in cooperative planning and activities are sometimes organizationally “housed” together in an Early Childhood Unit in order to promote cooperation. This allows for cooperative planning of program policies across federal programs as well as state programs (i.e., educational “at-risk” preschool programs, Chapter I, special education, etc.)</td>
</tr>
<tr>
<td>• LEAs and regional early childhood staff (general and special education) engage in cooperative efforts and are also sometimes “housed” together in a district-level Early Childhood administrative unit to increase cooperation;</td>
<td>• Local school district early childhood staff engage in cooperative activities with integrated programs, i.e., child care, Head Start, etc. such as community program coordination and planning, or share resources such as transportation, training, related services personnel (Smith &amp; Rose, 1993).</td>
</tr>
</tbody>
</table>

Table 4. Strategies for Changing Attitudes

<table>
<thead>
<tr>
<th>Turf Strategies</th>
<th>Awareness Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Placement teams with representation from key players</td>
<td>Various technical assistance networks put in place for</td>
</tr>
<tr>
<td>Frequent, structured, on-going meetings to discuss</td>
<td>information sharing</td>
</tr>
<tr>
<td>Establish a state and local vision statement that is</td>
<td>Visit model integration projects</td>
</tr>
<tr>
<td>intended to guide practices</td>
<td>• Arrange a roundtable discussion of all team members</td>
</tr>
<tr>
<td>Enlist the support of someone proficient in</td>
<td>• Allow ample time for participants to meet with their</td>
</tr>
<tr>
<td>facilitation discussions about attitudes (e.g.,</td>
<td>counterparts to discuss their experiences</td>
</tr>
<tr>
<td>university personnel, human service providers)</td>
<td>• Administrators set the tone for integration practices in the</td>
</tr>
<tr>
<td></td>
<td>school. If the administrator believes that including all</td>
</tr>
<tr>
<td></td>
<td>children is the right thing to do, attitude and policy</td>
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<tr>
<td></td>
<td>barriers will be viewed as challenges rather than barriers. If</td>
</tr>
<tr>
<td></td>
<td>the administrator does not believe that all children deserve</td>
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<td></td>
<td>to be educated together, the administrator can potentially</td>
</tr>
<tr>
<td></td>
<td>create barriers to integration</td>
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<tr>
<td>Teacher Preparedness Strategies</td>
<td>Communication/Collaboration/Respect Strategies</td>
</tr>
<tr>
<td>• Improved communication and training between and</td>
<td>• Administrators must make a commitment to providing their</td>
</tr>
<tr>
<td>among service systems</td>
<td>• Provide common planning time during the school day to</td>
</tr>
<tr>
<td>• Community service providers should be given the</td>
<td>• State-wide commitment to integration by developing a</td>
</tr>
<tr>
<td>most current information and best practice for</td>
<td>philosophy or vision statement by which the State will</td>
</tr>
<tr>
<td>children with disabilities</td>
<td>operate its educational practices related to young children.</td>
</tr>
<tr>
<td>• Make on-going consultation from special education</td>
<td>• Community providers who feel that they lack the expertise</td>
</tr>
<tr>
<td>personnel available to community providers</td>
<td>• Visit model programs to witness, first hand, a high quality</td>
</tr>
<tr>
<td>• Early childhood special education has a &quot;family</td>
<td>integrated program</td>
</tr>
<tr>
<td>focus&quot; that can be shared with community providers</td>
<td>• Parents of all children who are reluctant to have their</td>
</tr>
<tr>
<td>• Early childhood special educators are expert at</td>
<td>children participate must be respected. Perhaps they could</td>
</tr>
<tr>
<td>individualizing education for children and this</td>
<td>be provided with the awareness materials and research</td>
</tr>
<tr>
<td>expertise can be shared with community providers</td>
<td>foundation for integration</td>
</tr>
<tr>
<td>• General early education providers have a strong</td>
<td>• Joint training conducted by special education and community</td>
</tr>
<tr>
<td>development background that could benefit special</td>
<td>providers can be used to share each program's expertise</td>
</tr>
<tr>
<td>educators</td>
<td>• Parents should be active participants</td>
</tr>
<tr>
<td>• Joint training conducted by special education and</td>
<td>• Administrators set the tone for integration practices in the</td>
</tr>
<tr>
<td>community providers can be used to share each program</td>
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<td>children is the right thing to do, attitude and policy</td>
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<td>create barriers to integration</td>
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Issues in Inclusion Policies for Infants and Toddlers

There are even fewer reported policy studies related specifically to inclusion for infants and toddlers. Gallagher et al. (1994) describes three general stages in policy evolution: policy development, policy approval, and policy application. With the more recent emphasis in IDEA on the provision of early intervention services in natural environments, many states have had to shift from the policy application stage back to the policy development and policy approval stages in order to incorporate changes necessary for an alternative model of service delivery.

