

ICC MEETING MINUTES
Thurs, June 28, 2018
Quality Inn, Bismarck, ND

PRESENT

Amy Olson, Tonya Canerot, Shannon Grave (phone), Beth Larson-Steckler, David Zimmerman, Jodi Hulm, Valerie Bakken, Matthew Nelson, Holly Major, Meredith Quinn, Eric Gault, Mary Haugen, Christopher Pieske, Sarah Carlson, Moe Schroeder, Stephen Olson, Jill Staudinger, Missi Baranko, Carol Brakel, Tammy Lelm,

STAFF MEMBERS

Amanda Carlson
Jackie Adusumilli
Colette Perkins

GUESTS

Laura Satrom
Roxane Romanick
Christine Hogan, P&A
Jodi Webb, Pathfinder
Jen Klein
Becky Matthews

TOPIC: OVERVIEW OF AGENDA

Table Attorney General and September Elections until Sarah arrives.

TOPIC: FAMILY STORY

This will be moved to this afternoon.
Jen Schaefer - Brody 6/7 year old down syndrome and started with early intervention. I realized I needed P.T coming in and saying he is doing and he is ok. Focus on what he isn't doing well and started speech at 6 months and had a super great s. pathologist. Next struggle was wanting my child to talk and stop signing. He talks non-stop. My ladies through early intervention were saints. Everything that they taught

me, I'm teaching my nephews and nieces. Wish early intervention wouldn't stop after he went to school. Seeing the milestones and think back to early intervention my child wouldn't be where he is today.

What reassured or switched your perspective from thinking I'm a bad mom to that they really wanted to help - thought I was going to get judged and instead it was here is what we can do to help your child.

Is there something different in how the word gets out about services and early intervention - not sure?

TOPIC: WELCOME PART C COORDINATOR

Val introduced Jackie. Background early childhood special education teacher, early intervention in MN and working at BECEP teaching preschool 3 to 5.

TOPIC: INTERIM HEALTH SERVICES COMMITTEE

Met in April 25. Sarah presented information on behalf of the ICC and other information was brought forth. Minutes not published yet and no follow up or rec from the committee.

Cass County has a few on the committee and look at why Cass County is a problem county in regards to the ma application. Sen Poolman was wondering why parents must put on child income and assets on the medical application for waiver services. Next meeting is July 26 from 9 to 4. Parents can provide testimony in person or in writing.

Recap for new members - SB2325 study was developed the last session and it is a study where ICC procedures will get reviewed. Concern that money receiving is slowly not keeping up with services. Looking at specific areas that ICC funds: child find and a subcommittee to look at this; subcommittee to look at budgeting. Information brought forth about Medicaid process and is not a requirement and for those families

that choose not to any way to help lower that number to access Medicaid and stop draining Part C funds and some can't because of military and Obama funding and not able to apply for Medicaid.

1st partial month - working with fiscal on this. Apply for med and didn't screen to waiver until last day of month. Come on middle of month, Medicaid applies recipient liability on a sliding fee scale; we pay the 1st partial month of service with part c funds. Found eligible on June 3 by an eval. and pay for eval. with Part C, write IFSP a week later with Part C funds, and maybe it could be paid with Medicaid funds. If already qualified for Medicaid and screen to waiver immediately so no recipient liability. The problem is the data and the way we bill.

Focus - introduction to the parent/family - not to judge/not how to raise and this is what we have to provide to you and your child.

We need to look at ways people come into early intervention and what is our message/what can we learn from other places/what is most successful in letting people come into their lives/how do we keep families involved in services even though they have dropped out/possible ways families come into early intervention and educate them on different scenarios - information need to properly support the family

TOPIC: ATTORNEY GENERAL - ICC REPRESENTATION

Sarah visited with MaryKay Kelsch from the AG's Office regarding interest on legal advice for the ICC. No attorney is appointed to the council and what do we do when we have legal questions. Needed clarification on how we receive funding as there could be an impact in regards to billing. Other similar boards/councils are not billed but MaryKay is checking into this. Asked if any attorney in the office would be interested and there would be several and need to talk to Sarah and

the topics were: council members conflicted with a fiscal impact for their dept. or who they rep; budgetary - how can council do their responsible on fiscal decision when DHS is under direction to keep budget secure until presented to Legislature. MaryKay said if we would generate a list of questions that we need legal advice on. Sarah is not sure we would need an attorney on retainer but if there are times we need legal advice could whoever is interested could they come and do a presentation and answer questions we have and if billing would minimize the cost. Are there other questions we feel we need an attorneys rec - open meetings with committees and (could hear Chris)

Schedule the same time Sandi is here in regards to the open meeting laws.

