

INTERAGENCY COORDINATING COUNCIL (ICC)



NOVEMBER 16, 2010 MEETING MINUTES

MEMBERS/APPOINTEES PRESENT

Jim Copeland, Rachel Porcher, Jyl Adair, Jaime Diaz, Cindy Faris, Andrea Leon, Karen Lucero, Mette Pedersen, Paula Seanez, Ida M. Tewa, Maria Varela, Lisa Chavez, Arlene Waters, Robin Wells, Janis Gonzales, Lourdes Vizcarra, Jane Larson, Anna Otero Hatanaka, Cathy Stevenson (pm)

PROXIES PRESENT

Lourdes Vizcarra Proxy for Laurence Shandler, Andy Gomm Proxy for Cathy Stevenson (am), Karen Ziegler Proxy for Nancy Treat

MEMBERS/APPOINTEES ABSENT

Joseph Sanchez, Denise Balderas, Senator Gerald Ortiz y Pino

OVERVIEW

Jim Copeland, ICC Chair, welcomed members and guests to the meeting. Jim asked for introductions. Jim requested approval of the meeting agenda. Andy Gomm asked that a presentation on the FIT audit results be added to the meeting agenda in lieu of the scheduled presentation on changes to FIT Regulations which will moved to the January meeting.

MOTION: Rachel Porcher moved to approve the meeting agenda as amended. Cindy Faris seconded the motion. There were no abstentions or objections. The motion passed. Jim Copeland stated he has sent information letters about the mission of the ICC and the need for the Governor to appoint a membership that reflects federal regulations to both gubernatorial candidates. Brian Moore, who is working on the transition from Governor Richardson to Governor Martinez, responded to Jim's letter. Brian informed Jim that he would try to stop by the ICC meeting later today if his schedule permits.

CONSENT AGENDA

Jim Copeland asked for approval of the following documents on the consent agenda: June ICC Meeting Minutes, June ICC/IDEA Panel Joint Meeting Minutes, ICC Retreat Minutes and ICC Bylaws. Jim stated he will forward copies of the ICC Financial Report following the meeting. Arlene Waters and several other members expressed appreciation for ZIA's management of the ICC's budget. ***MOTION: Cindy Faris made a motion to approve the documents in the consent agenda with the exception of the ICC Financial Report which will be emailed following the meeting. Mette Pedersen seconded the motion. During discussion of the motion, Karen Lucero asked how the option of ICC Co-Chairs is addressed in the Bylaws. Jim Copeland replied the ICC added the ICC Co-Chair option to the Bylaws at the ICC***

Retreat. Jim stated the ICC leadership structure will be discussed later in the meeting. There were no objections or abstentions to the motion. The motion passed.

ICC VOTE ON PARENT REPRESENTATIVES

Jim Copeland asked the two candidates for the open ICC parent representative positions to talk with the ICC about their interest in and qualifications for the positions. Stephani Greathouse informed the ICC that her son, Cash, is 1 $\frac{1}{2}$ years old. The family receives services from the FIT Program. Stephani expressed her appreciation for FIT early intervention services and stated the services help Cash as well as help the family support Cash's development. The family receives services from NMSBVI, NMSD Step*Hi and Los Pasitos. Stephani stated she is active in her community and she has shared information about the benefits of early intervention services with other families.

Cathy Salazar stated she is the parent of nine children, six of whom are adopted. Five out of six of her adopted children have received early intervention services. Cathy said she is a big believer in early intervention services and she is an advocate for children and adults with special needs. Cathy shared the names of the other organizations she is a member of.

Jim Copeland asked the ICC if they had questions. Mette Pedersen asked how many parent vacancies there were. There are two vacancies. Jim informed the parent candidates that once the ICC votes, the selected candidate(s) will be able to participate in today's meeting which includes voting on motions. Andy Gomm asked Stephani if she has had the opportunity to meet other parents of children receiving FIT services. Stephani replied that she has met other parents through activities at Los Pasitos and through two NMSBVI conferences. Andy stated it is very helpful for ICC parent representatives to talk with other parents from their communities prior to ICC meetings in order to represent not only themselves as parents but to represent these other parents. Jim stated the ICC would vote on the parent representative positions when they vote on the ICC Leadership positions.

