

## ***Early Intervention Advisory Council and Stakeholder Meeting***

Meeting Minutes

August 15, 2017

### **I. Call to order**

Lori Mago called to order the regular meeting of the EI Advisory Council and Stakeholder Group at 9:35AM on August 15, 2017 at State Library of Ohio.

### **II. Roll Call**

The sign in sheet was passed out. The following persons were present: Carrie Beier, Kimberly Bolin, Jennifer Bradford, Julie Brem, \*Kellie Brown, Katrina Bush, \*Joyce Calland, \*Tracey Chestnut, \*Jessica Cray/Hayes, Thomas Dannis, Cindy Davis, Nathan DeDino, \*Icilda Dickerson, \*Jessica Dumas, Marilyn Espe-Scherwindt, Diane Fox, Kathy Greenawalt-Cherry, Taylor Hammond, Earnestine Hargett, \*Kim Hauck, Chad Hibbs, Debbie Holycross, Deanna Jackson, Susan Jones, \*Vicki Kelly, Jennifer Kinney, Teresa Kobelt, Laura Maddox, \*Lori Mago, Karen Mintzer, Nithya Narayan, Caley Norton, \*Jennifer Ottley, Haley Phillippi Stefanie Post, \*Jessica Potts, Michele Price, Theresa Towner, Kay Treanor, Lori Watkins, Holly Weatherson, Lisa Welsh, Courtney Yantes

### **III. Approval of minutes from last meeting**

Mago presented the minutes from the last meeting. The minutes were approved as presented. The next meeting will be held November 14, 2017.

### **IV. Open issues**

#### **a) Introductions and DODD updates**

*Central Intake:* Nathan DeDino acknowledged that he was aware there are a lot of questions and concerns related to Central Intake. He indicated that there were 90 minutes in the afternoon set aside to discuss this, including the allocation for local child find, and asked that all attendees save their questions about these topics until after lunch.

*SOP Rule:* The group was informed that the new SOP rule went into effect on August 1, and that all related forms can be accessed on the EI website. DeDino provided an overview of all of the training efforts that have occurred, that are ongoing, and that are planned for the future.

*Transition of Early Track:* DeDino explained that DODD had tentatively planned to transition the EI portion of Early Track to DODD on August 10, but that in order to ensure all the necessary pieces were in place, the transition was delayed for a few weeks. He provided a new tentative date of September 1 as to when the transition will occur and the data system, from then forward known as the Early Intervention Data System (EIDS), would be hosted at DODD and all data entry related to EI would be entered there. There were also questions about how the log in would work, including for existing users, and DeDino provided a general explanation and indicated that we will be doing as much of the work as possible to transfer all current ET user accounts over, and that they would be receiving detailed instructions, including videos, by the end of the week outlining what they need to do to finalize account setups.

*OSEP Visit:* The group was informed that OSEP would be visiting in September 2017 as part of their Differentiated Monitoring System (DMS) to support DODD in implementing and monitoring the fiscal system with the new SOP rule.

*State Systemic Improvement Plan (SSIP):* DeDino informed the group that DODD submitted its Phase III, Year 1 SSIP prior to the April 1 deadline, and that DODD would be receiving feedback from OSEP tentatively the following week via phone call. He indicated that information from the call would be shared with the group at the November meeting.

*Hearing, Vision, and Hospital-Based Child Find Contracts:* DeDino explained that all of these contracts had been competitively bid in the spring and contracts were awarded with a July 1 start date.

*Supporting Ohio's Service Coordinators (SOSC) Process:* DeDino and Diane Fox provided updates about the status of the SOSC process. They explained that the process was delayed slightly from initial plans, but that it is now underway and several county visits are scheduled for August and September. Fox described that another way DODD is supporting Service Coordinators is through a monthly community of practice call for newer Service Coordinators where participants can request topics to discuss and experienced Service Coordinators participate to help provide information and guidance. She also mentioned that DODD is in the process of making updates to the Principles of Service Coordination training as well as developing an evidence-based team training. Additionally, she indicated that early next year, the TA and Training team would be implementing additional support for interventionists, potentially in the form of a CoP or monthly call.

