

# INTERAGENCY COORDINATING COUNCIL (ICC)



## JANUARY 2009 MEETING MINUTES

### **MEMBERS/ /APPOINTEES PRESENT**

Rachel Porcher, Jim Copeland, Richard Barbaras, Karen Lucero, Kimberly Diaz, Tiffani Lovell, Monica Chlastawa, Ann Borrego, Jaime Diaz, Maria Varela, Lisa Chavez, Paula Seanez, Joseph Sanchez, Cathy Stevenson, Ida M. Tewa, Lawrence Shandler, Ethel Davis, Mette Pedersen

### **PROXIES PRESENT**

Kristie Readyhough Proxy for Rosemary Gallegos, Krista Scott Plionis Proxy for Lynn Christiansen, Monica Chlastawa Proxy for Jane Larson and pm Proxy for Richard Barbaras, Judy Paiz Proxy for Nancy Treat

### **MEMBERS/APPOINTEES ABSENT**

Denise Balderas, Wendy White, Senator Gerald Ortiz y Pino, Andrea Leon

### **WELCOME**

Dr. Stern, Superintendent, welcomed the ICC to the School for the Deaf. Dr. Stern stated the collaboration among the School for the Deaf, the DOH and the ICC is very special. These three entities are working together effectively to achieve common goals on behalf of young children and their families. The collaboration with the New Mexico School for the Deaf is historical as deafness, being low incidence, does not always receive this level of respect and commitment. Dr. Stern expressed his appreciation for Dr. Vigil's commitment to the early identification of infants with hearing loss and to quality early intervention services for infants, toddlers and their families. Dr. Stern commended Susan Chacon, Joanne Corwin, Rosemary Gallegos and Andy Gomm for their contributions to the Deaf and Hard of Hearing Task Force.

Dr. Vigil, DOH Secretary, commented on how we are living in interesting times. As a State, New Mexico is faced with a number of challenges and opportunities. Dr. Vigil asked the ICC if they had questions, comments or concerns. Monica Chlastawa thanked Dr. Vigil on behalf of parents for coming to the meeting. Andy Gomm asked Dr. Vigil how the session was going in terms of health care issues for young children. Dr. Vigil stated the economic position of the State is getting worse daily and dramatic interventions are needed. The State budget has to balance by constitutional mandate. For health care in general, State fiscal issues are going to be distracting so our task is to hold on to the funding status quo as best as we can. The Governor does want to see some expansion for children on Medicaid. Funding for other issues is going to be difficult to maintain and there may have to be some reductions in funding. On the federal level, with the bailout and with Medicaid, some funds may come to the state before the end of the session. The Governor has stated there may be a need to tap into state reserves and taxes may have to be raised. Dr. Vigil's advice was to prepare for the worse. Times are severe. Hopefully, some good things will occur in the next few months.

Dr. Vigil and Dr. Stern signed the Memorandum of Understanding between the Department of Health and the School for the Deaf regarding collaborative services between early intervention services and the Step\*Hi Program. Andy Gomm and Rosemary Gallegos have presented on the merits of this collaboration at national meetings. Dr. Stern thanked Rosemary Gallegos for her passion to serve families and identify babies as early as possible and for her service as the Assistant Superintendent.

## OVERVIEW

Jim Copeland, ICC Chair, welcomed members and guests to the meeting and asked for introductions.

## CONSENT AGENDA

Jim Copeland asked for a change in the meeting agenda. The presentation on the ECAN Legislative Agenda was moved to 10:45 and a presentation by the ICC Public Awareness Committee was added to the presentation on regulations. **MOTION: Cathy Stevenson made a motion to approve the meeting agenda as revised. Richard Barbaras seconded the motion. The motion passed. There were no objections or abstentions. MOTION: Krista Scott Plionis made a motion to approve the December meeting minutes. Rachel Porcher seconded the motion. The motion passed. There were no objections or abstentions.**