ICC VOTE ON OFFICERS

Jim Copeland informed the ICC that four ICC members, three parents and one provider, had put in their names for ICC leadership positions. Jim stated he had talked with the three parents who were running and each parent had stated they would be comfortable serving as Chair or Co-Chair of the ICC. Jim said there is no provision in the Bylaws that states a parent has to immediately follow a provider in a leadership position. The Bylaws state that the leadership has to be comprised of a parent and an early intervention provider. Jim stated the candidates will talk about their interest in and commitment to a leadership position and then the ICC will hold a discussion about the Chair, Vice-Chair, Co-Chair options.

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Lisa Chavez stated an ICC leadership position is a very important role on the ICC and she thought a long time before applying. Lisa said each of the parent candidates would bring unique skills to a leadership position. Lisa said she was willing to serve as Co-Chair or Vice-Chair.

Andrea Leon stated the decision to apply was not an easy one. Andrea said she interacts with a large number of parents and agencies in her position at PRO and would therefore be able to represent different viewpoints. Her family's first experience with early intervention services was great but their second experience was not so positive. Andrea stated she is able to advocate for the early intervention system in a positive manner.

Tiffani Lovell stated she had been on the ICC for five years and both of her children received early intervention services. Tiffani would be willing to serve as Co-Chair or Vice Chair. Tiffani stated she would bring some accounting insight to the position.

Karen Lucero stated she had been an ICC member for five years and it has been an honor to work with the tremendous talent on the ICC. Karen said it would be wonderful to serve in a leadership capacity with any of these parents. Karen stated she would prefer the Chair / Vice-Chair option as the roles and responsibilities would be easier to determine. Karen briefly highlighted some of the major accomplishments made by the ICC in the past few years and she stated the ICC has been an effective group. She thanked Andy Gomm for following through with ICC recommendations. Karen commended Jim Copeland for reaching out to the new gubernatorial administration.

Jim reviewed the ballot. Jim asked the ICC if anyone would be interested in serving as an Executive Committee Member at Large. Parent candidates for the ICC officer positions who were not selected would also be eligible for this position. Rachel Porcher discussed the purpose of the Member at Large position on the Executive Committee. Rachel was the first to serve in the position. The position was originally designed to provide a balance of parent and provider representation on the Executive Committee and create more opportunities for parent leadership. Rachel reviewed the functions of the Executive Committee. Rachel stated the Chair, or the Co-Chairs, would have interaction with the Secretary of DOH and with the FIT Program Manager. The Chair, or Co-Chairs, would also attend some functions at the Roundhouse such as FIT Awareness Day as well as attending some Legislative Committee meetings. Mette Pedersen asked if any ICC member could participate on the Executive Committee. Executive Committee meetings are not private and any ICC member could attend an Executive Committee meeting. Jane Larson asked if the ICC could postpone a vote on the Executive Committee Member at Large. Andy Gomm stated that it would be better to not postpone the vote. Arlene Waters and Mette Pedersen stated they would like to add their names to the ballot to be considered for the Executive Committee Member at Large position. Rachel Porcher stated she would like to see the ICC officers be Co-Chairs. Jane Larson agreed. Jane stated she and Rachel worked as Co-Chairs when they were Chair and Co-Chair. Cindy Faris suggested that the ICC use the voting

form to vote for the Chair, Vice Chair or Co-Chair options. The ICC voted and ballots were counted by Peggy Denson, Executive Director of ZIA Therapy Center and Kathey Phoenix-Doyle, FIT Program Metro Regional Manager. Jim Copeland announced that the ICC had voted for Lisa Chavez and Karen Lucero to serve as Co-Chairs and Mette Pedersen to serve as the Executive Committee Member at Large. The ICC also voted for the two parent representatives, Stephani Greathouse and Cathy Salazar.