TOPIC: EXPERIENCED PARENTS

Discuss the scope of contract from our previous meeting.

Jodi stated that they have seen an increase in the amount of contacts. Have 6 experienced parents, coverage in 1, 2 4, 7, 8.

Working on with the group is to get things more transparent. Going through process, timelines and making it more available. Bringing on another person to run the program.

Experienced parent in Region IV and would have been nice to receive an email to say who the person is with their contact information. Sending referrals to Pathfinders and if we need to connect with that person it would be nice to have. We can invite them to our meetings.

We have talked about having Jackie and staff come to the early intervention polycom monthly meeting.

What do experienced parents do - essential support system for parent, connecting with services and someone that has been there? Experienced parents go through certification to have consistency across the state. Talking about technical assistance and what coaching looks like in working with the parents.

Webinars - based off of OSEP information. Pay for training and time spent with parents. Information by region - don't currently have but good idea. Meredith would like to track number of visits and would like to see those numbers. What are you doing to recruit? Have brochures - tripled the amount of brochures we have put out. Doing a lot of contacts - if you know someone working in the area and exploring different types of outreach, let us know. Provide information - report general information by region at the ICC meeting. A motion was made by Holly Major and seconded by Chris Pieske to move that we have as a standing agenda item a report from Pathfinder or from the Experienced Parent provider organization. Discussion - regional action plan meetings - the outreach coordinator is included in the email regarding regional action plan meetings. This should be a training for the experienced parents. Pathfinder will send an email listing all experienced parents' names. Motion carried.

Walking through the process - parent and what does it look when a parent calls or emails. Receive calls and emails - call is immediate to fill out intake and put out to the experienced parent and if email, parent is contacted within 48 hours.

Brochure - has information that they can connect. Intake form designing now. Brochure is not a referral - can put family name and sign and send to Pathfinder. Contact is made within 48 hours.

Plan or what has been done to connect new experienced parent with providers or does each experienced parent do on their own - Jodi will provide an answer at the next meeting. Jodi has been to 2 monthly meetings and she has been there 6 weeks.

To do list - list of parents, access for experienced parents, new introduction email when we bring people one, process of how people can get to where they need to go, and the brochure.

Paper brochures - where distributed - it is on the report that Jodi distributed. Past quarter 400 have been put out. Matt would like to get brochures to the therapy place in Williston. Outreach and what does it look like and how do we get it out there more. Events in the community let Jodi know. Make contact with regional office and contact will be made locally and see an increase.

TOPIC: IFSP STATEMENT REGARDING DIRECT THERAPY

Recommendation for family to receive outside services from IFSP meeting. Talked about at our monthly early intervention polycom. Drafted language and reported here on this statement and good feedback from experienced parents, as well as providers. To make sure no judgment I the statement and services authorized in IFSP will meet the outcomes in the IFSP. Final language drafted and shown to the members.

"The IFSP team is in agreement that the services listed in the part c services section of the ISP will support (name) and family to meet the outcomes within the IFSP. Additional services that the family has chosen to participate in are listed in the service neither required nor funded by Part C section of the ISP. "

TOPIC: SEPTEMBER ELECTIONS

Need to make nominations for chair and vice chair today and in Sept we will vote.

There was discussion about paying parents for their time; discussion about parent stipend; options for the work that the part c coordinator can take on as it is full time rather than the chair - can hopefully be discussed.

Standard Operating Procedures review will be on the Sept agenda.

Chris - for chair but he declined.
Sarah accepted the nomination for Chair.
Missi on the ballot for vice chair role - declined.
Val would do but encourage others to enter their name.
Jill S - chair and vice chair
Becky and Moe - vice chair

Send an email to the person nominated and which would you be interested in standing for.

TOPIC: FAMILY SURVEY

Talked about survey at the Jan and March meeting. Family survey is requirement to answer indicator 4 family outcomes of annual performance report. ND uses a paper survey. Our highest return rate was 24% and lowest was 14%. Have to count for representiveness, and percentage of survey response should be this. We have mailed the survey with a covered letter from Amanda. Have tried having survey hand delivered by home visit/DDPM at an annual IFSP meeting or periodic review. Survey answers to the whole Part C system/experience as a whole.