In an effort to generate similar information to that collected from SEA Preschool (Section 619) Coordinators on challenges to inclusive preschool services, a similar survey was sent to state Part C Coordinators. While the response rate of 12% (N=6) makes it difficult to generalize the information, conversations with experts around the country informally validated the survey responses. Many of the challenges to preschool inclusion are also challenges for states in their efforts to provide young children and their families with inclusive early intervention services under Part C., e.g., funding patterns, eligibility policies, personnel standards, attitudes/beliefs, etc. This is particularly troublesome, since we know that children who begin their early childhood careers in segregated settings often continue to be placed in those types of settings (Miller, Strain, McKinley, Heckathorn, & Miller, 1995). Several Part C Coordinators were quick to point out that personnel training is a major barrier to the delivery of appropriate and quality inclusive early intervention services. Also, lack of funding and lack of collaboration across programs impede the ability of states to overcome the personnel issue. Access to child care programs that are high quality as a “natural environment” is a dilemma for many families and a barrier for programs (Buysse, et. al., 1999; Janko, Schwartz, Sandall, Anderson and Cottam, 1997; Cost, Quality and Child Outcomes Study Team, 1995).

Like the challenges facing preschool inclusion, well entrenched attitudes and beliefs favoring segregated service delivery models are also a substantial barrier to the implementation of early intervention services in natural environments. Changes in state funding models, state policy around service delivery, and the need to provide early intervention in alternative settings, has threatened the existence of many programs designed to provide early intervention in specialized settings. In many states, parents and professionals struggle with changing existing systems from center-based early intervention programs to itinerant special services in natural environments such as the home or child care setting. This decentralization of service delivery poses a number of similar
challenges described above in the preschool issues section and leads to parental and professional concerns and fears.

As service delivery models change, so do the requirements around billing and third party reimbursement. In several states, the use of third party insurance benefits is one of the biggest challenges to overcome in the provision of early intervention services in natural environments. This challenge is particularly significant in states that require utilization of the family’s third party benefits. One such challenge or dilemma stems from the discrepancy between health insurance rules requiring physician supervision of services to be reimbursed and the desire to provide services to children and families in settings outside health care facilities where there are no physicians. This stipulation often works in opposition to the IDEA federal requirements of providing early intervention services in natural environments.

Part B of IDEA requires agencies other than education to comply with the legal responsibilities outlined in the law, but Part C does not currently have the same requirement. Such a requirement under Part C might be the impetus necessary to make changes such as allowing Medicaid-eligible infants and toddlers to access services in natural environments using Medicaid resources. Similar regulatory and policy changes may be necessary for private insurers who have stringent limitations on providers, settings, and types and amounts of therapy services. Any contemplated policy change is complicated by the fact that rules governing the implementation of Medicaid and other third party resources vary from state to state. The barriers identified in one state cannot be assumed to exist in another state. Therefore, the mechanism for overcoming such barriers may vary considerably across states as well as between counties or other local governing entities.

**Is Public Policy Sufficient for Creating Change?**

We have reviewed information on the prevalence of inclusive programming in early childhood, whether the policy challenges to the inclusion of young children have changed over time, and what the existing challenges are. In this discussion, we have noted the following:

- There is a dearth of policy research efforts looking particularly at inclusion policies, their implementation, and effectiveness in meeting desired goals for young children.
- The policy research that is available points to slow progress in the effectiveness of current policies and systems to advance inclusion for young children. While IDEA has required educating children in the least restrictive environment for over twenty years, only about 51% of preschoolers with disabilities are being educated in inclusive settings. One study reported a smaller
percentage of programs that are inclusive than earlier reported (34% vs. over 50%) (Buysee, et. al.). There are still the same perceived policy challenges in the mid-to-late 1990s that there were in the year 1990. There appears to be the same perception that current fiscal and contracting policies limit contracting with or creating normalized settings; personnel preparation does not facilitate individually and developmentally appropriate settings for all children; school’s transportation policies limit access to more natural settings; and that ambiguity of program accountability between lead agencies and typical settings remains.

- There were greater challenges to inclusion in people’s attitudes and beliefs in 1993 than there were in 1990.
- The perceived policy barriers did not in fact exist in the 1990 study – only the belief that they did.
- Factors other than policy are reported to be important in advancing inclusion. These factors include knowledge of the effects of inclusion, knowledge and skills of personnel to promote friendships, and children’s abilities to manage their own behavior.
- The quality of the majority of natural environments is mediocre at best.