ICC FIT LEAD AGENCY REPORT

Andy Gomm presented. The fiscal year runs from July 1 through June 30. The report is for the first quarter of this fiscal year. Andy reviewed the funding revenues. Medicaid billing is being maximized. DOH pays a Medicaid match. AARA State Incentive Grant funds have to be used for kids who stay in the FIT Program past their third birthday and who are eligible for Part B but not eligible for Medicaid. The FIT Program has a healthy budget this fiscal year. Next fiscal year, FIT will experience budget concerns because the Medicaid Match will increase by \$.09 on the dollar, there will be no new state general funds, and AARA funds will have ended. The FIT Program asked for and received approval from OSEP to use ARRA State Incentive Grant for system improvement projects. FIT awarded a half million dollars in mini-grants to provider agencies for a one time purchase of items such as hearing screening equipment, etc. There are still about $\frac{1}{2}$ of the provider agencies who have not spent any or spent only a partial amount of their mini-grant monies. Andy asked if the ICC could develop and disseminate any information (ex. obtaining a line of credit from a bank) that might help provider agencies expend their mini-grant funds. The issue for provider agencies is they have to spend the money first and then be reimbursed by FIT. FIT will reimburse providers within a month. Arlene Waters asked if provider agencies have to spend their money by a certain time frame so any unspent funds could be awarded to other provider agencies. Andy Gomm replied that the FIT Program will be re-assigning \$3.7 million to other providers. For example, UNM will receive \$1.7 million to train providers on the use of assistive technology. Andy Gomm asked Jim Copeland, as the ICC Chair, to send an email to the provider agencies that have not applied for the funding. Stephani Greathouse asked what is preventing providers from applying for or from spending their mini-grant funds. Andy replied it is a cash flow issue. Stephani asked for examples of the type of strategies that might help providers expend their funds. Jyl Adair stated her program expended their funds in sections. Mette Pedersen stated UNM has not yet received official notification that their funds could be spent. Jim Copeland suggested that the purchase of the equipment could flow through ZIA Therapy Center. Andy Gomm stated this was a great idea and the FIT Program could set it up so that ZIA would not be responsible for repairing any purchased equipment. Andy stated FIT's ability to bill Medicaid retroactively resulting in \$1,595,815 profits. FIT will also be able to use any money collected from insurance revenues that exceed anticipated estimates. In the past, the FIT Program was not able to keep insurance revenues that exceeded estimated revenues.

Andy stated the number of children served per month has begun to decrease which indicates that the changes to eligibility are resulting in less children served. This is good because FIT will need to spend less money next fiscal year. Mette Pedersen asked Andy to include data by provider and by county. Arlene Waters stated the enrollment in their program drops off in the fall. Jane Larson stated NAPPR had a huge drop in enrollment in September because children at risk were transitioned. Jane Larson stated cost containment is working for the FIT Program but it is hurting service providers. Cathy Salazar stated there was a push to transition three year olds that would formerly have stayed in FIT for another year. Rachel Porcher reminded Andy to add vital statistics data to future reports.

Parent Panel

Andrea Leon introduced Cherie. Cherie's son Hyrum was born premature and weighed one (1) pound at birth. Hyrum was referred to early intervention through the UNM NICU discharge process. The referral process was easy. Cherie knew that Hyrum would be delayed. Cherie was quickly contacted by the early intervention program. She likes the convenience of home visits. The family had a lot of questions during the evaluation but did not know how to ask them. Their service coordinator explained the program and the services that were available. The family was confused about how the IFSP worked. They were "shocked to find out services were free". The family was concerned about Hyrum's developmental delay and their service providers shared helpful developmental expectations. Services have helped the family support Hyrum's development. Hyrum wants to do all the things his brother can do. He has made a lot of progress. He is healthy, runs, talks, and is now jumping with both feet. Hyrum will be transitioned in December. Cherie stated their service coordinator explained the IFSP and has been very helpful. Cherie has encouraged friends to bring their children to the program. Cherie said they were "scared to bring home such a small baby". The family had so many questions about how prematurity would affect Hyrum's development. Cherie said she was scared to ask some questions because she wondered if she should already know the answer. Cherie's older son was born in January and she found out she was pregnant with Hyrum in August. She started receiving prenatal care when she was about 5 months pregnant. Cherie had two visits with the doctor and then went into labor and had an emergency C section. Cherie said she was not informed about early intervention services until about one week before Hyrum was discharged from the hospital. Cherie stated there is no such thing as too much information. Parents take what they can use and may need to hear information more than once.

Andrea introduced Ruby. Ruby's son Ricky is now 36 months old. The family lives in Belen and they started receiving early intervention services when Ricky was six months old. Ricky was born premature. His doctor referred the family to early intervention. Services started within three weeks of the IFSP meeting. Ricky has made a lot of progress. Ruby provides translation services for agencies and she already had some knowledge about early intervention services. Their service providers shared helpful strategies such as how to massage Ricky. Parents were concerned about starting speech services. They were afraid that Ricky would experience

confusion at being exposed to English and Spanish. Ruby stated their early intervention team is preparing the family for transition. The school district has evaluated Ricky. The family decided to continue in early intervention until Ricky turns 3 in March 2011. Ruby thanked the DOH for their early intervention services. The program helped Ricky so much. There are no programs like this in Mexico. Ruby stated monolingual Spanish families may not understand about the benefits of the program because of the language barrier. These families may fear that the services will cost money because the services would not be free in Mexico. Communication issues are a big barrier to monolingual Spanish families accessing services.