Richard Barbaras distributed the ICC financial report. Richard reported that there is \$12,744.29 remaining in the ICC budget. Andy Gomm informed the ICC that Zia will be continuing as the ICC Fiscal Agent. Monica Chlastawa expressed her thanks to Zia for the quick turn around in reimbursement. **MOTION: Paula Seanez made a motion to accept the ICC Financial Report. Mette Pedersen seconded the motion. The motion passed. There were no objections or abstentions.**

Andy Gomm distributed the **FIT Lead Agency Report**. Andy stated the ICC Executive Committee had requested that these reports be provided at ICC meetings. Andy asked the ICC to let him know if changes in the report format or content are needed. Andy stated the DDS Annual Report is being printed and will be available on the DOH website within 24 hours. Andy reviewed the following funding sources for the FIT Program: Medicaid, federal funding, private insurance and State General funds. The DOH and the State Legislature have been supportive of FIT funding needs. The federal stimulus package includes \$300,000,000 a year for Part C Programs. If the stimulus package passes as presented, there would be \$1.5 million for FIT. Andy discussed FY 08 FIT expenditures. The State pays \$.28 on every dollar for children funded under Medicaid. The FIT Program has a million dollars in expansion funding. The new FIT-KIDS database is allowing the FIT Program to back bill Medicaid up to 120 days. Early intervention providers will have to reimburse the State if they receive both Medicaid funding and FIT funding for the same child. Mette Pedersen stated have been less emails on the FIT Coordinators website regarding database issues. Mette asked Andy Gomm what providers are reporting regarding database use and benefits. Andy replied that a provider group is meeting with FIT to provide feedback regarding the database. Richard Barbaras stated that Zia was a pilot site for the database. Richard said Zia tracks all kids rejected by Medicaid and agrees with FIT as to Zia's Medicaid usage. Andy informed the ICC that the requested \$1.4 million in expansion funds did not make it into the DOH budget. Andy reviewed the statistics on the average number of children referred monthly. When referrals significantly increase during a month, early intervention providers may struggle to meet timelines. Kimberly Diaz asked for clarification regarding the statistic on referrals. Andy Gomm replied the statistic only pertains to the number of referrals. Cathy Stevenson asked Andy to break the statistic down by referral source for future Lead Agency Reports. Richard Barbaras asked if the monthly birth rate could be looked at for a one year period to see if the birth rate impacts the number of referrals. Mette Pedersen asked about the percentage of children served by the FIT Program. Andy Gomm replied it was around 10% (more than one in ten infants and toddlers). Mette Pedersen stated it would be helpful to have families call their legislators regarding the federal stimulus package. Jim Copeland requested that the age of referral be added to the report. Krista Scott Plionis asked where the population data is obtained. Andy Gomm replied that the data is obtained from UNM/BBER. Krista stated the Newborn Screening Program uses vital statistics and this data source might be helpful. Andy replied that FIT could cross reference the data

information. **MOTION: Mette Pedersen moved to accept the FIT Lead Agency report. Jyl Adair seconded the motion. The motion passed. There were no objections or abstentions.** Andy Gomm informed the ICC that he had to analyze the FIT funding bill by 2:00 pm today but he would remain at the ICC meeting while he analyzed the bill.

### **VOTING ON ICC PERSONNEL PREPARATION REPRESENTATIVE**

Copies of the resumes and letters of interest for Dr. Robin Wells, Eastern New Mexico University, and Dr. Joanna Cosbey, University of New Mexico, were distributed along with a paper voting ballot. Jim asked the ICC if anyone wanted to speak regarding the merits of either candidate. Cindy Faris stated that Dr. Wells was a member of SpecialQuest State Leadership Team for Professional Development on Inclusion and was passionate about services for young children. The ICC voted using the paper ballots and Dr. Robin Wells was selected. Her information will be forwarded to the Governor for official appointment.

