

**INTERAGENCY COORDINATING COUNCIL
MEETING MINUTS
Fri, Sept 11, 2020
Virtual Teams Meeting**

PRESENT

Tina Bay	Carolyn Kueber
Lisa Piche	Kim Hruby
Shannon Grave	Janelle Middlestead
Kelli Ulberg	Angela McSweyn
Matt Nelson	Amy Casavant
Eric Gault	Sarah Carlson
Michelle Ragan	Jill Staudinger
Missi Baranko	Shantelle Petroff
Brandy Pyle	

Staff Present

Jackie Adusumilli
Colette Perkins

Guests

Roxane Romanick
Becky Matthews
Laura Satrom
Peggy Lutovsky

TOPIC: WELCOME AND INTRODUCTIONS

Members and guests introduced themselves.
We will do a hand rise for voting purposes to make sure we have a quorum.

TOPIC: OVERVIEW OF AGENDA

There were no changes.

TOPIC: FAMILY STORY

There was no Family Story for today.

Looking for parent representatives in Jamestown, Bismarck, Grand Forks, and Devils Lake. Forward names to Jackie. Let the 2 families know that have previously presented a family story about our parent representative openings to see if they would be interested.

TOPIC: NEW BUSINESS

Elections -

Every Sept we do elections for the upcoming new year. We need to elect a new Chair and Vice Chair. Can be in the position for 2 consecutive years. Jackie has created a survey monkey.

Nominations for Chair - Jill Staudinger, Missi Baranko

Jill stated that she would pass to Missi.

A motion was made by Sarah Carlson and seconded by Shannon Grave to elect Missi Baranko as Chair. Motion carried.

Nominations for Vice Chair - Matt Nelson.

A motion was made by Sarah Carlson and seconded by Kim Hruba to elect Matt Nelson as vice chair. Motion carried.

Experienced Parent Subcommittee Recommendations -

Didn't get a full count on the motion.

Committee met again to draft more specific recommendations and then asked the Executive Committee to review prior to this meeting. After discussion, it was decided that it needed to be brought back to this group before forwarding to the State Office. Sarah Carlson reviewed the recommendations.

Recommendations: have a grant opportunity for Infant Development providers that capped out at \$7500 from Part C dollars. Infant Development Providers would be asked to match the \$7500. Consideration regarding the number of grants available and didn't want to limit anyone from having the opportunity to participate but wanted to create a flavor of incentive and motivation to respond to the grant opportunity. Created a form that Infant Development providers could respond to with special notation of specific % of dollars to be used toward salary. Having some remainder threshold of money used for supplies, family events, computer, and tools. Listed job requirements, which included having had an experience from receiving Part C services; communication, organizational, computer, flexible and availability to meet families where they are at. Also suggested a role be set aside to resemble the previous liaison role, networking bridge to MTAC, Infant Development providers, and our DD system - the goal is to provide leadership and observe training burden for experienced parents, experience with family consultant and able to have knowledge about what other resources are available in the state. This grant would be a different dollar amount set aside.

When Executive Committee met, they liked the experienced parent grant opportunity incentive - inspired programs to be invested in the Experienced Parent but hesitant with lead experienced

parent job - point of one person overseeing someone from another provider. Not sure how the working relationship would work with the lead Experienced Parent overseeing other Experienced Parents. The lead experienced parent needs to be a state employee. The Executive Committee talked about how this could look and part of why it wasn't pushed forward.

Intent from Experienced Parent group - lead would be reflective supervision and not direct supervision. This person is not in charge of hiring, firing, etc.

Question of having uniform practice across the state and we thought this lead would assist with that.

If there is a provider that hasn't been that involved with experienced parent, and the experience parent lead could mentor the experience parents, and this would be a good way to connect the experienced parents. There were regions that leaned on those with more experience and this was a great benefit. Need to figure out ways to offer support to providers that will be applying for the experienced parent role.

What works well - connection with Infant Development providers and we want to continue that. Reason for a lead - experienced parents got together as a group; and when we talked about how we need a mentor and it was from them getting together to support each other.

More valuable for experienced parent to have a role in training early interventionists. It is all about relationships; being a referral source. The further an experienced parent is embedded in the staff; they are really a part of the whole team. Experienced parent provides relief in helping with phone calls, making appts and go with to the medical appt, branch a role with legislators. Any thought about redistributing the money if all Infant Development provider would apply. It was talked about and these recommendations don't cover all of the what ifs. Need to have a starting point and can modify. People could apply and would have a child currently in intervention or have had a child in early intervention. Someone currently in early intervention - don't have an experience of transition - any other discussion. We didn't want to limit it.

