State Data Use Spotlight: New York

**Challenge:** How do we facilitate sustained change at the local level and scale up to a large workforce across the state?

The New York Department of Health (NYSDOH), which serves as the lead agency for the New York State Early Intervention Program (NYSEIP), recognized the challenges in effecting lasting change across a large and diverse workforce within a complex system. State leaders sought to provide a meaningful and data-driven process for the State Systemic Improvement Plan (SSIP) and build capacity of local teams to use evidence to identify, implement and sustain SSIP improvement strategies and practices. The state selected the Institute for Healthcare Improvement (IHI) Breakthrough Series model to create an environment of systemic quality improvement.

This state spotlight highlights NYSEIP’s use of the Breakthrough Series model to create sustained improvements in the quality of services for children and families.

# State Context

New York’s Part C State Systemic Improvement Plan (SSIP) aims to achieve positive family outcomes by improving the quality of early intervention services and ensuring that services are family centered. The focus on family outcomes grew from the state’s analysis of data and infrastructure conducted in SSIP Phase I. One of the state’s most significant challenges is the size and complexity of the system—NYSEIP serves 69,000 children a year through a large network of service delivery providers (agencies and individuals) with diverse populations and geography.

Early Intervention (EI) Facts: New York

Local Programs: 57 (56 Counties and NYC)

EI Billing Providers: 1267

Children served in EI: 69,000

Given the size of the system and evidence on best practices in professional development, state leaders believed that one-time training encounters would not be sufficient to create sustained changes at the local level. The IHI’s Breakthrough Series model provides a framework for sustained system changes. NYSDOH has a history of successfully using the Breakthrough Series model to make sustained improvements in the quality of healthcare. For example, the NYSDOH has used this model to improve safe sleeping procedures in birthing hospitals and reduce scheduled deliveries prior to 39 weeks gestation without medical induction. With a strong history with the Breakthrough Series model and in-house expertise in implementing it, NYSEIP selected this model as part of its SSIP approach.

# Using the Breakthrough Series to Create Sustained Change

What is the IHI Breakthrough Series Model?

The model was developed to help healthcare organizations improve the quality of care. It is based on IHI’s Model for Improvement, which emphasizes the testing of small-scale improvement ideas through PDSA cycles. The approach brings improvement teams from multiple organizations together through learning collaboratives on a specific topic area. In learning sessions, teams work with experts to learn about and develop improvement plans related to the topic area. Teams then identify and test improvement ideas through PDSA cycles and share experiences and data with other teams for collaborative learning.

In early 2018, NYSEIP launched its first cohort of Family-Centered Practices Learning Collaboratives in three regions of the state using the Breakthrough Series (see sidebar for a description of this model). Each of the three collaboratives has multiple local teams (8 to 14), which are composed of three to seven participants, including early intervention officials and managers, at least one service coordinator or service provider, and one or more family members of a child in early intervention. The collaboratives operate for 12 months; a second cohort of collaboratives was launched in fall 2018.

The collaboratives feature the following primary components.

* *In-person Learning Sessions*. The collaboratives were kicked off with in-person learning sessions where teams came together to learn, share, and plan. One goal was to increase knowledge in two areas: principles of quality improvement, with a focus on the Breakthrough Series approach, and evidence-based family centered practices. A second goal was to help the local teams begin planning their local improvement project. This included systems mapping to gather information from the families’ perspective on the early intervention system; developing an AIM statement, which is the specific, measurable, attainable and timely goal related to family outcomes that the teams wanted to achieve; identifying the family-centered practices that would best address local needs; and creating a plan to identify and test an initial small change idea through Plan-Do-Study-Act (PDSA) cycles.
* *Ongoing Webinars and Support*. Local teams receive ongoing coaching and support through monthly webinars and calls facilitated by early intervention experts to discuss details of their plan, accomplishments, and challenges. The experts, from the three New York State University Centers of Excellence in Developmental Disabilities, stay in regular contact with the teams to address issues, review their data, and provide feedback as needed. Teams also share with and learn from other teams in their region about successes and challenges in implementing specific improvements intended to improve family outcomes.
* *Using data to test improvement strategies*. Local teams use PDSA cycles to test the implementation of locally-identified, family-centered practices in a short period of time. Using data, teams decide whether they should continue testing the new practice with more families across more settings, make adaptations, or abandon it and select a different practice. Teams are expected to collect data, complete a data tracking tool, share data with team members, and use data to make decisions.

# Impact of Strategies

NYSDOH State leaders believe that increased awareness and commitment to quality improvement and family-centered practices are contributing to improvements in the New York’s state-identified measurable result (SiMR). With the launching of the Breakthrough Series model this year, leaders are noticing improvements in how local and state teams are using data and evidence as first steps towards effecting change. Feedback from participants has been very positive. For example, evaluations of the in-person trainings indicate that participants felt that the sessions were valuable in helping teams develop family-centered improvement plans. One feedback theme was that the Breakthrough Series process allows local programs to select the practices that fit their population and priorities. A few teams from a rural area, for instance, have focused their improvement plan on social media projects, including a family-run Facebook page to help families connect with other families with children receiving early intervention services.

New York’s desired long-term impact is that local programs will not only sustain SSIP improvements but also increase their capacity to use data to continuously improve in other areas.

# Recommendations for States

New York sees the Breakthrough Series model as having great potential for creating sustained change in state systemic improvement efforts such as the SSIP. Recommendations for states considering this type of approach are:

* Build internal (state-level) capacity before implementing a quality improvement model with local programs. NYSEIP developed internal capacity by using PDSA cycles to improve Annual Performance Report (APR) indicators such as timeliness of Individualized Family Service Plans (indicator 7).
* Start small. Conduct a pilot test with a few programs and build capacity from there.
* Get leadership buy-in. New York benefitted from NYSDOH leadership who were committed to quality improvement. Even when other priorities arose, building capacity for quality improvement was still seen as a priority.
* Train the workforce in quality improvement so that it becomes part of the fabric of their work.
* Be patient. New York spent several years developing internal capacity, building awareness across the state, and preparing for the learning collaboratives. Building capacity for authentic quality improvement does not happen quickly.

**Available Resources**

* [*The Breakthrough Series: IHI’s Collaborative Model for Achieving Breakthrough Improvement*](http://www.ihi.org/resources/Pages/IHIWhitePapers/TheBreakthroughSeriesIHIsCollaborativeModelforAchievingBreakthroughImprovement.aspx)
* [Institute for Healthcare Improvement](http://www.ihi.org) (many resources and tools are available)
* National Center for Systemic Improvement (NCSI), Technical Assistance State Facilitators (Find your state on the map [here](https://ncsi-resources.wested.org/))
* NCSI Data Use Team Technical Assistance Support (Contact: Kristin Ruedel at [kruedel@air.org](mailto:kruedel@air.org))

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