

ICC MEETING
Thurs, January 25, 2018
Statewide Video Conferencing

PRESENT

Sarah Carlson	Christopher Pieske
Tammy Lelm	Beth Larson-Steckler
Kelli Ulberg	Rebecca Eberhardt
Valerie Bakken	Tina Bay
Jill Staudinger	Tonya Canerot
Carol Brakel	Holly Major
Matt Nelson	Shannon Grave
Stephen Olson	Tonya Canerot

Staff:

Amanda Carlson, Part C Coordinator
Colette Perkins

Guests:

Katie Bentz	Roxane Romanick
Missi Baranko	Heather Steffl
Dianne Bossert	Laura Satrom
Layla Ligutom	Jennifer Restemeyer
Meredith Quinn	

TOPIC: FAMILY STORY

Eric is going to present at the March meeting.

TOPIC: NEW BUSINESS

Interim Health Services Committee

Sarah stated that the day after the last meeting, she received an email from Michael. He was arranging the agenda for the last Human Services meeting and asked Sarah to come with a presentation on the ICC and how it intersects with the study. She responded and gave testimony on activities that council does on a typical agenda and things discussed that can be found in

meeting minutes. Said she would put on our agenda and come back with any recommendations to the April meeting.

Open for discussion:

Many involved in the summit. Roxane provided information on the summit.

Chris said they are continuing with summit work, gathering information and working towards recommendations but not ready yet. Meeting in March and hopefully the group will have recommendations and budget committee to have recommendations and then to say as ICC we support and/or make a motion. 2 items - changing Medicaid application/remove barriers for families to apply for Medicaid for the waiver and child find system - consolidating programs or eliminating duplication of services.

They asked for certain people to provide information and provided this but not really any next step information.

What % of referrals are initiated by right track and how to compare nationally with other states child find activities.

The 2nd day after summit, smaller group met. 2nd day talked about recommendations, as ICC we need to look at those recommendations and up to us to break down as program recommendations; this is where we need legislative help. Can we look at this and fine tune - give them recommendations of what we expect of them and this is what we will do. Also recommendations to DHS on administrative changes we think should be made.

Sarah will have Amanda send out the document and have members review and discuss solution findings at the March meeting and are they aligned with how the Council feels. Take any recommendations from the Budget Committee and discuss at the March meeting and see if

that generates other ideas. This will take a lot of time at the March meeting.

Nice work on eligibility for a variety of services and looking at minutes it was a good presentation.

If application changed, what outcomes would affect the Part C budget? Counties given application and child is on the waiver, different requirements and family wouldn't complete whole application. All counties are working together and coming up with something to shorten the application process.

Is the form controlled by fed and by state? Tina is talking with Maggie Anderson and there are a lot of things that came out with the affordable care act. Who has to actually approve the changes to the form, which Tina can follow up on.

Application could affect Part C dollars. Kids on Medicaid, now we are using Part C funds to pay for 1st partial month

Can't pay until eligible.

Visit with Maggie about seeing the data on those eligible for Medicaid. TriCare - and someone applies or is eligible - they lose TriCare. Military families don't want to mess with their TriCare. There are TriCare reps. Could make a good case for needing to know and the impact of our funds.

Child find solution - duplication of services - what steps. Preparing testimony - other states, there is language where 619 funds can be used for basically child find activities. Support from DPI to be a collaborative team member. Would need to explore with other states on sharing costs. Right Track is going above and beyond Part C requirements. What are the actual Part C federal requirements vs. Part B.

What is above and beyond that right track is doing and how does it compare with early childhood.

What do we need for next meeting to discover this information? Need to look at federal law for Part C, Part B, and Early HeadStart; include child care, Health Tracks, EPSDT, and Maternal Child Health. There is a meeting in Feb. with Sharon and Darla and we could ask for their input/advice. For each agency that has child find requirements and color code those that match across the board.

Someone contacting each agency to send us this information to compile for the March meeting. Can Sharon and Darla put this information together for us? Stay with child find or early identification - child find.

Rebecca said she would help Sharon and Darla along with Sarah, Val, and Amanda.

DPI DATA REQUEST

How many kids at 3 in 2015 assessed by Part B but wasn't a Part C referral. Can't pull 2015 specifically to encompass all of 2015, we had to pull July 1, 2014, through June 30, 2016, - this is 2 years.

There were 688 3 yr olds that were assessed and 595 were found eligible for special education services. Tried to break out by regions.

Reg 1 - 40 kids; Reg 2 - 153 kids; Reg 3 - 47 kids; Reg 4 - 101 kids; Reg 5 - 135 kids; Reg 6 - 38 kids; Reg 7 - 34 kids; and Reg 8 - 47 kids.

Doesn't include those leaving early, opting out, aging out, those that refused early intervention services, and also those not found in child find activities.