Andrea introduced Jenny. Jenny has older children and a 20 month old son who receives early intervention services. Jenny's son was born premature at Lovelace and weighed 2 lbs. 4 ounces at birth. One of the Lovelace doctors talked with the family about early intervention. The family wanted to wait to start services until after their child was released from the hospital. After he was released, a person came to the family's home and discussed the program and the services available. Jenny's son was released from the hospital while still on oxygen. Services were very helpful and services included service coordination and physical therapy. The PT noticed that Jenny's son was having difficulty breathing. The PT started making weekly visits and helped the family calm their son and support his breathing. Jenny stated their son has improved so much. The family is really grateful for the program. Jenny stated she is learning a lot from her service providers. Jenny said service providers should keep doing what they are doing and keep providing the information. Jim Copeland thanked the parents on behalf of the ICC and invited them to join the ICC for lunch.

ICC STRATEGIC PLAN

ICC Committee Chairs highlighted their 2011 committee action plans:

Professional Development and Support

Mette Pedersen presented for Nancy Treat. The Committee will have a new FIT staff person, Kathey Phoenix-Doyle. The committee has been working hard to impact higher education. Last year, committee members worked with CNM to develop FIT AA level courses which were launched this fall. The class was filled immediately. CNM will offer a second section next spring. Robin Wells, committee member and Chair of Higher Ed Task Force, stated the goal is to have the next course developed by May/June of 2011 and then offered on line in the fall of 2011. The CDD has started offering training on the Primary Provider Model. Andy Gomm asked the committee to consider forming an advisory group to discuss issues surrounding implementation of the Primary Provider Model. Mette replied the committee will consider this request at their January meeting. Jim Copeland asked if UNM students have to enroll at Eastern because the bachelor's degree is offered at Eastern. Robin Wells replied that all of CNM course work would transfer. The challenge is a university's ability to offer coursework so universities need to be open to having credits transferred from one university to another. All FIT coursework will be online. Eastern NM University has a robust online program. Online students do miss the live connection with faculty and other students. Robin helps to address this with her students by

requiring that they schedule a SKYPE appointment with their professors. The State infrastructure does not support all distance learning needs. Andy Gomm stated the annual FIT conference has been combined with the NMAEYC conference which will be held in March 2011. There will be an early childhood strand in the conference. Anna Otero Hatanaka asked if the conference is free. Andy replied the conference will not be free but there will be some scholarships available. Joe Lombardi, who is over the health and human services program, will be the key note speaker. Mette Pedersen stated a reception will be held at the CDD and FIT Program information and FIT coursework information will be displayed. Jaime Diaz stated the NM Head Start conference is held around November 7 of each year and there is a lot of information about infants and young children provided during the conference

Quality Assurance

Rachel Porcher reported. Changes to FIT KIDS should meet provider needs at this time. The committee has received and analyzed the requested data and most providers have improved significantly. Therefore, the committee had decided to not develop mentoring relationships but will do things such as developing FAQs for providers. Providers will be asked to share what is working well with other providers. Ways to share include: regional meeting, ECN blog, etc. The committee may not be able to impact Indicator 5 & 6. The committee is still considering provider surveys and may distribute these using the FIT Coordinators List Serve as it would be a better option than Survey Monkey. A handbook for contractors to help them understand the FIT system is in development.

Child Identification

Lourdes Vizcarra reported. Tiffani Lovell has resigned as Committee Co-Chair. Alvino Sandoval from EPICS will be joining the committee. The committee is focusing on three critical issues: Developmental Screening; distribution of FIT materials and interagency collaboration. The committee is asking ICC members to help distribute FIT materials around the state. Several boxes of FIT materials were brought to the ICC meeting and members were asked to take the amount of materials they could distribute in their community. Lourdes recently sent a request via the ICC List Serve asking ICC members to list their membership/affiliation with other agencies. Lourdes will send the list again. Anna Otero Hatanaka asked if FIT calendars would be available to distribute to members of the legislature. Lourdes replied they would be available. Anna stated 120 copies will be needed and each copy has to be in an envelope. Cindy Faris thanked Verna Trujillo for her work with the committee.