Grant opportunity and a match - Matt in support to send to the lead agency as a recommendation. Separate that recommendation from the lead role - yes. Complication for separating may impact Infant Development providers and someone to help lead

with training and lead them to be more motivated to respond to help navigate with this. Settled on \$10,000 with no match required. Like to have MTAC to have the experienced parent lead but may be too complicated to adjust that. They have been so supportive of the family perspective.

A motion was made by Matt Nelson and seconded by Michelle Ragan to send the recommendations for the Experienced parent position, \$7500 match grant opportunity from Part C and Infant Development Providers. Discussion - does this come with job requirements of having had or currently having experience and using 85% of that as salary and remaining 15% to be used as supply - this is outlined in the recommendation.

Matt amended his motion and Michelle Ragan second to move to send the recommendation for the experienced parent position \$7500 match grant opportunity as a recommendation to the lead agency which includes the 3 bullets job requirements, etc.

Recommendation is written can it reflect it that this is an important service - underscore the importance of a quicker decision. How would lead agency pick out 10, first come first serve, another provider joins later, etc. Can you put in the RFP or whatever you send out that dollars are available up to this amount; pending availability of funds and the number of applications and we would have the criteria.

Motion carried with 1 opposing and 12 ayes. 14 members were present, and Jill didn't vote as she only votes in a tie.

Once DHS approves, we can discuss the lead and the committee can assist with this. Maybe table this for now and depends upon the timing. Concern for an Infant Development provider would be training and support.

Ex Committee - task for chair is to develop executive committee, which consists of: Chair, Vice Chair, Parent Rep, IDEA Rep, and another member.

Neonatal Intensive Care Unit (NICU) Service Provision

Potential for some of this work to be assigned to something the procedures workgroup looks at. Jill is on the procedures workgroup and did a survey of priorities they want to address next and the NICU was the 3rd item identified. What specific issues/guidance do you want the procedures workgroup to work on - guidance for babies in hospital and if/when IFSP could be

developed and what those 17 early intervention services could look like for a baby in the NICU.

Healthy Families in regions are seeing more referrals. Figure out how to partner with Healthy Families.

Region III gets referrals but not until they are leaving the NICU. If an Experienced Parent available, they can start working with the families.

Jill will give these recommendations to the Procedures Workgroup.

Bismarck is receiving referrals from the NICU for right track and maybe declined in early intervention services. They have increased in the last several months. Maybe training for Right Track in having discussions with parents with infant in NICU or discharged would be great way to help Right Track and to help the families and then circle back to early intervention, if necessary. Have recommendation for list of automatic qualifiers for early intervention been updated and a great training opportunity for Right Track. The Early Intervention Services Committee is working on the this and will be on the agenda later. Getting directly from social workers more often now than they used too.

Parent Representation on ICC

30% parent representation is in the Bylaws and ICC goal is to have 1 parent from each region.

Jackie sent email to DDRPAs to ask DDPMs about parents to consider for an ICC seat. Jill reached out to ID Coordinators and has 1 person interested in Region 7, resides in Sioux county and received early intervention services there. Put in application and feels she could bring tribal information to the ICC.

Devils Lake position has been open since 2017 and ended 8/31/2020. There is a 3-year term open for that position.

Parent requirements from the Standard Operating Procedures is: At least 30 percent of the members shall be parents, including minority parents, of infants and toddlers with disabilities or children with disabilities aged 12 or younger, with knowledge of, or experience with, programs for infants and toddlers with disabilities. At least one such member shall be a parent of an infant or toddler with a disability or a child with a disability

aged 6 or younger. A parent member may not be an employee of a public or private agency involved in providing early intervention services.

Carolyn will take to the Head Start directors.

Potential parents can also attend an ICC meeting as a guest. Sarah was thanked for her help. Send recommendations to Jill, Matt, Jackie, and Missi.

Active experienced parent in a region, how does that affect a parent being on the ICC. Looking at this being difficult for families in regard to compensation and being at a meeting for an entire day.

Every year in Sept do a joint meeting with IDEA and part of this is an orientation as to what the ICC is, what the role looks like, what OSEP is looking for from the ICC. Guest and ICC members can attend this training to get oriented to what the ICC looks.

