

**ICC MEETING  
THURS, JAN 15, 2015  
STATEWIDE VIDEO CONFERENCING**

*Approved on 3.4.15*

**PRESENT**

Mary McCarvel O'Connor  
Tonya Canerot  
Bobbi Jo Couch  
Jill Staudinger  
Carol Brakel  
Cassie Keller  
Jackie Harasym

David Zimmerman  
Tamara Gallup Lelm  
Jody Haug  
Tina Bay  
Shannon Grave  
Karen Tescher  
Moe Schroeder

Staff:

Amanda Carlson  
Roxane Romanick  
Colette Perkins

Guests:

Carol Johnson  
Kristen Votava  
Valerie Bakken  
Magan Paulson  
Natasha Sawicki

**TOPIC: MINUTES**

Minutes from December 4, 2014 were reviewed. A correction was suggested on the bottom of page 4 changing Memorandum of Agreements to Memorandum of Understanding. The acronym was changed out and then corrected at the top of page 5. In addition, it was noted that there is **one** Memorandum of Understanding not two as stated in the draft minutes. There was a motion made for acceptance of the minutes as corrected by David Zimmerman and seconded by Tammy Gallup Lelm. The motion passed.

**TOPIC: FAMILY STORY – JODY HAUG**

Jody shared that she and her husband started to receive additional news about their pregnancy with Sam around 20 weeks. A congenital heart condition was often indicates in 50% of the cases where it presents, that the baby will have Down syndrome. They were sent for additional testing/news to Minneapolis. Sam came early at 29 weeks and was born at Fairview. He did arrive confirming the news that he had Down syndrome. His big sister, Sophie, did not meet him until he was transferred home to Altru in Grand Forks, where he stayed for another month. He was able to come home to join his family on Valentine's Day. Sam had a heart repair surgery when he was fourteen months old. Jody shared how important Early Intervention services were for both Sam and their family. She noted that it helped them

get through those first months and years. Currently Sam is in the first grade and spends the majority (80%) of his day with his friends.

**TOPIC: MEMBER UPDATES – Update on any Legislative News**

It was announced that the Pathfinder Parent Involvement Conference will be held April 9 – 11<sup>th</sup> in Bismarck at the Radisson Hotel.

Tammy Gallup Leim reported that the Department of Health budget will be heard starting in the House and is scheduled for overview on January 19<sup>th</sup>. Community Health – which includes Children Special Health Services is scheduled to be heard Wednesday, January 21<sup>st</sup> starting at 2:00 p.m. Tammy informed the Council about SB 2176 which is a clean-up bill for the Autism Spectrum Disorder Registry. The suggested language will expand who can be considered a qualified reporter as well as expand the language around who is qualified to perform the physical exam. Also SB 2334 attempts to clean up language regarding the Newborn Screening Program.

Mary McCarvel-O’Conner and Valerie Bakken reported on the following bills that they are following:

- HB 1046 – Establishes a Traumatic Brain Injury Registry and calls for an appropriation for service coordination
- HB 1108 – A bill to amend language in a number of section of the Century Code from developmentally disabled person to a person with a developmental disability
- HB 1256 – Relating to the definition of brain injury
- SB 2218 – Funding for existing social clubs for persons with disabilities on the eastern side of the state.

David Zimmerman reported that nothing has come forward yet in legislation regarding establishing the Essential Health Benefits for the state. This needs to be by 2016. He will alert the ICC when a bill comes forth.

Karen Tescher reported that the Department prepared a fiscal note to address some of the concerns that were raised through the Department Study as guided by HB 1378 from last legislative session. The funding in the fiscal note was not included in the governor’s budget nor is it a Department OAR. The funding estimated the cost for 15 slots in the current Medically Fragile waiver at \$385,000 a year. The Department received input on the assessment tool for the Level of Need for the Medically Fragile waiver. The Department will continue to go ahead and implement the new tool regardless of what happens in the Legislature. Karen also reported that the Money Follows the Person program is asking for comment on their Sustainability Plan until 2.16.15. Roxane will forward to the Council. Money Follows the Person assists individuals moving out of an institutional setting that they have resided in for at least 3 months. Karen noted that MFP works in collaboration with any waiver for which the individual qualifies.

Tina Bay reported that reported that they are watching HB 1209 which involves deciding the child’s school district of enrollment. This affects the Division in determining school responsibility for any children placed out-of-home in DD services. The DHS budget also contains a 4% and 4% increase for DD

providers which would impact ID providers. The Division has a request in for an additional FTE for a nurse on staff in the state office – this is a Department OAR, but not in the governor’s budget.

