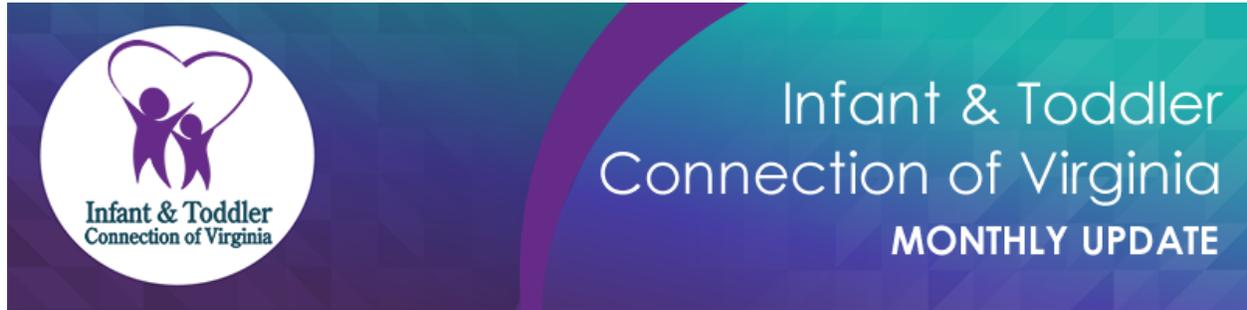


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May 2016

IN THIS ISSUE:

- [State Systemic Improvement Plan \(SSIP\)](#)
- [The Decision Tree--Why Culture Matters: What Research Tells Us](#)
- [Medicaid Early Intervention Services Nursing Code Change](#)
- [Tips from Your Monitoring Team](#)
- [Part C Staff Directory](#)

STATE SYSTEMIC IMPROVEMENT PLAN (SSIP)

State Systemic Improvement Plan (SSIP)

A number of steps in our SSIP are now underway! We will use this section of the monthly Update to highlight activities completed in the previous month for these steps. For steps with an April start date, our efforts in April focused primarily on organizing state staff responsibilities around these SSIP steps and recruiting stakeholders to participate with us. For other steps that are underway, here is what's new:

SSIP Step	Projected Timeline	April Activities
Revise content and format for Kaleidoscope	Now - 9/16	Held initial meeting with group of service coordinators who will help to identify critical content and what should be included in the SC Module required for EI Certification (immediate need-to-know) versus what should be included in Kaleidoscope (which will build on the module)
Revise EI Certification Modules	Now - 7/16	
Support implementation of the Coaching Facilitation Guide	Pilot Now - 5/16 Determine whether to expand and/or require statewide	Participants in the two initial cohorts of the Coaching Facilitation Guide Project continued to use the guide to facilitate discussion and activities in their local systems and to meet monthly as cohorts to share ideas and plans for continued local work. The final meetings will occur in April and a feedback survey will be sent out to gather information about experiences with the project. This feedback

	6/16 - 9/16	will be used to determine future support provided to those implementing the Guide.
Explore the ability and timeline for existing Part C early intervention data to be added to the DBHDS Data Warehouse Project	Now - 10/16	Infant & Toddler Connection of Virginia state staff continued to meet and work closely with DBHDS IT staff and the DaSY Cohort on Integrating the IFSP/IEP into the State Data System to lay the groundwork for identifying needed data elements and functionality and potential replacement systems. In addition, state staff viewed two data systems to further inform future decision-making related to data system needs and data systems that can meet those needs.
Identify widely agreed upon future data system needs/wants	Now - 6/16	
Identify and evaluate potential ITOTS replacement systems	Now - 9/16	
Identify a simple and effective way for local systems to collect and analyze data on child outcomes	2/16 - 8/16	A national TA consultant is reviewing some local system data and the ITOTS system to help us maximize the use of existing data to understand child outcomes and plan improvements in the period before we have a new data system. The TA consultant will meet with the State Leadership Team on Data in the coming month or two to review her findings.
Revise local contract for 7/1/16 <ul style="list-style-type: none"> Specify/clarify required functions for local lead agencies Require LLA to identify who in their local system (by name) fulfills each required local lead agency function 	3/16 - 5/16	Step completed <ul style="list-style-type: none"> Reviewed contract descriptions of required functions and determined no revisions needed Added short form to record name and contact information for individuals who fulfill key functions as of the date the local contract is signed

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As a reminder, our finalized SSIP and related materials have been posted to the SSIP section of our website at <http://www.infantva.org/Sup-SSIP.htm>. If you have questions about the SSIP, please contact [Kyla Patterson at k.patterson@dbhds.virginia.gov](mailto:k.patterson@dbhds.virginia.gov).

[BACK TO TOP](#)

THE DECISION TREE--WHY CULTURE MATTERS:
WHAT RESEARCH TELLS US

The Decision Tree

Child Indicator Seeds for Success

Why Culture Matters: What Research Tells Us



One of the theories of child development early interventionists should keep in mind when working with a child and family who are from a different culture is Lev Vygotsky's Socio-Cultural Theory. Lev Vygotsky's (1896-1934) saw child development as a form of social constructivism, which maintains that human development is socially situated and knowledge is constructed through interaction with others, and subsequently determined by culture. According to Berk and Winsler (1995) there are a number of factors that are unique to social constructivism. First, because children's culture influences the activities, language, and education to which children are exposed, these variables affect children's development. Second, while some development is innate or influenced by biology, higher level development is affected by culture. Finally, the theory incorporates the zone of proximal development, that is, the range in children's development between their ability to perform a task independently versus their ability to perform a skill with the assistance of a more competent member of their culture (adult or older child). This is very much like what we consider hand over hand assist and modeling for instance to build on existing skills.