Finance

Karen Lucero reported. Committee leadership met with Secretary Vigil to discuss changing the statute so that services to three year olds would end on each child's third birthday and to discuss opening the insurance legislation. The DOH gave the okay for the Committee to pursue these options. The next step is for the committee to meet with insurance representatives. The committee is also exploring a possible change to the level of service required for prior

authorization. The committee is exploring other funding options: autism, infant mental health and behavioral health. Karen stated she will be stepping down as Chair of the Committee. Anna Otero Hatanaka suggested that the committee select a chair from its membership. It is required that an ICC Committee Chair be an ICC member. Karen stated she will schedule a meeting of the Finance Committee between now and January. Anna recommended that the committee not proceed with opening the insurance legislation if the insurance representatives are not supportive. A meeting with the Deputy Secretary of Public Education will need to be held. Andy Gomm stated it would be possible to meet with Denise Koscielniak but we will have to wait until the new administration comes in. Anna stated she will continue to meet with the legislative leadership. Andy Gomm stated we don't know what the legislative session will bring. ICC members will need to go to the Roundhouse to fight any potential cuts. Jim Copeland stated now is the time to start contacting senators and representatives and remind them that the FIT Program supports 13,000 kids and their families. Anna said it is important to let legislators know that the FIT Program has already made some cuts to eligibility. Anna stated the ADDCP is not going forward with any legislation for FIT or the DD Waiver. The message from ADDCP for the upcoming legislative session will be "Thanks for all your past support and please hold us harmless from cuts as much as you can." Mette Pedersen requested that a FAQ sheet about the benefits of FIT services be developed. The FAQ sheet should contain the fact that FIT services only cost the state approximately \$2,800 per child per year. Jane Larson suggested the fact sheet include the fact that at-risk services have been reduced. Anna Marie suggested that family quotes about the benefits of early intervention services be included. Family stories are so powerful. Newspapers could be contacted and family stories could be highlighted. Jane Larson asked if the ICC could request that newspapers cover family stories. Early Childhood Day at the Legislature is January 24. The ICC Coordinator will contact Claire Dudley about a table. Anna asked the ICC to consider a separate press conference for the FIT Program during the Legislative session. ***MOTION: Rachel Porcher moved to accept the ICC Strategic Plan as amended. Jane Larson seconded the motion. There were no objections or abstentions. The motion passed.***

APR 2009-2010 RESULTS

Patti Ramsey presented using a power point presentation. OSEP has asked NM to extend our current plan for two more years since federal regulations are still not out. Patti stated that during the presentation, the ICC will be asked to set targets for performance indicators. Andy Gomm stated the FIT Program completes the required Annual Performance Report (APR) on 14 indicators. FIT has reported progress for the past five (5) years. Information in the APR is obtained from early intervention service provider agencies that report to FIT on specific data points in addition to information gathered from the FIT KIDS data base. FIT will report to OSEP in February 2011 regarding last fiscal year. Data will be available live on the FIT website this week.

Patti stated there are compliance indicators in which a state is expected to achieve 100% compliance and performance indicators in which states set their targets. Patti presented the Compliance Indicators and NM's performance as follows for the past five years:

- Indicator 1 - NM dropped a bit in FY 10.
- Indicator 2 - NM improved each year.
- Indicator 7 - NM improved each year.
- Indicator 8 a & 8 c - NM had significant improvement.
- Indicator 14 - NM had 99% compliance in FY 10.

Patti presented the Performance Indicators and asked the ICC to select a target for each indicator for FY 12 and FY 13:

Indicator 2 - Natural Environments

The ICC selected the target of 98.5 for FY 10. Andy Gomm stated the FIT Program may be forced to do more center based services due to continued budget constraints (e.g. if Medicaid has to drastically cut the rate). Patti stated it is better to set a target we can meet than to set a target and not be able to meet it. Arlene Waters suggested that we set our target the same as the national average. Jaime Diaz suggested that we set our target at 95%.

MOTION: Jane Larson made a motion that the target for Performance Indicator 2 is to be 95% for FY 12 and 95% for FY 13. Paula Seanez seconded the motion. There were no objections or abstentions. The motion passed.