### **FIT AWARENESS DAY**

FIT Awareness Day is March 9 and FIT will have a display table in the East wing. Providers are encouraged to bring parents to the legislature on FIT Awareness Day so they can speak with their legislators. Packets for parents will be available on March 9 and packets will include information on legislation, a sheet to leave a written note for their legislators, bill information, etc. Jim Copeland informed the ICC that the FIT Program will also be represented on the March 2. When asked if parents could be reimbursed for participating on March 2, Andy Gomm suggested that parents could choose which day they could go to the Legislature (March 2 or March 9) and be reimbursed. Parents need to know who their Senator and Representative are so they can direct their support to the right legislators. Head Start provides a parent advocacy conference that is open to all parents. Jaime Diaz will put the advocacy conference information out on the FIT and ICC List Serves. Mette Pedersen asked if a video link should be set up through UNM for parents who cannot attend the parent advocacy conference in person. Mette will work with Jaime to set up the video link. All information for parents will be distributed via the ICC and FIT Coordinators list serves. Rachel will send the FIT Awareness Day Flyer out on ECAN list serve. Monica Chlastawa will meet with Sallie Van Curen at PRO and request that PRO distribute the flyer via the PRO list serve. Cathy Stevenson will distribute the flyer at the Advisory Council on Quality. Some changes in wording on the flyer were suggested. The ICC Coordinator will make these changes and send the flyer out on the ICC and FIT Coordinators List Serves.

New Mexico Senator Jeff Bingaman is on the Federal Finance Committee. It is important to contact Senator Bingaman and ask him to support the \$87 billion Medicaid funding and the 7 CMS regulation moratoria. The benefit to New Mexico would be \$1.5 billion.

Jim Copeland led a discussion on ways to increase parent representation on FIT Awareness Day. The following suggestions were made:

- ◇ Provide transportation to support participation. For example, Alta Mira has a 12 passenger van and Alta Mira could transport parents to Santa Fe. La Vida could also do this. ICC Chair will contact FIT Coordinators to see if they have vans and ask if they can bring parents to the Legislature on FIT Awareness Day
- ◇ Make cards to give to parents in programs with the statement: "Make your voice heard. Meet at (add information). For more information call ICC Coordinator. ICC Coordinator will develop this card and send it out via the FIT Coordinators List Serve
- ◇ Video tape families who can't attend and have someone carry the video to the parents' representative or senator

- ◇ Develop a postcard for families to sign that has a message to their senator and representative about benefits of early intervention services
- ◇ Put a card in Senators and Representatives legislative mailboxes that contains the following information: "There are (insert number) number of children and families in your county receiving early intervention services from the Family Infant Toddler Program. If you want more information about what we care about, please ask us. Cathy Stevenson stated FIT can pull the information by county on the number of children served
- ◇ Jim Copeland will send a message to the FIT Coordinators List Serve requesting their support in helping families attend FIT Awareness Day
- ◇ Put bill information out on FIT Coordinators List Serve
- ◇ Ask programs to distribute information to families via their service coordinators or developmental specialists
- ◇ Develop a 30 second version of the ICC key message. Key message should help legislators understand the even with the infusion of new monies coming in from the federal government, we still to maintain current funds. The growth of the FIT Program is such that there is a gap between the need for the program and funding for the program.

### **ECAN LEGISLATIVE AGENDA**

Larry Shandler presented the ECAN legislative agenda. ECAN has been in existence for five years. Appointments to ECAN are made by the Lt. Governor. This year, ECAN is supporting the Governor's first tier legislative priorities which are: expand voluntary home visitation and \$1 million for new programs; expand the NM PreK Program with funding for the program split between CYFD and PED; and maintain childcare assistance at 200% of federal poverty level. The Governor has a State Medicaid request that is below last fiscal year's Medicaid funding amount. ECAN, as the advisory group to the Lt. Governor, has to support the Governor's request. ECAN members, as representatives of other groups, can individually support other bills such as the FIT bill. ECAN members as individuals are also supporting full funding for Medicaid, improvement in family learning, parents who stay home to take care of their children, and other issues. A lot of these initiatives will end up in House Bill 2 which is the major funding bill. Legislative committee meetings and bills need to be followed closely, especially at the end of the session. It is important to reach members of House Appropriations and Senate Finance Committees to help assure that bills have the needed funding. Andy Gomm stated that ECAN is committed to not having programs that serve young children compete against each other during the session. We all need to work to support early childhood funding across a variety of programs.