Upload the binder to Teams for members to access. Put the new member binder on the Part C website.

Child Find (Right Track)

County information collected and reported to state. Collect county or zip but collecting the zip code raises concern with confidentiality.

Referral to Right track source suggested a specific set and being collect differently depending upon provider. Change made to contracts for total visits, and unduplicated vs duplicated count, and cost per child and what would be doable for the regions. There was duplicated vs unduplicated in the current contracts, but interpretation was different for some programs.

Contracts run Oct to Sept every year. What does council want to know about child find and what do we want programs to collect.

For some regions it would be easy and for some a little challenging and make sure requirements are in the new contract and data would not be reported until the next year.

Can share with Legislators via zip codes where Right Track is happening in N.D. and shows where we might need to do more work in some areas of the state.

Brainstorm on what they collect and would like to collect for legislation - what do you need from the Council. Concern from Right Track coordinators extra work or change in system to cost time and/or money.

Could be reported, may be not in entirety. Region 8 collects zip code and not putting in county. What Tina read can be collected and some is already being collected and by next year we could have a full report. Duplicated and unduplicated can be shared for this year.

Looking for specific data we want Right Track to gather with the new year or report what they can track, not sure? Does ICC see a need/use for and is it a need that Right Track needs to do? Right Track is the main child find source. Gathering those referred and those eligible. Year-end data would be interesting to see from all the programs statewide. Referral source for Right Track data is being tracked differently in each program.

Location - some track by county and some track by zip code and programs have different systems. Another concern is that the rate hasn't changed in many years to try and get more money to Right Track. Anyone can bring data to the Legislature and then Legislature can come to the DHS and ask what we have for data. Jackie meets quarterly with the Right Track coordinators. Think about what kind of data they want to collect to present what they do and have a plan for what picture we want to present and what we want in the contract for next year.

It would be more helpful to have more general funds allocated to the program.

TOPIC: STANDING NDICC AGENDA ITEMS

Part C Budget Report -

Pay point & administrative expenditures -

Data through July 2020.

Home visits - 1248; Consults - 533; Evals- 175; IFSP - 375; The budget for these 3 are is split between 3 funding sources - Federal, General, and Part C.

Administrative Costs - Tina shared a spreadsheet.

First Partial Month Update -

See increase in expenditures for Part C money. How many eligible/receiving Medicaid when they came to us.

How many missing to capture Medicaid match and decrease dependency on Part C. **Worked with Medicaid and unable to get this finished and this is being worked on.**

Medicaid Application Update -

There was some direction that the Economic Assistance group sent to counties for counties to capture parental income and asset and this went against what we were trying to work on. Discussion internally that information would be ready to go out by July 1 and needed clarification from CMS but COVID has caused issues with this.

Number of Kids using Part C Funds for Services -

Number consistent with prior quarter data. Tri-care member can apply for waiver, so we may see a decrease. 42 not using Part c - 31 didn't to want to, 4 not eligible to apply, and for 7 it effected their benefits.

DD Slots Report -

We are seeing a decrease; average 130 slots and we are at about 90 per month.

1121 slots of the 6190 available through 3/31/21 are being used.

Family applies for Medicaid and move to waiver services, funding is accessible. Run out of slots, and someone wants to access Part C, early intervention, then we serve just with Part C and if we run out of slots in the waiver and then we have to pay with general funds.

Committee Reports:

EI Budget Committee -

Prior to Chris leaving, there hasn't been a meeting since the last legislative session, around mid-June 2019.

March 2017 purpose determined, March 2018 recommend options to main programs as they exist, explore alternate ways for funds. Maximizing Part C funds and utilize most effectively. Kids utilizing Part C as their payment source and look at every month.

Committee interest was in pay points for services, how much service cost per kid. Rest of ICC didn't want us to look into this or not a part of the budget committee purpose.

Sarah stated that we could absolve this committee.

EI Services Committee -
High Risk Eligibility Criteria

Revised list would be helpful for Right Track screeners and partners referring to early intervention. The subcommittee has not met. But they had drafted a revised version July 2019 and took back to committee Sept 2019 and then made recommendations and we were asked to share changes with mental health professionals as we had questions on behavioral health section. Received positive feedback on the list from special health services. Kelli hadn't shared list. If things taken off, it was because they fit under a category. Didn't want people to think it was all encompassing but be used for guidance.