Tonya Canerot reported that Child Welfare is watching bills relating to Sex Trafficking (SB 2063, SB 2064, and SB 2081).

Roxane provided a legislative update and this was sent to the Council members.

Information relating to the following conferences were passed out:

- ND Early Childhood Conference – April 24, 2015. Registration will be available at: [www.dpi.state.nd.us/EarlyChildhoodEduc/index.shtm](http://www.dpi.state.nd.us/EarlyChildhoodEduc/index.shtm)
- National Division for Early Childhood Conference – October 7<sup>th</sup> – 9<sup>th</sup>. Atlanta, GA. For additional information: [www.dec-sped.org](http://www.dec-sped.org)
- Home Visitation Conference (sponsored by the ND Home Visitation Coalition) – April 17<sup>th</sup>.

**TOPIC: STANDING NDICC ITEMS – Tabled until 3/4/15**

**TOPIC: OLD BUSINESS**

**Review of NDICC Evaluations** – Jill reviewed the summary of comments from the ICC Evaluations that were completed. Roxane will forward the summary to the Council so that they can act on any recommendations from the summary.

**Discussion regarding Medicaid and Children on the Waiver:** The issue was raised that there is difficulty in Cass County with parents, whose children are being screened for the HCBS ID/DD waiver, being asked for their income and asset information when applying for Medicaid. Families are being denied if this information is not provided. Karen Tescher noted that Brenda Peterson has been selected as the new director for Medicaid Eligibility and could be a resource on this issue. It was noted that there continues to be turn-over in the counties and ongoing support is needed as the programs are complex. Decision by the Council to maintain the topic of MA eligibility on the Standing Agenda Items. Amanda noted that she will follow-up with the Medicaid Eligibility director.

**TOPIC: REVIEW FFY '13 ANNUAL PERFORMANCE REPORT**

Review of Current APR Data

Amanda reviewed the APR/SPP requirements with the Council. A data report was made available to the Council membership. The new targets that were set at the December, 2014 meeting were incorporated into this data report.

Indicator 1 – Number of children receiving timely services

748 children received new services; 636 received services in a timely manner and 112 didn't. Of the 112, 69 were due to family reasons; two were due to weather; 41 due to agency reason. Three of the state's programs are at 100%. Seven programs will receive letters of finding. All FFY '11 and FFY '12 have been closed.

Indicator 2 – Percent of children receiving services primarily in natural environments

Number served on December 1, 2013 – 1040 children were served, 1022 served in the home and 15 served in community and 3 served in settings not considered natural environment.

Indicator 3 – Child Outcomes

*State set these targets and they were set in 2005/2006 and in Dec we reset targets for the upcoming years.*

3.A. Social –Emotional Skills (including social relationships)

Summary Statement 1 – target was 37.7%; FFY 2013 performance 38.05%; and FFY 2012 performance 37.7%.

Summary Statement 2 – target was 44.7%; FFY 2013 performance 45.07%; and FFY 2012 performance 44.6%.

3.B. Acquisition of Knowledge and Skills

Summary Statement 1 – target was 61.1%, FFY 2013 performance 59.05%; and FFY 2012 performance 61.1%.

Summary Statement 2 – target was 46.2%, FFY 2012 performance 44.17%; and FFY 2012 performance 46.2%.

3.C. Development of Appropriate Behavior

Summary Statement 1 – target was 67.4%; FFY 2013 performance 63.41%; FFY 2012 performance 67.42%.

Summary Statement 2 - target was 67.9%; FFY 2013 performance 64.7%; FFY 2012 performance 67.9%.

Council Comments:

- Question about whether more families who are transient affected the data
- Wondering if more children identified with Autism is impacting data
- Surprise that there was a decrease in Indicators 3B and 3C vs. 3A. Concern of the tool we are using; positive that social/emotional/infant mental health area increased.
- Gain in population plays into the lack of availability of professionals needed.
- Concern noted on training on the instrument
- Concern about feedback to families.
- Concern about difficulty in delivering consistent services to children in joint custody situations and in foster care.