This was broken down by diagnosis:

Autism - 39 kids; Hearing impairment - 6;
Noncategorical delay - 267; Other health impairment -
6; Orthopedic impairment - 2; Speech impairment - 254;

Do you know if any were transient - no. In talking
about child find and collaboration - would like to see
these numbers go down.

Regarding HeadStart/Early HeadStart, we have to report
on kids with IFSP(Individual Family Services Plan) and
IEP(Individual Education Plan), identify disabilities,
and identify homeless.

Sept ICC Meeting Parking Lot

Some we have answers for and many are on our agenda
already.

What have we done and when did we do it - needs to be
added on the document.

See if anything needs to be updated and send out and
use as a working tool. It was emailed out before the
December meeting. Eric created the document.

**Executive Committee - will look at an update and send
out with the agenda for every meeting.**

Attorney General - ICC Representation

Sarah emailed MaryKay with questions - can attorney be
assigned to provide legal advice and is there a cost,
but hasn't received a response. If no cost, come do a
presentation on the support that they can offer.

Experienced Parents

Challenge was to get information out.

Everyone understands where to go for assistance.

Pathfinders did a mass mailing to a variety of
organizations statewide. What was in the mailing -
brochures about the program and a letter explaining the
program. Can the ICC get a copy, yes.

Modules - these are for the Experienced Parents to go through. Eventually they will be on the website. They talk about IDEA Part C, building legacy series built by OSEP.

Referrals received - Mariah is working on that information but she was not able to attend today. Yesterday we had 3 calls inquiring about 5 parents and 3 additional applications. Group of Experienced Parents around the state - shifting from having paid employees whose job to act as experienced parent or are we talking about a volunteer force. Jackie said it is paid parents. What does the Experienced Parent program look like? It is based on needs of family, individualized, and based on the Experienced Parent. We hold monthly face to face conference calls. Are there Experienced Parents in the east side of the state? This will have to be answered by Mariah, but we have received 3 additional applications.

When a referral is made - what does it look like, a family calls asking for an experienced parent? We disseminate information to the parent; complete an intake form, what are the needs, where they are at in the process, and then contact the Experienced Parent based on the form. Families serving right now have been with Experienced Parents in the past. Families meet requirements of DHS and RFP, they could stay on, continued support system, encouraged Experienced Parents to maintain.

Getting feedback and calls and families getting hooked up. Tracking calls and how long to connect with family. Comparison send out document and Experienced Parent doesn't meet with family until the documentation is filled out. Parents are connected with Experienced Parent right away.

Intake - need to get permission, and determine how intake is completed. Weed through red tape and get services going. Bulk of money is going to services. Amount of the contract is \$220,000 for a two year program. Provide services, seek reimbursement from DHS, and then get paid.

% goes to salaries for Experienced Parent; % for developing and providing training for Experienced Parents; and plan on how to spend the \$220,000.

Emphasis on face to face and that referrals are getting out. Don't minimize the Experienced Parents.

Maximum that could be admin and then the rest to Experienced Parents to do their jobs. Tina stated that we only do indirect for universities and not other entities.

Chris stated that he wanted to know how the funding is being spent and the agency should have a plan on how they plan to spend.

Connection is done on a timely manner. Mariah connects families with Experienced Parents.

On the website is there a way to contact, yes.

Challenge to get information out there that Pathfinders is housing the Experienced Parent program. Sent out mass mailings to the NICUs in North Dakota.

The Council talked about the Experienced Parent program and good data at the last legislative session and how Experienced Parents have improved support of early intervention individuals and the lives of their families, the challenges of different services across the state, and motivated by creating unification.

Quantitative data - how data is collected and used for families utilizing Experienced Parents.

Jackie stated that they have a couple of Experienced Parents that are really good and active at what they do.

Create parent friendly brochures off of other brochures.

Modules - this is the one on one, going through modules to train Experienced Parents and also encouraging other parents to go through. Experience Parent to hook them up to supports and services, answer questions pertaining to them rather than modules.

Tammy is a representative of the Health Dept. and they haven't received the brochure. Think about outreach and integration/collaboration on the outreach piece, do more collaboratively to enhance it and think we could partner better on it. Pathfinders is very open to partnering. Send an email to Jacki on where to send brochures too.

Some didn't understand how the release is similar/different from a referral - big component of Experienced Parent history was relationship with programs to support families. Providers held Experienced Parent contracts and want your collaboration and working with us to make this program successful.

Jackie asked everyone to let Pathfinders know where you feel we could be improving. Open to encouragement, direction, information that you can provide us, and we will take a look at any and all suggestions.

Send email to "outreachcoordination@pathfinder-nd.org"

Phone 701-837-7500

If we send you a referral, will the region get a written response - yes.