Indicator 3 - Early Childhood Outcomes "Not At Risk"

Outcome A-Summary Statement 1: Patti stated this does not include children at risk. Patti stated there is data on this indicator for the past three years and the data most likely contains some mistakes. Patti said she is most confident about the data from FY 09 and FY 10. There is a NM research group working with a group of participating providers to determine if the research group obtains a similar ECO rating to the rating obtained by the participating providers. The research group will provide a report in about one year. Patti suggested that the ICC set conservative targets. Jane Larson agreed with Patti's target recommendations.

MOTION: Jane Larson made a motion to accept the targets for FY 12 and FY 13 suggested by Patti Ramsey for Outcome A - Summary Statements 1 and 2; Outcome B - Summary Statements 1 and 2; and Outcome C - Summary Statements 1 and 2 for children not at risk and for the at risk children. Mette Pedersen seconded the motion. There were no objections or abstentions. The motion passed. The targets approved in the above motion for Indicator 3 are as follows:

Outcome A-Summary Statement 1 - FY 12: **68.9%** and FY 13: **69%**

Outcome A -Summary Statement 2-FY 12: **62.8%** and FY 13: **62.9%**

Outcome B-Summary Statement 1- FY 12: **72.4%** and FY 13: **72.5%**

Outcome B-Summary Statement 2-FY 12: **62.5%** and FY 13: **62.6%**

Outcome C-Summary Statement 1-FY 12: **71.6%** and FY 13: **71.7%**

Outcome C-Summary Statement 2-FY 12: **61.7%** and FY 13: **61.8%**

Indicator 3-Early Childhood Outcomes "At Risk Only"

Outcome A-Summary Statement 1 - FY 12: **68.3%** and FY 13: **68.4%**

Outcome A -Summary Statement 2-FY 12: **78.3%** and FY 13: **78.4%**

Outcome B-Summary Statement 1- FY 12: **72.6%** and FY 13: **72.7%**

Outcome B-Summary Statement 2-FY 12: **77.2%** and FY 13: **77.3%**

Outcome C-Summary Statement 1-FY 12: **71.5%** and FY 13: **71.6%**

Outcome C-Summary Statement 2-FY 12: **76%** and FY 13: **76.1%**

Indicator 4-Family Outcomes

Outcome A-Families know their rights.

MOTION: Rachel Porcher made a motion that the targets for FY 12 and FY 13 will be the same as the national average of 84.3%. Jyl Adair seconded the motion. There were no objections or abstentions. The motion carried.

Outcome B- Families are able to communicate about their child's needs.

MOTION: Rachel Porcher made a motion that the target for FY 12 is 90% and FY 13 will be 92%. Jyl Adair seconded the motion. There were no objections or abstentions. The motion carried.

Outcome C-Families helped their child develop and learn.

MOTION: Rachel Porcher made a motion that the target for FY 12 will be 94% and the target for FY 13 will be 95%. Jyl Adair seconded the motion. There were no objections or abstentions. The motion carried.

Indicator 5: Children Served Birth to One

Patti stated she did not recommend increasing the targets because of the changes made to services for children at risk. Patti stated NM is far above the national average. Andy Gomm stated NM is one of the top three states when at risk children are included. **MOTION: Rachel Porcher made a motion to accept Patti Ramsey's suggested target of 2.42% for FY 12 and FY 13. Lisa Chavez seconded the motion. There were no objections or abstentions. The motion carried.**

Indicator 6: Children Served Birth to Three

MOTION: Rachel Porcher moved that we accept Patti's suggested target of 4.89% for FY 12 and FY 13. Lisa Chavez seconded the motion. There were no objections or abstentions. The motion carried.

APR RESULTS

Andy Gomm and Patti Ramsey presented. Andy stated the FIT Program uses Annual Performance Results (APR) to determine which programs need focused monitoring. Focused monitoring is designed to help an agency identify the underlying causes of their non-compliance. Patti Ramsey also uses APR results to show OSEP that providers have come into compliance within the required one year time frame. Patti discussed APR trends from FY 06 through FY 10.

Providers have made huge improvements. Anna Otero Hatanaka asked Andy where the APR data came from. Andy replied the data is derived from provider reports and from the FIT KIDS data base. Andy stated the FIT Program will be checking on providers that have a high percentage of compliance based on family reasons. Andy asked ICC members and meeting guests to not share the APR data until after the data goes out to the providers tomorrow. A draft of the FIT Program's APR will be sent to the ICC prior to the January meeting.