Indicator 4 – Family Outcomes

Amanda reviewed with the Council that extensive work was done on the methodology of administering the family survey. She reviewed the processes used to gather the FFY '13 data for Indicator 4, as this is where the data comes from for Indicator 4. The outcome of changing the methodology was to increase the rate of return and also the representative sample. The result was that the return rate increased by 3% and the representative sample improved. Roxane stated that the return range was 8% to 35% by region and larger regions were not even in the median.

The new data that was gathered through this year's survey makes the selection of our SiMR more difficult as the state averages increased to 99% for all 3 components of Indicator 4. Amanda explained

that we have had consultation with our national technical assistance partners. The recommendation is that we would look at our child outcomes versus family outcomes based on the FFY '13 data. We could incorporate the work around family outcomes into a child outcome focused SIMR. Many of the states - are choosing Indicator 3A – Social-emotional skills.

Council Comments:

- Add an online survey into the discussion
- More time is needed to train on roll-out if we are going to get the survey out in the same manner.
- Give parents the option of online or paper.
- Moe, Jill, Carol, and Roxane will meet to discuss additional survey recommendations and attempt to get information to the field in February.

FFY '13 Results:

Indicator 4.A. Parents Know Their Rights

Target 87.4%; FFY 2013 performance 99%; FFY 2012 performance 87%.

Indicator 4.B. Parents can communicate their child's needs

Target 93%; FFY 2013 performance 99%; FFY 2012 performance 93%.

Indicator 4.C. Parents can help their child to learn and grow

Target 91.6%; FFY 2013 performance 99%; FFY 2012 performance 92%.

Indicator 5 – Percent of children birth to one with an IFSP

Target 2%; FFY 2013 performance 1.86%; FFY 2012 performance 1.98%.

Indicator 6 – Percent of children birth to three with an IFSP.

Target 3.43%; FFY 2013 performance 3.5%; FFY 2012 performance 3.43%.

Indicator 7 – Percent of children for whom evaluation, assessment and an IFSP meeting occurred within 45 days from referral.

OSEP sets 100% target; FFY 2013 performance 94.5% and FFY 2012 performance 97.1%.

Six programs will receive letters of findings. Four programs were at 100%. 912 infants and toddlers were referred and found eligible in FFY 2013. 702 had timely IFSP development. Of the 210 that were over the 45 day timeline, 159 were due to family reason; 2 due to weather; and 49 due to agency reason. State continued to deal with missing data in compiling the report for FFY 13. There was discussion about edits in Therap and issues that some edits have caused. It was suggested that edit assistance can help the field with assuring the right data is available.

Indicator 8 - Transition:

8.A. Percent of toddlers who's IFSP has timely transition steps and services.

Target was 100%; FFY 2013 performance 97.2%; FFY 2012 performance 96.6%. We did improve. Three programs will be issued a letter of finding. Seven programs were at 100%.

8.B. Percent of toddlers for whom the SEA and LEA were notified timely (referral).

Target was 100%; FFY 2013 performance 88.1; FFY 2012 performance 85.5%. Eight programs will be issued a letter of finding and 2 programs were at 100%. It was noted that work needs to continue on when a LEA considers a referral to ECSE as a Part C referral.

8.C. Percent of toddlers for whom a timely transition conference was conducted.

Target was 100%; FFY 2013 performance 95.5%; FFY 2012 performance 96.5%. Four programs will be issued letter of findings and 6 programs were at 100%.

Indicator 9. Not applicable.

Indicator 10. No mediations were requested or held.

**TOPIC: State Systemic Improvement Plan**

Council Comments:

- Continue to wonder about the decrease in 3B
- Continue to consider the family outcomes aspect in whatever work we do.
- Wondering about having break-down of data in Indicator 3
- Concern was noted about the limited resources to deal with acquisition of new tools and implementation of these.
- There was discussion about reviewing the Outcome 3 data again.

Roxane asked if there was any need to changes to the targets now that we've seen the FFY '13 data as the targets had been set prior to looking at the FFY '13 data. Recommendation was to not change the targets at this time. Continue to present trend data.

Roxane quickly reported on NDICC Membership:

- Dr. Donald Warne sent a replacement name and the person is very interested.
- Roxane needs to follow up with Cephas Chigwada who will be the new representative from Children's Mental Health
- Head Start position remains unresolved. An ask has been made to Roxane Wells at Ft. Totten but she has not committed at this time.

**TOPIC: Next Meeting**

March 4, from 10am to 5pm via IVN. Possible agenda items: ICC Evaluations, Medicaid issue, old business - DD Slots, and Update for the group on the SiMR.