### **ICC PARENT PANEL**

Magi Gerety, Coordinator of New Vistas early intervention program, introduced Carolina. Carolina distributed a letter about the many positive benefits of the early intervention services provided by New Vistas to Carolina, her son Alex, and their family. Alex transitioned from New Vistas last July. Carolina stated that the family did not have any concerns about Alex's development until her sister in law visited from Brazil and pointed out some concerns. Carolina reported that Alex was very quite and would stay focused for hours on a single toy. Family became concerned that Alex might have autism or autistic characteristics. When these concerns were discussed with Alex's pediatrician, he did not initially think there was any cause for concern but later referred the family to a specialist. Alex was first referred to a program in Albuquerque and then to New Vistas. New Vistas completed Alex's evaluation when he was 1.8 years. Evaluation results indicated Alex was delayed in the areas of fine motor and speech and that he had issues with sensory input. Services included speech and occupational therapy. Family was so relieved that services were provided at no cost to the family. Carolina stated New Vistas is a life saver for families. New Vistas support was excellent. Therapists helped family use games to support Alex's development and helped the family institute a brushing

program. Home based services were provided in accordance with family's schedule. Carolina expressed concern that physicians may not understand developmental issues or know how to make early referrals to early intervention. Carolina requested that more screening be available. Carolyn stated they don't know if Alex had autism but he is now progressing as expected for his age. Some research indicates that if you catch autism before the age of 2 years, you can prevent it. Alex's progress in language and his vocabulary are amazing. Before he could communicate, Alex expressed his frustration through aggressive behaviors. Carolina stated she hoped that New Vistas could be supported so they can in turn support more children and families. Magi Gerety stated that when children come in with language and behavioral issues, evaluation teams can tease out what is causing the issues and later on the children do not need any more services or they need less services. Monica Chlastawa asked Carolina to join other parents and ICC members at the roundhouse on March 9. Jim Copeland stated parents can self-refer to early intervention and do not have to wait for a physician referral. Monica Chlastawa suggested that Carolina might want to talk with the UNM Families as Faculty Program about speaking with medical students about early intervention and the importance of early referrals.

Kristie Readyhough, Step\*Hi Regional Supervisor, introduced Brittany and her two year old daughter Lillie Anna. Lillie was born with unilateral microtia. The doctors at hospital did not provide much information. Lillie did not pass her newborn hearing screening because of the microtia. The hospital referred her to an ENT at UNM. Even the UNM appointment, the family was not given much information other than surgery would be done when Lillie was older. Brittany started doing Internet research and contacted the School for the Deaf about baby sign classes. The School for the Deaf told her about the services available through the Step\*Hi Program. Brittany stated she had been looking for services for over a year and Lillie was 18 months old when her services started. Step\*Hi and New Vistas did a full evaluation. Sign language helped Lillie communicate. Lillie is two years of age and she is talking and using 100's of signs. She is speaking in full sentences and Brittany can now have a conversation with her daughter. Brittany stated she is so happy to have found Step\*Hi. The family was introduced to another family whose child also has atresia. Brittany said their family went from having no answers to having all the resources and tools that needed to face and meet concerns such as Lillie's future surgery. Services have positively changed the lives of their child and family. Monica Chlastawa requested that Brittany also put March 9<sup>th</sup> on her calendar.

