

Virginia Interagency Coordinating Council
Hanover Area Department of Social Services
September 08, 2010
Approved Meeting Minutes

The September 08, 2010 meeting of the Virginia Interagency Coordinating Council (VICC) was called to order by the VICC Chair, Rick Beaman. Karen Durst called the role. There were seventeen (17) members present. (Please see the attendance sheet at the end of the minutes.)

The minutes from the March 10, 2010 were presented. Phyllis Mondak made a motion that the minutes be approved with noted changes. Delly Greenberg seconded the motion. The motion carried with full approval.

Data Identification Workgroup Report

Allan Phillips, Chair for the Data Identification Workgroup, reported on the committee's work. The following discussion occurred:

- The availability of data is necessary in order to inform decision making.
- Data provides information on how well the Part C system is doing.
- As of the December VICC meeting, there will be a year's worth of data available since the implementation of the Medicaid Initiative.
- The Data Workgroup has been working with the Department of Medical Assistance Services (DMAS) and through the Department with the Infant and Toddler On-Line Tracking System (ITOTS).
- We need to look at what the data tells us. From the data, we know the following:
 - Child count peaks during the summer and drops off when some of the children transition to Part B at the beginning of the school year.
 - About one half of the children are Medicaid eligible.
 - Data is available to look at the number of children enrolled in Medicaid, the number of children billed to Medicaid and the percentage of the children billed.
 - What is the expectation?
 - The data can be looked at per locality.
 - The data will impact allocations in the future as the amount of Medicaid dollars coming in is looked at.
 - Both point in time and annualized child count information is provided to the General Assembly.
- Reports are sent on a monthly basis to local systems regarding Medicaid enrollees and claims.
- Technical assistance consultants will work with localities that are having issues.
- The purpose of sharing the data with the VICC is to keep members better informed.
- The data should also assist with discussions with insurance companies on covering Part C services.
- It was requested that members inform Allan of any additional data that would be helpful to have.

- It was confirmed that the amount of federal and state Part C funds are known and that local systems are being required to report Family Cost Share dollars and insurance dollars.
- Who is requesting addition funds and are they billing as expected?
- It would be helpful to have data one week in advance of the VICC meeting.
- The question was asked as to how the percent of Part C billing compares to other Medicaid programs.
 - The billing was considered to be on target or a bit better than other programs.
 - This was credited to the providers already being “on board”.
 - Targeted Case Management (TCM) was also considered to be reasonable.
 - A training session related to TCM as it relates to early intervention is being planned by DMAS and the Department.

The Impact of Co-Occurring Birth Defects on the Timing of Hearing Screening and Diagnosis by Derek Chapman, Ph. D.

Derek Chapman, Ph.D. an epidemiologist from the Virginia Department of Health (VDH), presented on the *Impact of Co-Occurring Birth Defects on the Timing of Hearing Screening and Diagnosis*. He shared the following information:

- Without screening, the average age for diagnosis of hearing loss is two to three years of age.
- The goal is that all children will be screened by one month of age; diagnosed by three months of age; and be enrolled in early intervention by six months of age.
- Research indicates that .94 children per 1,000 do not pass their hearing screening or follow-up. Of those children, 31.5% have co-occurring birth defects with chromosomal abnormalities being the highest.
- Preterm infants are 31 times more likely to not be screened due to the focus on other medical issues.
 - There is a great concern over premature infants not being found eligible for Part C.
- The VDH is providing information on all screenings regardless of pass or fail.
- There is a problem related to loss of follow-up.
- The Early Hearing Detection and Intervention (EHDI) Program of the VDH is working on ensuring that hearing screening occurs for all children.
- The VDH has the ability to link data sets to their electronic birth certificate.
 - Great potential exists with the linkage.
 - The goal is to eventually link the Virginia Infant Screening and Infant Tracking System (VISITS) to ITOTS through a possible data sharing agreement.
 - Children with co-occurring conditions with the likelihood of hearing loss should be referred to early intervention.

Public Comment

Rosalind Cutchins provided public comment. The following italicized information is verbatim from the written report provided.

Thank you for the opportunity to speak with you today.

I am speaking to you today from my own perspective as a system manager representing Western Tidewater. I am also on the CoCoA steering committee. CoCoA is our name that dates back to the days when Local System Managers were called Council Coordinators. We have 2 representatives serving on the steering committee from each of the 6 regions in the state. We encourage you to seek us out for collaboration. We met last week and appreciate Mary Ann Discenza joining us for the meeting. We have been unable to generate VICC comments with input from all based on the short turn-around time. My comments today are greatly influenced by the steering committee; however, I am speaking from my own perspective.