It appears that current public policy alone may not be sufficient for promoting inclusive practices. However, given that policy establishes goals and determines the use of public resources, it is probably necessary. Indeed, policy could be viewed as the floor of possibilities upon which a structure can be built by actions that change attitudes and beliefs; that promote better understanding among stakeholders including parents, schools, child care providers, health providers, and payers; and that increase resources – both fiscal and human. Policies can facilitate improvements in the non-policy related factors such as personnel skills. For instance, according to McDonnell, et. al. (1997), less than half of the teachers in NAEYC accredited early childhood community programs that enroll children with disabilities – have the benefit of the support of an early childhood special educator. Also, participation as a member of the IEP team was significantly less for teachers in community programs versus teachers in public schools. The emphasis in IDEA ’97 on ensuring necessary special services in typical settings whenever possible, as well as mandating the participation of the regular educator on the IEP team, may address these threats to quality inclusion.

We have also learned that people report other important influences that could promote the practice of inclusion: broader knowledge by all stakeholders about the benefits of inclusion for both children with disabilities and typically developing peers; the ability of children with disabilities to manage their behavior; and recognition that school administrators and parents are perceived as the most important
stakeholders for improving inclusion policies and opportunities.

There have been many recommendations for action that go beyond the realm of policy (Harvey, et. al., 1997; Rose & Smith, 1993; Smith & Rose, 1993; Washington & Andrews, 1998). Training and technical assistance initiatives assist in decreasing and eliminating the barriers associated with personnel preparation and quality programs (Buysse, Wesley, & Boone, in press). These efforts may be a link to moving forward in positive directions as better prepared personnel will be able to provide quality programs and services to meet the needs of all young children in the community. Training and technical assistance has been shown to result in systems change (Rous, Hemmeter & Schuster, 1999). Personnel trained to work with typically developing children can learn new skills associated with adapting to the needs of children with disabilities in their settings. Personnel trained to work with children with disabilities can learn to provide their expertise in the natural environment and to support the teacher. Both groups can learn to work as a team rather than independently (Harvey, et. al., 1997; Rosenkoetter, 1998; Smith, Miller & Bredekamp, 1998). Personnel trained to systematically collect data and reflect on inclusive practices in a university - school research partnership had positive effects on inclusive practices, collaboration and beliefs (Gettinger, Stoiber & Lange, 1999).

We also could begin by taking a look at current, high quality inclusive programs as a resource (Harvey, et. al., 1997; Smith & Rose, 1993). The examples that these programs can share allow us the opportunity to begin to break down some of the barriers and challenges before us. Peer-to-peer consultation (e.g., administrator to administrator, teacher to teacher, parent to parent) allows individuals from successful inclusive environments to give relevant support and advice to their peers attempting the transition to inclusive practices. The respondents to the surveys discussed in this paper said that stakeholders need information on the impact of inclusion. Other strategies reported in the literature include person-to-person dialogue to share information, fears and experiences. These exchanges can allay fears, build trust, and build awareness of successful inclusion efforts. Clearly, there are individuals that do not believe that inclusion is important for young children, who do not know how to accomplish it, or who are afraid of change. These individuals could benefit from strategies that emerge from these exchanges (Janko et al., 1997; Peck, Hayden, Wandschneider, Peterson, & Richarz, 1989; Rose & Smith, 1994; Rose & Smith, 1993; Strong & Sandoval, 1999).

A better understanding among stakeholders about why and how to provide inclusive opportunities can be accomplished through
collaborative planning at the community level. (Smith & Rose, 1993 & 1994; Strain, Smith, & McWilliam, 1996; Washington & Andrews, 1998). Indeed, IDEA '97 (34 C.F.R. § 300.244) contains language encouraging the use of Part B funds (up to 5%) by local school districts to “develop and implement a coordinated services system.” Such coordinated service system activities may include coordination around transition of a child from Part C services to Part B services, interagency financial arrangements, and interagency personnel development. These efforts can bring together Head Start, child care, parents, schools and others as appropriate to build together a vision and system of early childhood services and supports for all children. These collaborative efforts can result in better understanding of the various programs, of the needs of families of young children, and of how to meet the diverse needs of all children in the community. These efforts can result in a better and more efficient use of limited resources by promoting sharing and reallocation of space, funds, transportation, personnel training opportunities, etc. And finally, these efforts can result in communication and respect across programs and between programs and families.
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