Survey is front and back - front side is identifying region and program ethnicity, no identifier on the survey. In conversation about revamping - how long should a family be in service before they get a survey was talked about at the ICC meeting. Also received feedback from the early intervention polycom meetings. Added to the front side - an age range of how long you

have been in service and went up to 12 or 18 months - not sure which one. Had to reformat the front side of the survey. Had to push back the family survey so hopefully will go out Aug 1. We will start recording data in Dec.

Mechanism to return - handed back to DDPM/Infant Development or return in a self-addressed stamped envelope. Can there be electronic method? Concern how to design, still need a paper copy for certain areas of the state, and potentially have could answer electronically plus a paper copy and we wouldn't know which ones are duplicative.

Paper and electronic - DDPM at 6 month ask the family would you like to fill the survey out either electronically or would you like a paper copy with stamped envelope.

Missi - do both and get about a 40% return rate. If family says send me a link they don't get a paper copy.

Handout methodology - do a periodic review or annual IFSP and to have a conversation about why we need you to fill out the survey and how is state delivering services and how we can make changes.

Regions will send in a list of those that were handed out.

Family Survey - A motion was made by Moe Schroeder and seconded by Eric Gault to develop a subcommittee for the family survey. Motion carried. Subcommittee members are Beth, Eric, Moe - lead, Meredith, Carol, Beth, and Katherine.

TOPIC: SET SEPTEMBER FOCUS

Amanda provided some background information. At the Sept. meeting with technical assistance was better than the orientation. March meeting talked about technical

assistant to do strategic planning. Do strategic planning don't have technical assistance that has funding to come. We would have to do WebEx/skype or polycom? Have a data component we might be able to get someone here in person.

What does the ICC want/like to move forward?

Orientation last fall helped new members - understand what we do here and refresher for older members. Focused in relation to ICC and roles/responsibilities, what does ICC need from data and to drive decision/recommendations; it was a hands on working group; other states like ND and how is their early intervention set up, what do they do, is there something we could do different, evidence based practices that are occurring across the state;

Many attended summit part of SB 2325; many activities at the summit were related to the Council's mission; visiting some of the topics that we have a working day to discuss some of those items; Moe do and tie into the budget piece - liked the analysis of how the money flows; do we need to come out with recommendations for the next legislative session - are we doing more work next session with early intervention; scenarios that talk about the budget with Part C and give new members a perspective of how we would like to see Part C services delivered and this is what it looks like today; what we do now isn't what it has to look like in the future; can't a support help us with representative sample;

Important to also to tie to data and may be more of an impact for us.

Take the data and make it meaningful to the ICC and show us how to make it meaningful to the public.

Present to Dazy - narrow in on indicator 4 and data related to that.

TOPIC: COMMITTEE REPORT

EI Budget Committee -

Meeting on May 29, Tina gave information on the Part C expenditures through April 30. \$481,000 of Part C remaining and run out in June/July. Federal budget Part B/C and will remain the same. DHS has not had strategic budgeting meeting yet. Governor announced planning meeting with every agency. Instructions 10% and additional 3% contingency and the 5% of FTE across the board for all agencies except for higher ed. is within the 10%. The cuts cannot affect Medicaid services.

Are the Medicaid dollars subtracted from the 10% or are they included in the 10%?

Full time Part C Coordinator budget is all Part C and that line item will be increasing and then Amanda and Colette's funds will now be from the Division budget.

No specific questions or recommendations to report on. If anyone wants to be on this committee, please let Chris know.

\$100,000 given for experienced parents. On the Part C application there is a line item for experienced parents. Next year with the application, and when we are advocating, we need to ask for general and federal funds. We need to make sure there is funding for the experienced parents for the next biennium. We can ask DHS to direct so much of the funding to go to experienced parents.

Executive Committee -

Developed the agenda for the meeting today.

EI Services Committee -

Becky is the chair but couldn't be here so Laura is presenting. The talking points were shared/displayed. These came about at the last subcommittee meeting. Differences between dev screen and dev surveillance and what roles they play.

The subcommittee spent time discussing right track/child find/other programs across the state who are providing screenings.