Larry Shandler informed the ICC that although we still have a long way to go, a lot of work has been done in the past five years to help physicians learn about early intervention and known how to make referrals. Physicians are being encouraged to team with parents and accept parental input but changes are slow in coming. Physicians are learning to institute a medical home where they can coordinate patient care but time issues impact their ability to do this. Surgeries and procedures have the most financial rewards. There is currently a bill in the Legislature to establish medical home pilots. Doctors do not want to deliver bad news to parents. Monica Chlastawa asked what can we do about physicians who do not respond to parent requests for a referral or who do not listen to parent concerns about their child's development. Answer: Physicians have to meet ongoing certification requirements. There is a developmental screening module that physicians can take to help them meet their ongoing professional development requirements. Larry stated he distributes the FIT Family Handbook to other physicians and the best way to address the issue is to continue to work with and educate physicians. Kristie Readyhough stated that although Lillie did not show delays and there were no medical concerns, this family's journey demonstrates the value of services for children at risk. Carolina stated that families should receive information in their take home hospital packet. Well baby packets are distributed in Santa Fe. Tiffani Lovell stated the ICC Child Find/Developmental Screening Committee is working on information to be given to mothers when they leave the hospital and there will be a demonstration of the user friendly changes to the FIT website later in the meeting.

Larry Shandler stated the home visiting program for newborns can lead to earlier evaluations when parents have concerns as well as provide developmental information to parents. Jyl Adair asked if New Vistas and Step\*Hi made presentations to physicians. Answer: Yes, but there is a continuous need to provide education. Mette Pedersen stated we also have to advocate for systems that can accommodate referrals. Ida Tewa asked if information is getting out to the native communities. Answer: Yes. Magi Gerrety asked if the ICC could reach out to first born programs so first born providers know about early intervention and how to make referrals.

Kristie Readyhough introduced Felicia and son Jessie. Felicia stated Jessie is profoundly deaf and his hearing loss was identified when he was four months of age. Step\*Hi and Las Cumbres provide early intervention services to Jessie and his family. Jessie's PCP referred Jessie to an ENT in Santa Fe. Jessie was then referred to the UNM audiology department and UNM confirmed his hearing loss. On the way home from UNM, Felicia stopped at the School for Deaf and learned about the services available through the Step\*Hi Program. Jessie is doing well. He had an ECEP evaluation last November. He is nineteen months of age and is developmentally at the six month level. Step\*Hi works with entire family and helps Jessie and his brother communicate with each other. He has all the services he needs. Monica Chlastawa asked how Step\*Hi is funded. Answer: NMSD bills Medicaid and has permanent fund income. Monica asked if the program had difficulty recruiting therapists. Kristie stated the program hires developmental specialists with a background in deafness. Step\*Hi works in partnership with the local early intervention program. If the IFSP team recommends therapy, therapy services are provided by the early intervention program. Cindy Faris stated the School for the Blind and Visually Impaired (NMSBVI) is also funded by permanent fund income and bills Medicaid. NMSBVI hires employees with training in vision and does not provide service coordination or therapy services. Andy Gomm stated that even though the state supported schools do not bill state general funds, when they bill Medicaid, state general funds pay the Medicaid match. Cathy Stevenson stated that early intervention is an interagency service system that is not just the responsibility of the DOH and the collaboration between early intervention programs and the state supported schools is great example of the system working at its best. Felicia stated Jessie is also receiving twice a month services from the School for the Blind and Visually Impaired. Monica stated she had been on the ICC for three years and had never heard anything bad about the Step\*Hi Program and the program can be proud of the services provided.

## **UPDATE ON MEETING WITH JERRY ORTIZ Y PINO/DISCUSSION OF LEGISLATIVE STRATEGIES**

Karen Lucero, Chair of the ICC Finance Committee, introduced the following ICC Finance Committee members: Norm Segal, Ron Garcia, Kim Diaz, Rachel Porcher, Monica Chlastawa, Jim Copeland, Maria Varela, and Beverly Bien. Several ICC Finance Committee members met with Senator Ortiz y Pino during the holidays. Senator Ortiz y Pino agreed to carry the FIT Sustainability Bill (Senate Bill 227). If passed, the Sustainability Plan will be put into state statute. Danice Picraux will sponsor the House version of the FIT Sustainability Bill. The Senate Bill is short and to the point. The goal of Senate Bill 227 is not to ask for money but to get the formula into statute.