With Lev Vygotsky's theory in mind, I recently reviewed a study *Maternal Expectations About Normal Child*

Development in 4 Cultural Groups (email me for full study: anne.brager@dbhds.virginia.gov) that explored the maternal expectations about normal child development within 4 different cultural groups. The objective was to determine whether expectations about normal infant and child development are different among mothers from different cultural backgrounds. The participants in the study included 255 mothers (90 Puerto Rican, 59 African American, 69 European American, and 37 West Indian\Caribbean) whose children received health care at hospital-based pediatric clinics, private pediatricians and family practitioner's offices. Excluded from the study were parents who had a child with a known behavioral or developmental concern or a chronic medical condition, parents who were not members of the ethnocultural groups under study, and parents who had no child rearing experience (such as first-time parents at their first postpartum visit).

In the study, researchers verbally administered a questionnaire that included 25 questions in which mothers were asked to give their opinions about the age at which a normal child should begin to accomplish standard developmental milestones. The questions were administered in the parent's native language. Significant differences were seen for the following developmental tasks: able to be fed from a spoon, smiling at a face, recognizing mother, able to feed self with a spoon, putting on own shoes, saying first word; naming colors, able to see shadows and shapes, and able to be toilet trained. The developmental tasks for which there were no significant differences in expected ages among the mothers of the different ethnocultural groups included the following: crawling, taking first steps, rolling over, able to get to a sitting position and stay there, picking up head, pulling to stand, turning head to sound, grabbing a rattle, playing "pattycake" or "gimme sleeping through the night, knowing own name, putting 2 words together, knowing body parts, babbling, understanding the word "no," and feeling pain.

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[BACK TO TOP](#)

Medicaid Early Intervention Services Nursing Code Change

The Department of Medical Assistance Services (DMAS) has just learned that the nursing code G0154 has been end-dated in the HCPCS manual as of 12/31/15. This means that claims billed with this code will be denied. DMAS is looking for another code to use that is not used in other programs. Once a new code is identified, a Medicaid systems update will be done to add the new code for EI.

Once the new code is in place, providers will need to re/bill for any (G0154) claims that were denied beginning January 1, 2016. (The claims cannot be re-processed by DMAS because DMAS cannot change a code that was billed on the original claim).

We will send an email alert to inform providers when the new code is in place.

[BACK TO TOP](#)

Tips from Your Monitoring Team

Know Your Compliance Status--Transition Refresher

Transition is a compliance indicator that is reported to the Office of Special Education Programs (OSEP) as part of the Annual Performance Review (APR). The Federal and State Regulations specify that the **IFSP** must include the steps and services to be taken to support the smooth transition of the child. The activities in the transition section of Virginia's IFSP are intended to help service coordinators and families plan individual child/family transitions that prepare children and families for successful transitions.. Documenting the transition steps and activities on the IFSP, not only assures compliance with the requirements, but also ensures that the parent or guardian is provided a written copy of the specific details of the transition plan.

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[BACK TO TOP](#)

Part C Staff Directory

Catherine Hancock	<i>Early Intervention Administrator</i>	(804) 371-6592
Anne Brager	<i>Part C Technical Assistant Consultant</i>	(434) 374-2120
Richard Corbett	<i>Part C Monitoring Consultant</i>	(804) 786-9682
Karen Durst	<i>Part C Technical Assistant Consultant</i>	(804) 786-9844
Cori Hill	<i>Part C Training Consultant</i>	(540) 943-6776
David Mills	<i>Part C Data Manager</i>	(804) 371-6593
Sarah Moore	<i>Part C Monitoring Consultant</i>	(804) 371-5208
Kyla Patterson	<i>Part C Consultant</i>	(860) 430-1160
Irene Scott	<i>Administrative & Office Specialist III</i>	(804) 786-4868

Terri Strange-Boston	Part C Technical Assistant Consultant	(804) 786-0992
Beth Tolley	Early Intervention Team Leader	(804) 371-6595
LaKeisha White	Office Services Specialist	(804) 786-3710
Telisha Woodfin	Part C Monitoring Consultant	(804) 786-1522

Note about This Update:

This Update is prepared by the Infant & Toddler Connection of Virginia State Team at the Department of Behavioral Health and Developmental Services as a means of sharing current information from the DBHDS/Part C Office.

Enrollment of Children in the Medicaid Data System (VAMMIS)

Please note the following contact information for questions about enrollment of children in the Medicaid Data System (VAMMIS).

- [Irene Scott](#) * 804-786-4868
- [Beth Tolley](#) * 804-371-6595

Early Intervention Certification

For questions about certification of practitioners, contact [Irene Scott](#) * 804-786-4868

For questions related to completing the online application, contact [David Mills](#) * 804-371-6593

Infant & Toddler Connection of Virginia | (804) 786-3710 |
irene.scott@dbhds.virginia.gov | <http://infantva.org/>
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