It was stated that there was a referral/phone call to Pathfinder and the response to the caller was there were face book support groups and online resources to give to that family.

Data providing to state - Pathfinders is collecting family specific and as well as a whole data.

Is part of the training marrying with the Infant Development Provider and provide family perspective and support all interventionists for every child and supplement with individual visits for families discovering/going on their journey.

It is a trusting relationship of knowing what you are referring a family too. Programs feeling the void of our Experienced Parent partners - at staff meetings/policy development/brain storming - not as clear and how to develop the relationship now. Experienced Parent is a part of the early intervention system and we should work together.

Jacki stated that Experienced Parents in specific regions are encouraged to attend provider meetings and don't want it limited because someone is across the state. Modules are good for a basic understanding/information of Part C. Holding monthly Experienced Parent calls and bring in another piece of information or training. Calls are to disseminate information or trainer to share information with the Experienced Parents.

Can the minutes from the monthly calls be shared with us and with providers. Jacki will take this back and

discuss. Can the minutes be shared with the ICC and with providers - send an email to Jacki and ask for this and she will get back.

Carol asked Jackie to please send more brochures for new intakes and to share with new families.

Are the modules finished? Some information on modules is posted. However we are deepening the process in which we deliver and want a more beneficial experience but information is still available out there and want to have in different formats. We are in the process of developing a webinar.

The Experienced Parents are in a holding pattern until they take referrals? Jacki stated that no they are not in holding at all.

Experience Parent - hired and one in the Bismarck area - not taking regional concept and Experienced Parent sitting waiting for referrals. Now you are saying you are going to take some kind of regional concept interacting with providers and DD programs. Encourage you to get those people going. That information has been dissemination to our Experienced Parent. Our communication needs to be strengthened. We have reached out several times.

Pathfinders is developing agreements with providers on those relationships. Proactive approach with providers and reach out to them about what needs to happen. Can Pathfinders get on your list serves and be notified of meetings, that would be great.

Council members were encouraged to send questions/concerns to the email and telephone number provided.

Monthly phone calls have been set up but cancelled.

Tina developed some headings and then items under the headings and discussed with Council members. This will be shared with Council members and forwarded to Pathfinders.

Part C Coordinator

Tina said the position should be posted by Friday, Jan 26. It will be posted for 7 days.

Funding comes from the Part C budget. There will be an increase in the salary line. Amanda and Colette will no longer be doing time studies, their costs will be through indirect costs instead.

Annual Performance Report/State Performance Plan

At our ICC December meeting, we didn't cover Indicators 4 and 8.

Indicator 4 - Family Outcomes.

4a - % families who report early intervention services have helped the family know their rights - Target 87.7%; performance last year 97.7%; performance this year 98.8%.

4b - % families who report early intervention services have helped family effectively communicate their children's needs- target 93.3%; performance last year 98%; performance this year 100%

4c - % families who report early intervention services have helped the family help their children develop and learn - target 91.9, performance last year 96.7%; performance this year 99.4%.

There was discussion on handing out the survey and the work involved vs. mailing. Everyone is given an envelope to return the survey.

There was discussion about regions tracking what they handout. Concern about % coming back and are we wondering about best way to send out. Have about same number coming back whether handing out or mailing.

We have never received feedback on our methodology from OSEP. Every state does it however they choose. Ethnicity is something we struggle with. Val stated that Part B struggles with their return rate also. Question data; question surveys actually needing to be handed out - how many surveys need to be distributed/sent out, what is showing up in Therap vs. what regions know need to be distributed. Do families feel pressured to give positive responses when the person is sitting in the same room with you? If we keep changing methodologies, we won't know if what we are doing is working or not. Do you talk to providers about the importance of this survey and helpful in getting more back. Providers are telling staff at staff meetings to inform families about the survey. Challenge is that it is spread out over 6 months.

A motion was made by Christopher Pieske and seconded by Val Bakken to keep the methodology the same for the next year as was done last year. Motion carried

Indicator 8 - compliance indicator and OSEP sets this target.

8a - % of toddlers who's IFSP has timely transition steps and services.

Target - 100%; last year - 100%; this year - 100%.

8b - % of toddlers for whom the SEA and LEA were notified timely (referral).

Target - 100%; last year - 88.42%; this year - 94.06%

8c - % of toddlers for whom a timely transition conference was conduct.

Target - 100%; last year - 97.32%; this year - 100%.

This completes the APR and it is due next week Thursday.

IFSP Statement Regarding Direct Therapy

Individual service plan that lists services for families and change to list Part C service vs. non Part C services, and make sure we are clear when Part C was not responsible to pay. In-home support is not a Part C service.

Families are getting recommendations from other professionals on what services they need. Services should come from whatever the outcomes are listed on the IFSP. If IFSP team feels the services are being provided through early intervention, Part C is not responsible to pay for any other services other professionals are saying their child needs. Had a polycom and had discussion about the language that families are concerned about what services they want.