During the meeting with Senator Ortiz y Pino, a memorial was considered but the Senator strongly advised against a memorial as memorials require a lot of work and have no teeth. The funding formula in the FIT Sustainability Plan consists of the following: a child count is made in August and in May, the numbers are averaged, and the average number is used against the formula to generate a dollar amount. The Legislature will know how much will need to go into SGF to serve the children. Ron Garcia stated strong advocacy is needed from individuals and from agencies. Passage of the bill is a critical step but even if passed, the bill will not solve all FIT funding issues. Maria Varela informed the ICC that she just finished analysis of the bill for HSD. Her analysis stated 74% of

children receiving FIT services are Medicaid eligible and FIT services can minimize the need for future services. The funding formula likely to increase FIT funding due to adequate documentation of need. The bill is being followed by ADDCP. Larry Shandler state the NM Legislative website has been updated and it is a good source of information when tracking bill progress and committee meetings. The bill will be going to committees well before the March 9<sup>th</sup> FIT Awareness Day event so it is very important for everyone to contact our Legislators and attend bill hearings whenever we can. If our legislator is on a committee that will hear the bill, they are more likely to consider our input. A companion funding bill will also be developed to request the \$5.9 million needed and the ICC Finance Committee will help find a Legislator to sponsor the funding bill. Copies of the bill can be downloaded from the legislative website. Mette Pedersen thanked the ICC Legislative Finance Committee for their hard work and advocacy. Monica Chlastawa asked if we could look up bill analysis on the legislative website. Answer: yes and to access the website go to legis.gov. We can look up a bill by the name of the sponsor or by the bill number. You can also use the website to identify who your legislators are by putting in your zip code. Karen Lucero is the point person regarding the bill and she and other ICC Finance Committee members will be there to offer technical assistance to Senator Ortiz y Pino as he presents the bill.

### **BRAINSTORM SESSION ON FIT EFFICIENCY STRATEGIES**

Jim Copeland stated the ICC would like to identify a number of ideas to help the FIT Program look at the efficiency of its operation and to identify ways to save money so more funds are available to support direct services. The ICC would also like to establish a short term ad hoc committee to look at the brainstormed suggestions, identify additional suggestions, and prioritize the suggestions. The ICC will review the work of the ad hoc committee and make a recommendation to the FIT Program regarding the suggested efficiency strategies. Jim Copeland said he had spoken with Dr. Vigil about this and Dr. Vigil is supportive of the idea. Jim provided the following example of a potential FIT efficiency strategy: The Work Force Committee recently had a conference call with NEC\*TAC and it was suggested that Head Start/Early Head Start folks implement some of the activities suggested by developmental specialists and therapists when Early Head Start/Head Start programs are also providing services to FIT children/families. The ICC was reminded that there should be no editing of or comments regarding the brainstormed strategies.

#### Brainstormed List

- ◇ Do away with Three Year Old Choice Law
- ◇ Refine how Part C federal monies spent on infrastructure
- ◇ Able to provide services in group settings in community with higher group reimbursement rate
- ◇ Use a family's medical insurance to pay for initial evaluation for all children (both eligible and non-eligible)
- ◇ Allow family sliding scale fee
- ◇ Restrict eligibility
- ◇ Tighten eligibility for children at risk
- ◇ Don't serve three year olds
- ◇ Use video technology for conducting meetings, etc.
- ◇ Cap contracting fees across all FIT Medicaid and waiver programs
- ◇ Lower hours on prior authorization
- ◇ Provide a different package of services to children at risk and their families
- ◇ Don't provide medically necessary therapy (only provide developmental therapy)
- ◇ Reach understanding with SALUD regarding which system should be paying for medically necessary therapy