RECOGNITION OF SERVICE

The new ICC Co-Chairs presented certificates of appreciation to Jim Copeland whose term as Chair ended with this meeting and to Rachel Porcher whose membership ends in December. Rachel has been an ICC member for eight years and during this time Rachel served as ICC Chair, Vice Chair, Past Chair, and Executive Committee Member at Large. Jim and Rachel have provided outstanding leadership and commitment to effective and sustainable early intervention services.

EVALUATION TOOLS SUBCOMMITTEE RECOMMENDATIONS

Holly Harrison and Andy Gomm presented. Holly and Mary Zaremba assisted the subcommittee. Secretary Vigil had asked the FIT Program to look at the tools early intervention programs were using to determine a child's eligibility for FIT services. The subcommittee was formed and membership includes a number of ICC members. The subcommittee met three times and still has several tasks to complete. The subcommittee developed a matrix and ended up with 15 criteria that should be included in a statewide evaluation tool. Andy reviewed the matrix, committee process and recommendations. The Committee had asked for more time to complete their work and Dr. Vigil extended their time to February 2011. Andy asked the ICC to endorse the subcommittee's recommendations so the recommendations could be presented to Secretary Vigil in a meeting tomorrow afternoon. Andy reviewed recommended next steps. The ICC made the following recommendations: adhere to Dr. Vigil's February timeline for those 24 providers who are already using the IDA and then take the rest of this fiscal year to help the providers who are not yet using the IDA purchase and learn to use the tool. Jane Larson stated that if providers are required to use the tool by February 28, her program has only one IDA kit and would need more. Jane suggested that providers be required to purchase IDAs before being required to use the tool. Andy Gomm stated a number of scoring protocols will also need to be purchased. Karen Lucero expressed concern that the Self Help section of the IDA is weak. Andy replied it would be okay for an evaluation team member to use any valid tool, parent report, and informed clinical opinion in combination with the IDA. Nancy Furgang asked what evaluation standard would be used in the NICU for preterm babies. Andy suggested that someone from Nancy's program participate on the subcommittee. ***Jim Copeland asked the ICC for consensus on the following: report and the timeline as amended by the ICC are to be presented to Dr. Vigil and the issues identified today will be addressed by the Subcommittee. The ICC gave their consensus.***

PRELIMINARY AUDIT ON AT-RISK KIDS

Andy presented a verbal report of the audit that will be presented to Dr. Vigil tomorrow. FIT was asked to assess the implementation of the FIT changes. FIT assessed the status of implementation through the following activities:

- Checked to see if teams have revised IFSPs to comply with change in hours of service for at-risk children. Results: 88% compliance.
- Checked to see if at-risk kids were being exited at or on their third birthday. Results: Looked at 351 children with a provider compliance level of 97%.
- Checked to see if providers were applying the new bio/med criteria. Results: 99%.
- Checked to see if providers were using the ERA Tool use of ERA tool. Results: Looked at 65 children and providers used the tool on 63 of these children.

The above data was obtained by looking at provider reports and FIT KIDS data base information on children determined eligible after July 1. Andy commended providers for making the required changes and stated their implementation has been "amazing". Andy stated that the FIT Program will probably exempt evaluation and assessment services from the 24 hours service maximum for at-risk children. Mette Pedersen suggested that provider compliance with the changes to at-risk services be added to the FAQ. Rachel Porcher asked Andy to include information on how many children were found not to be eligible because of the changes to at-risk services.

ICC MENTORING

Jim Copeland stated ICC members have been given the Mentoring Guidelines. The ICC Coordinator will send out the Mentoring Guidelines again via the List Serve as well as the names of the members who have signed up to be Mentors and Mentees. Mentors and Mentees were asked to contact each other prior to the January meeting and follow the Mentoring Guidelines. The ICC Executive Committee will assign a Mentor to the new parent representatives prior to the January meeting.

MEETING ANNOUNCEMENTS & EVALUATION

New member orientation and facilitator training for members will be held the day before the ICC January meeting. Jim Copeland distributed member and guest meeting evaluation forms. Jim adjourned the meeting at 4:30 pm.

FOLLOW-UP MEETING TASKS / RESPONSIBILITY

Develop a FAQ sheet to be used with Legislators - ICC Executive Committee
Request an ICC display table for Early Childhood Day at Legislature - ICC Coordinator
Contact by Mentors / Mentees prior to January meeting - Mentors / Mentees
Assign Mentor to new ICC parent representatives - ICC Executive Committee
Add children not determined eligible because of changes to at-risk and vital statistics data to the Lead Agency Report - Andy Gomm