- *Transformation: we remain encouraged as we see the revenue generated by Developmental Services.*
- *We appreciate the flexibility of the implementation date of the Practice Manual and forms-we have needed it!*
- *We continually hear and experience the positive leadership of Tammy Whitlock from DMAS to make this transformation work. We truly appreciate her willingness to listen and seek solutions. Thank you!*
- *The revival of the task force meetings has been very positive. Please continue the conversations.*

With any positive initiative comes the price of change. System managers are extraordinarily stressed at this time. We recognize this is a stressful time for the entire state. The increased regulations, timelines, scrutiny and requirements are difficult to juggle. We support transformation and are also juggling many responsibilities and changing policies.

We say to you, Thank you for being a VICC member. You represent a part of the puzzle in serving families. We especially thank you for your participation in the spring Leadership Academy. The reception was a delightful time of fellowship. It was great to put faces with names, and voices with agencies. The one lingering question we have is of Glen Slonneger. Glen-could you please tell us your email address?

Thank you again for the opportunity to share these thoughts with you. Please feel free to connect with any of us with questions or concerns.

Update on the Comprehensive System of Personnel Development (CSPD) in Virginia: Plans for the Future by Deana Buck

Deana Buck, Cori Hill and Dana Childress presented information on an *Update on the Comprehensive System of Personnel Development (CSPD) in Virginia: Plans for the Future*. The following information was shared:

- The Integrated Training Collaborative (ITC) has been working on the Communities of Practice (CoPA), Kaleidoscope and the Part C Training Initiative. The Training Initiative is being funded through American Recovery and Reinvestment Act (ARRA)

dollars.

- A survey was provided to providers, local system managers, VICC members, and constituents regarding training needs.
- An additional survey was completed focusing on adult learning styles.
- Consideration of the issues of limited travel funds to attend trainings and building sustainability are important components for the training development.
- “Talks on Tuesday”, one hour presentations on topics of interest, will be presented monthly.
- A Landing Pad has been developed through a contract with Camille Catlett. This one page information sheet on specific topics will appear on a portal on the ITC website. Information will also include a list of best websites, books, DVDs and other resources.
 - It is anticipated that four topics will be available by December including Autism and Social/Emotional Issues.
- Mini lessons, with a page or two of content, will also be available. Activities for groups or individuals will be provided, as well as reflection activities and key talking points.
- Sixteen individuals participated in a Train-the-Trainer event.
 - Fifteen of the participants will move forward as trainers.
 - This will provide for trainer availability in various regions.
- A question was asked as to whether Continuing Education Units (CEUs) could be provided for participation in trainings.
 - It was reported that this had been explored previously and that certain requirements would have to be met. There also would be a cost to participants wanting CEUs.

VICC Processes Workgroup Report

Rick Beaman, the Chair of the VICC Processes Workgroup provided a report on the committee. He shared the following.

- Current members are Rick Beaman, Dr. Lissa Power-deFur, Charlie House, Phyllis Mondak and Karen Durst, representing the Part C Office.
- The purpose of the workgroup is to restructure the VICC process so that members are more engaged, there is more participation and there is a focus on a topic for each meeting that will include discussion.
- Information on Child Find was sent out a week in advance of the meeting in order for members to review the information and come prepared to discuss the topic.
- Changes are needed in the VICC By-Laws. The most recent revision was in 2008. Approval will be requested from the Governor’s Office regarding term changes.
 - The name of the Department needs to be changed from the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) to The Department of Behavioral Health and Developmental Services (DBHDS).
 - A possible change in terms to include two-terms and the continuation of service until a replacement is appointed. A limit would be placed on this time extension
 - Date of term would begin at the date of actual appointment so that members

- do not lose service time due to gaps in appointments.
- o Rick Beaman will make the changes to the By-Laws once approval is received from the Secretary's Appointment Office. The By-Laws, with changes, will be sent to VICC members for review prior to the VICC meeting. Voting on the revisions will occur at the December 2010 meeting.
- Review of committees should be occurring at the end of each year. Karen Durst was asked to send a list of the current committees to the VICC Chair, Rick Beaman, for discussion at the December 2010 meeting.

VICC members were asked to identify topics for the focus for the December 2010 VICC meeting. The following topics were suggested:

- ARRA funds;
 - o With funds ending September 30, 2011, discussion is needed related to the potential impact on systems and the need for sustainability.
 - o It was suggested that updates be provided at each meeting as to the status of the ARRA funds and the use by the local systems.
 - o The question was asked as to whether there was any need for the VICC to advocate for the approval of the use of the ARRA funds for the State Part C Office.
- Child Find:
 - o VICC needs to be informed and support the Part C staff.
- Information on the Prematurity Workgroup:
 - o It was suggested that a presentation be provided at the December VICC meeting on the work of the group.