- ◇ Control cost shifting between state departments
- ◇ Partner with CMS and leverage CMS medical case management
- ◇ Utilize associate level therapists and provide needed supervision
- ◇ Work with educational institutions in terms of financial incentives for therapists to work in FIT Program (e.g., reduction in student loans, tax credits, etc.). Introduce/support legislation that provides tax incentives for therapists
- ◇ Allow rural programs to serve children in their program's child care setting
- ◇ Only provide services recommended by the evaluation team / IFSP team
- ◇ Have a medical expert available to support families in working with their insurance agencies to pay for services (ex. flexible spending account; how to request coverage)
- ◇ Have funding from CYFD/share staff/have a more formal understanding of how to work together regarding CAPTA referrals
- ◇ Use video technology to deliver specialized therapies
- ◇ Reduce paperwork requirements to allow staff to have more billable hours
- ◇ Increase cap on private insurance legislation
- ◇ Have access to state attorneys to address legal questions/issues regarding CAPTA referrals
- ◇ Invite representatives/senators invited yearly to an open house at EI programs to speak to/listen to families
- ◇ Consider different staffing models and staffing ratios
- ◇ Consider ability of a Developmental Specialist I to do home visits without supervision

The ad hoc committee will meet in Santa Fe on February 12, from 9:30 am to 4:00 pm. The committee will evaluate, add to, prioritize list and develop recommendations for ICC endorsement. Once endorsed, the ICC will forward the recommendations to the Department of Health/Family Infant Toddler Program. Cathy Stevenson stated she will let Mickey and Katrina know that these recommendations will be coming. Andy Gomm will ask Jennifer Thorne-Lehman to facilitate the meeting of the Ad Hoc Committee.

***MOTION: Rachel Porcher moved that the ICC authorized the ICC Executive Committee to review and accept the ad hoc committee's recommendations on behalf of the ICC and then forward them to the DOH/FIT Program for review and consideration. Cindy Faris seconded the motion. The motion passed. There were no objections or abstentions.***

## **PART C REGULATIONS**

Andy Gomm informed the ICC that it was anticipated that the Federal Part C Regulations would be published by now. The new administration has put a hold on any changes in regulations. Federal Part C Regulation should be forthcoming in the next few weeks. There have been no changes in State regulations as yet because the DOH/FIT Program wanted to assure that State Part C regulations would be in accordance with the federal regulations. Once the changes in State regulations are made, Andy asked the ICC for ideas on how to promulgate these regulations. The following ideas were suggested:

- ◇ Host or work in partnership with the DDPC to hold regional forums around the state to obtain public input. Forums are a good way to obtain community input and understanding
- ◇ Utilize FIT regional meetings to hold the forums
- ◇ Hold forums in early evening hours so families are better able to participate
- ◇ Wait until federal regulations are published and then obtain the side by side documents developed by groups such as NEC\*TAC to help people understand the federal changes
- ◇ Offer an on-line opportunity to comment as well as see other comments

Andy stated the State Part C regulations would provide more detail than the federal regulations. Major changes in federal regulations are not anticipated. It was suggested that an ICC ad hoc committee be formed to review the draft State regulations before the April ICC meeting. Karen Lucero and Cathy Stevenson suggested that the selected strategies regarding FIT efficiencies be incorporated into the draft State regulations. The ICC will vote on the draft State regulations at the April ICC meeting. The FIT Program will hold statewide forums to obtain input from parents and providers regarding the proposed changes to the State regulations. Once the statewide forums are completed, a formal meeting will be held.

### **Changes to The FIT Website**

Patti Ramsey presented sections of the interactive FIT website that is targeted to parents. The ICC commended Patti and the ICC Child Find/Developmental Screening Committee for the user friendly changes to the website. Tiffani Lovell, Co-chair of the ICC Child Find Committee, requested feedback from the ICC regarding using the recently developed FIT rack card and continuing with the planned development of FIT refrigerator magnets. Tiffani expressed concern that FIT public awareness materials may not be used because of concerns that funding is not supporting the growth in the program. Andy Gomm stated program growth indicates public awareness materials are being used and OSEP requires the State to do public awareness. Krista Scott Plionis stated CMS uses FIT awareness materials during child find activities. Andy stated the new contracts with early intervention providers require that providers identify targets in their public awareness plans. The ICC expressed support of continued public awareness efforts. The ICC Child Find/Developmental Screening Committee will utilize their next meeting to discuss distribution of the FIT rack cards.