Next steps:

As member of the committee, last time the big report of SHS health dept., well child, healthy steps, early childhood services, Part C child find, head start, Part B - have regulations around screening.

Met in Feb., March and in May and spent time trying to determine if there is an overlap in services or duplication. Is it perceived duplication or is there collaboration? Hard to determine as we don't have a data base, if child is screened at clinic. Agreed children may be getting multiple screenings and other aspects right track is providing we don't think so.

There isn't a unique identifier either.

We were asked to do 3 different things, consistency across regions, professional development, and priorities with high risk. Looked at the first one but not the other two. Felt like we couldn't move forward and there is some duplicity going on and need to bring back to the ICC.

Duplicity - talking about screenings. If the child is getting a screening and not getting referred to Part C, not doing what we should.

Caution about more duplication. ASQ was developed for parents to complete.

Do we need to look at funding sources for Right Track? Health tracks receive a release and then we can share the information.

Health tracks and screenings and look at referral and how many are referred to right track - public health units in the state.

Funding was not discussed by this committee.

With time, is there a place for ASQ in the right track program?

Visits conducted; number of referrals; number of children seen; share ideas and strategies for the child to get the developmental area and then maybe the family will accept infant development.

Need to look at all of our data systems and what we track.

Next steps:

How to prioritize high risk definition and eligibility?

Wondering what the Council wants this group to do in the next steps.

Identify potential collaborators and talk about the issues in additional to EDHI and others.

How do we get more funding, focus on what we need to change, or do we do both? Consistent/uniform way to provide services before we collect data and find a system to do that?

State needs to say this is what we want you to do, what you should be talking to each other about, etc.

EI Services Committee present this information they have gathered to right track coordinator with, Becky,

with discussion about Part C budget and motivation for creating the committee and having them look at this; or invite right track coordinator to council meeting with dialogue.

What do you want the coordinator to do and get out of this - ways to use dollars more efficiently; feel this would be a discussion with DHS.

Explore alternative funding, explore other partners.

Narrowly look at budget within Right Track or right track activities and if collaborative efforts with other entities what conversations can exist.

Other home visiting programs - look to other departments in ND can we become your home visiting program. MSU is good at writing federal grants.

Look at other funding sources for right track other than Part C money, like grants.

Other things to serve more and change items in the scope. Need to have DHS there. Ask how they can do it more efficiently. Report back in Sept. Sen. Mathern is looking for language for a bill to be written. Identify partners for assisting with Legislation for more dollars or fund out of general fund.

SSIP Committee -
No report from Jill.

TOPIC: STATE SYSTEMIC IMPROVEMENT PLAN UPDATE

This would also be reported on through the SSIP Committee.

TOPIC: GENERAL SUPERVISION UPDATE

We report in Feb.

Take measurement out of Therap date of ref to date of IFSP was anything 46 days or more would be non-

compliance. Issue letter of Findings to programs. Issue level of determination, report card for DDPM/id provider and these will be issued tomorrow. Sept say how many were in the different levels of determination. Received state level of determination and we are in meets requirements.

TOPIC: DD SLOTS REPORT

Waiver end 4/1 to 3/31 every year.

Any slot not needed is rolled over and available April 1. This includes everyone in the waiver. There are 5,490 slots in the DD waiver and there are 4,710 slots assigned/used. There are 780 as of today available for usage through 3/31/2019.

Reserved slots - 190 and Infant Development has 135 of those slots.

We have not run out of reserved slots, but if we did there would be no change in service to family but offered Medicaid and all services would be Part C funded.

TOPIC: PART C BUDGET REPORT

FFY July 1 through June 30 and starts in July - in FFY 17.

We are in State FY 18. We will have expended FFY 17 grant funds by June 30. First time we have expended Part C grant funds in the same year we got it.

Direct services - Tina is working with Medicaid on how much the 1st partial month takes out of direct services over to Medicaid?

TOPIC: NDICC MEMBERSHIP UPDATES

Open positions - child care is open and Region III. Have an interested parent from Region III and invited her to the meeting and about the future meetings. Amy Casavant - lives in Minot and interested and has a potential Region III parent. A motion was made by Moe

Schroeder and seconded by Carol Brakel to have an extra parent representative for 14 months in the Minot region. Holly Major abstained. Motion carried.