It was decided that Child Find would be the focus of the December meeting.

Additional VICC Discussion

Additional VICC discussion included a concern expressed regarding the use of the Ages and Stages Questionnaire III (ASQ III) for determining eligibility. Discussion included:

- Research has been conducted regarding specificity and sensitivity in using the ASQ III as a screening tool.
- The ASQ III is a screening tool and should be used in this manner; it is not diagnostic.
- The ASQ III is only one piece of the information being used to determine eligibility.
 - o Medical reports, observation, parent report, use of supplemental instruments, etc, are being used.
- A Healthy Families Program in Northern Virginia is using the ASQ III for screening purposes, as well.
- An ASQ III Train-the-Trainer is being planned.
- Is the use of the ASQ III impacting the number of children found eligible for services and therefore, the child count numbers?
- Technical Assistance Consultants will be conducting reviews with local systems related to eligibility determination and will look at the use of the ASQ III and the potential impact.
- Further discussion will occur at the December meeting.

Bonnie Grifa shared that the review and approval by the VICC of the Annual Performance Report (APR) needs to be included with the December meeting.

- It was asked if a bulleted coversheet representing the data could be provided.

Child Find Discussion

VICC members then discussed the issue of Child Find. The following was shared:

- While child count numbers are up in some areas, the gap between the numbers and the state target are getting wider.
 - The state target was previously re-evaluated and lowered because the movement was slower than expected.
- Seventy-nine percent (79%) of the referrals are coming from doctors, hospitals and parents.
- There is a universal referral form but some localities are using their own form.
- There is a decrease in the number of birth to one year olds being served.
 - What are the reasons?
 - Are the children that are referred being found eligible for services?
 - More discussion and education is occurring with physicians so that there is a better understanding of early intervention.
 - The issue of being unable to contact the child and family or declining services is a concern.
 - The number of children found not eligible for services is reasonable according to the expectations of the school system.
- It may be helpful for providers to have a refresher course in what is typical and what is atypical. Many individuals become used to only seeing children with atypical development.
- With some systems growing, there is a need for support in expanding their programs.
 - The focus of this year's Service Enhancement Plans (SEPs) is on data analysis and fiscal analysis.

What can we do with the discussion?

It was suggested that VICC discussions include the following components:

- The purpose of presentations;
- The focus of discussions;
- The issues; and
- The solutions.

Systems Improvement Project

The Virginia Department of Health has a Systems Improvement Grant for Integrated Community Systems for Children with Special Healthcare Needs (CSHCN). The grant is funding a learning collaborative with a focus on the Medical Home and developmental screening with the purpose of better serving children and families. The grant will last one year and fifteen (15) primary care sites have been identified for participation. Materials will be made available for providers and families, including an early intervention

brochure.

System Changes

The Infant & Toddler Connection of the Valley will be separating into two systems as of October 01, 2010. The systems will be known as the Infant & Toddler Connection of Augusta-Highland, with the Local Lead Agency being the Augusta County Public Schools, and the Infant & Toddler Connection of Staunton-Waynesboro, with the Local Lead Agency being the Valley Community Services Board. This will bring the total of local systems to 40.

Items requiring follow-up include the following:

- Karen Durst will send a list of committees and members to Rick Beaman.
- Karen Durst will check with the Appointments Secretary's Office regarding possible changes to the VICC By-Laws.
- Once confirmed as allowable, Rich Beaman will work on changes to the By-Laws and will send them to members prior to the December meeting.
- Mary Anne White will make a correction to the Child Find Slide for Birth to Three.
- David Mills will update the map showing the local systems.

The agenda for the December 2010 meeting will include:

- Committee Reviews;
- Status of ARRA Funds;
- By-Law Changes;
- APR Review and Approval;
- Prematurity Workgroup Presentation;
- Child Find as the Focus of Discussion; and
- The use of ASQ III for Screening.

The next VICC meeting will be December 01, 2010 from 9:30-3:00 at the Hanover Area Department of Social Services Office.

VICC Members in Attendance

Rick Beaman
Joanne Boise
Catherine Cook
Pam Fisher for Janet Lung
Delly Greenberg
Dr. Corey Herd
Virginia Heuple
Sonia Lopez
Phyllis Mondak
Allan Phillips
Dr. Patricia Popp
Dr. Lissa Power-deFur
Glen Slonneger
Yolanda Tennyson for Jackie Cunningham

Tammy Whitlock
Mary Wilson
Sandra Woodward

VICC Members Absent

William House
Laura Miller
Sheila Nelson
Jeannie Odachoski
Leslie Hutcheson Prince