### **Annual Performance Report**

Andy Gomm and Patti Ramsey presented using a power point display of the Annual Performance Report. Hard copies were not available as the DOH copier was not working. Copies are available on the DOH website. Andy asked ICC members to email him if they wanted a hard copy mailed to them. Andy informed the ICC that the FIT Program has to report to the US Office of Education and at the local level in New Mexico. It was suggested that future reports include progress data for programs. Monica Chlastawa asked if parents are interested in the information contained in the report. Answer: some parents are interested and they can utilize the information contained in the report to talk with their program to share both kudos and concerns. Jim Copeland expressed concern that the report can present agencies in a negative manner. Jim stated low performance by an agency is reflective of a number of issues. Cathy Stevenson suggested that the ICC pull statewide indicators from the report and evaluate how the system is improving over time. Mette Pedersen asked if the FIT KIDS data system helps programs report more accurately on timeliness of services. Answer: programs can't yet access all of the reports and have to obtain these reports from FIT. Reports will become available on the website and as a PDF file. The ICC commended Patti Ramsey for her work on the report. Jyl Adair stated her program is going through CARF and the program uses their program information from the report to send to families enrolled in their program. Cathy Stevenson suggested that the report be divided into a word file with a separate file for each agency. FIT Program will do this and send each provider their file by February 20. Judy Paiz asked if the report contains an Executive Summary that abstracts lessons learned or direction for the future. Andy replied that FIT will add an Executive Summary with trends (strides/struggles) to future reports. Identification of trends will help us target our resources.

### **Family Outcome Survey**

Monica Chlastawa and Lisa Chavez presented. As the December meeting, the ICC requested that a small group of ICC parents meet with FIT to look at the current survey and make suggestions for change. A meeting was held via a phone conference. The group looked at the surveys used in several states. The group selected a one page survey format (with front and back questions). A number of questions used in the previous FIT survey were eliminated and some questions were re-phrased to make it easier for parents to understand what they were being asked. Color was added. OSEP only requires that FIT send survey responses by provider to questions 13, 14, and 15. The ICC was asked how the ICC and FIT could utilize the additional information provided by the other questions. It was decided that the responses would help identify how families view the benefits of their services. Ann Borrego suggested that the question "How old was your child when he/she was referred to early intervention?" be added to the survey. Monica asked if the ICC liked the look of the draft survey and the number of questions. Answer: Yes. Andy will consult with Trish Peebles at the CDD regarding the use of responses "Don't Know" or "No Opinion". Paula Seanez stated it would be helpful to have scan tron software available to score surveys. Lisa Chavez asked that the collated answers to question 17 could be provided to Tiffani Lovell as the Co-chair of the ICC Child Find/Developmental Screening Committee. Andy stated the committee can get better information from the FIT data base (by county and by provider) and Tiffani can request the information from Patti Ramsey. Andy will add a place for parents to note their recommendations on how to improve system. Paula Seanez suggested that survey wording be condensed where possible (e.g., don't keep repeating my service coordinator). Andy stated FIT has a couple of weeks to complete the final version of the survey and asked that ICC members to email him with any additional input. Monica commended Andy for taking the input from the small group and formulating the questions on the draft survey. ***MOTION: Ann Borrego moved that Andy Gomm will move forward with completing the edits to the draft survey as discussed. Paula Seanez seconded the motion. The motion passed. There were no objections or abstentions.***

### **MEETING EVALUATION AND ADJOURNMENT**

Jim Copeland distributed meeting evaluation forms. He adjourned the meeting at 4:05 pm.