Amanda revamped the statement and shared it with providers and is still receiving feedback on the update.

Concern from Medicaid office regarding duplication of service. No because providers bill for the 4 pay points and not specifically speech/language, etc.

At the next ICC meeting, Amanda will report back on the changes made to the statement.

TOPIC: STANDING NDICC AGENDA ITEMS

Committee Reports:

EI Budget Committee

Haven't met but spent the last weeks building the team: Jill Staudinger, Roxane Romanick, Becky Matthews, Laura Satrom, Michelle Ragan, Moe Schroeder, Steve Olson, Michelle Hougen, Jodi Hulm, Stef Kaiser, Matt Nelson, Cindy Wilcox, Brent Askvig, Tim Essinger, Tina Bay, Brittany Hanson, Becky Osbourne, What do we need to know that we don't know, come up recommendations to bring to the ICC and forward to DHS.

Talked to Sen. Poolman and she thinks it would be good to have a legislator from the house side involved also.

Have a meeting in February and would like to meet monthly.

Executive Committee

Reviewed last meeting minutes and developed and reviewed the agenda for today. Start to address the parking to do list

EI Services Committee

Rebecca is trying to get names from people on the old list. Only heard from 1 person. Jill will look for some historical information. Shannon, Jill, Steve, Michelle Ragan and Laura Satrom - this is budget committee from 2016. Beth and Steve myself Jill - will come together regarding child find information from Sharon and Darla.

High risk eligibility condition list to be looked at by this Committee from the December 2017 meeting.

Is this similar to what we are asking Sharon and Darla to do - this committee will be taking this on. The IDEA Data Center is putting on a peer learning group on child find or indicators 1 or 7 and ND was selected to participate and we choose child find and meeting in Maryland in March - Carol Johnson, Michelle Ragan, and Amanda are attending .

Recommendation to reach out to right track coordinators and someone from Maternal and Child Health to participate on this group.

SSIP Committee

The Professional Development workgroup met last week Friday, Jan 19, 2018. Family-Centered Practices

in Early Intervention is the current concept area being developed. Concept areas continue to follow the three tiered format: Info-graph, power point and supplemental information. Infant Development providers, service coordinators and experienced parents implemented the Triadic Strategies for one month and are currently completing a post survey. Pre and post survey results will be shared with ICC in March. Data and policy workgroups have not been started, but will be starting soon. The SSiP work with Early Intervention Partners finishes in FFY 2018 and we will continue to report on it until 2020.

State Systemic Improvement Plan Update

Had 4 areas - evidence based was done about 2 years ago; 18 months focusing on professional development; what we focused on with EIP will now go statewide; Data; and Policy/Procedures.

Plan is due to OSEP on April 2.

They are offering a lot of technical assistance. We are starting phase 3 of year 3.

Get the data group together to look at edits. Can we link/do a match between Therap and AEPSi?

Policy/Procedures - will start with the policy package we have already submitted to OSEP.

General Supervision Update

Nothing going on now and after the APR we will do our letters of findings. To be issued by the end of April. Then levels of determination will be issued in June.

DD Slots Report

The Waiver year runs April 1 through March 31/
Set amount of slots and increase by 105 every year.
We have 5385 slots this year and next year 5490.

Common slots -

As of 5245 assigned; 140 slots available between through March 31. Average 100/110 per month.

Reserved slots - 190 - broken down by: 5 for extended services; 135 for infant development; 50 for emergency slots.

Part C Budget Report

Amanda showed what was expended through Dec 31, 2017.

Part C application is due April.

Allocated costs - indirect costs to allocate a certain % - covering our Therap costs. Therap is working on many changes.

What happens if we run out before we receive our grant? State is responsible to provide the service. As Dept. we have to think if we have appropriations somewhere else that we could use and if not, go to the emergency commission to request additional funds.

Working on the next budget and guidelines that Tina has to follow. Anything Council thinks there are priorities that we think Tina could use. Instructions will be received in Feb/March from the Governor. Something for the Budget Committee to discuss and also the Council.

NDICC Membership Updates

Update on Appointments

4 applications in but not appointed. Amy Olson said she has submitted her application.

Members not appointed and do we send them agendas, etc.? Can Sarah forward to non appointed individuals - not actively send out to them? If someone asks to have the agenda forwarded to them, then she can forward.

Those up for renewal, should we apply now.

Next meeting we should talk about soliciting for new chair and vice chair.

Once we know what the Governor's Office procedures are for termination/resignation process we can make a motion and then incorporate it into our standing operating procedures.

New Business vs. Standing Agenda Item

Some standing agenda items are included in new business and vice versa.

Dept. of Ed posted open investigations.