Parent has mental health issues and the effects on early childhood mental health - children at risk or children at high risk. Having a mental health evaluation would be advisable.

Trauma experience captured in social emotional section of report. Use informed clinical opinion, 4th category, to bring child in.

Abuse exposed newborns - Sen. Poolman had legislative bill, she presented to the ICC regarding a network of supports for those kids. Addiction at birth is on the list. Wanted to get a universal approach to this across the state. Talked about exposure vs addiction.

Can Kim make changes or do they need to be voted on.

Suggest not to make this list exhaustive.

This is a guide to help determine high risk and what it means in ND and don't need to have 1 of these to be high risk.

Add "auto" between DDPM and Eligibility.

Recommendation from Executive Committee can we email vote to the dept if we don't have a quorum. Tina will check with DHS Legal Advisory Unit on email voting on this.

Since the law changed, Right Track is receiving referrals from the human service zones for newborns exposed.

This is tabled until Tina gets back to Jill and then we will vote accordingly. Kim will re-send the edited version to

Jackie. Tina reported that Legal said a vote cannot be done via email.

Executive Committee -

Met regarding experienced parent recommendations and experienced parent committee. The make up of the Executive Committee is the Chair, Vice Chair, Parent, IDEA Rep, and one random member.

Experienced Parent Committee -

Upon request of lead agency or after the grant goes out in Dec and experienced parent committee will meet.

Family Survey Committee -

Received **447** surveys. Do we want the committee to look at different modes of sending surveys to families? Jill will contact Moe who the members were on the Committee. Microsoft forms you can indicate someone can only allow 1 survey. ICC Member to chair this committee -- Sarah Carlson. Missi will be a member.

SSIP Committee -

Updating on each of the workgroups of the SSIP plan. Do we need the committee as we have the Plan that incorporates the work?

Procedures Workgroup - Jackie released draft of dividing roles of Infant Development and DDPM on all areas of early intervention where they intersect of who does what. IFSP checklist revised went out. 2/7 and 2/9 transition agendas are being worked on. Flow of an ideal transition meeting and hoping all school districts, Infant Development Programs, and DDPM will reference this. This will be an addendum to Understanding the Transition guidebook.

3 new projects - tele intervention policy/procedure guidance, case note of IFSPs in Therap, and NCIU with IFSP development.

Professional Development Workgroup - working on finalizing role of service coordinator and what service coordination looks like in ND. This should be coming out soon.

Data Drill Down Workgroup - reviewing child outcome data; what it looks like for a state and regionally.

Tele-Intervention Committee -

Payment and startup costs for tele intervention services and best practices for tele intervention.

1st topic - best practices and training - gathering training material and tools they use back in March and what are the top things a new provider/program need to train on providing effect tele intervention. Jill will chair this group.

State Systemic Improvement Plan Update

Feedback from OSEP - 4 categories that they rated each state on. We met and exceeded the requirements. OSEP is working on developing a new SSIP.

General Supervision Update

Annual Performance Report

Ended APR the end of June. Start pulling data the beginning of sept. Table 3, 618 tables, existing table - report to federal government on how many children are existing and under what condition.

Indicator 1 and 7 will be sent to the field for review. This helps with data quality and data accuracy.

Letters of Findings/Levels of Determinations

Jackie reviewed Prong 1 and Prong 2 with the members. OSEP requires all be closed within 1 year.

NDICC Membership Updates

Membership Updates from Governor's Office -

Emailed Julie at gov office about 1 month ago with update those not seeking appt and those that would. Interest from a provider, parent, and Brandy and this information was provided to the Governor's Office. Jackie reached out to DHS childcare and haven't heard back from them.

Open Positions - See above.

TOPIC: NEXT MEETINGS

December 17, 2020 - 9am to 4pm - Virtual -- review APR data.

January 21, 2021 - 9am to 4pm - Virtual

MARCH 25, 2021

9am - 4pm

Virtual

JUNE 17, 2021

9am - 4pm

In-Person - Virtual-backup

SEPT 15 & 16, 2021 TENTATIVE

9am - 4pm

In-Person - Virtual-backup

DEC 16, 2021

9am - 4pm

Virtual

JAN 20, 2022

9am - 4pm

Virtual

A motion was made by Sarah Carlson and seconded by Amy Casavant to adjourn the meeting.