*Parent and Physician Modules:* DeDino thanked the group for their feedback about the Parent module. He indicated that this module is nearly complete, as well as that information about reviewing the Physician module was recently sent around, and the group should be able to access this module through their FIPP Case account.

## **b) Data Discussion and SFY17 Annual Report**

*SFY17 One Page Summary and Annual Report:* DeDino informed the group that in addition to the one page summary document we have been completing the past few years, we would like to create a slightly larger annual report for SFY17 to highlight the work going on in EI in Ohio. He explained that the plan is to include a little more data, as well as some additional information such as family stories and quotes. An example of the SFY16 one page summary was distributed to the group for reference. DeDino stated that the target timeframe for completion and distribution of both the SFY17 one page summary and bigger SFY17 annual report is this autumn. He also mentioned that we are working with our public affairs office regarding the possibility of creating one page summaries for each county.

*County Determinations:* DeDino mentioned that at the May meeting, we had discussed changing the method for making local program determinations. He explained that although we don't have a method locked down yet, that we are taking all of the group's suggestions into account, as well

as working with our federal TA personnel, to ensure our new method not only includes all of the required components, but is also meaningful to everyone involved.

*SSIP Targets:* The group was informed that with all of the other priorities at the current time, the discussion about SSIP targets for intermediate outcomes would be delayed until the November meeting.

#### **c) Review of draft personnel rule**

Fox first presented a PowerPoint to give an overview of the proposed changes to the new Personnel rule as well as describe the feedback DODD was hoping to get from the group. The group then broke out into six smaller groups to discuss the rule. Finally, each group reported on the primary topics discussed, including suggested changes to the rule.

#### **d) Lunch break**

#### **e) Local child find allocation and update on Central Intake**

*Allocation:* DeDino distributed a letter from Kristi Hannan (Lucas county) that outlined her thoughts regarding the local outreach allocation as well as the new Central Coordination process, in general. Kim Hauck then explained DODD has \$1 million to distribute to local programs for local outreach efforts for EI, and that regardless of funding from ODH, DODD is committed to distributing the same amount next year. DeDino briefly explained several possible allocation formulae, including utilizing zero to three population numbers, referrals and child counts, or only referral counts.

Much discussion occurred regarding the benefits and drawbacks of each different type of data and method for making the allocation, as well as what were the appropriate floors and ceilings. The following decisions were made:

- Use SFY17 EI referral counts as the basis for distributing funds
- Implement a floor and a ceiling, but increase the presented floor amount (\$5,000) and decrease the presented ceiling amount (\$50,000/\$75,000)
- Distribute the same amount to each county both years

Hauck informed the group that these funds would be in the form of a subsidy and dispersed quarterly. She indicated that counties would be required to submit quarterly reports which would be completed in EIGS for the second year, and for the first year would likely be submitted to their TA consultants or to Nathan. The group was also informed that DODD wants to allow flexibility to the county regarding how these funds are spent so each county can utilize it how they think is best for EI outreach.

The group had additional discussions about what types of marketing would be done at the Cleveland Sight Center (CSC), including outreach materials for distribution. They indicated that they would like to be informed about CSC's marketing plan before they engage in their own marketing plans so as to not duplicate efforts or materials. They also mentioned that locally, any way counties can collaborate and pool resources will be helpful in overall outreach efforts. Hauck and DeDino informed the group that since this will be a subsidy the funds should be able

to be distributed relatively quickly, and indicated DODD will have the allocation table ready by the end of the week, which will be distributed as soon as it is approved by the department.

One of the attendees thanked DODD for realizing that a significant part of the work at the local level is relational and thus, outreach efforts are essential. Hauck then indicated DODD very much values and appreciates the work done in the field and that the state will continue to support them as best we can.

DeDino and Hauck explained that DODD will send postcards to professional referral sources who made EI referrals in the first six months of 2017. They also explained that DODD developed an EI-specific 8045 form to be used by Service Coordination agencies to make referrals for families with whom they had had direct contact and the family had indicated they were interested in EI.

The group began to ask questions and voice concerns about the new Central Coordination process including: Service Coordinators are using the 8045 form and beginning to serve families, but not seeing the actual referrals in the data system until after the fact; logistics of how to deal with dates of things occurring prior to referrals due to the delay in entry of referrals in the data system; a general lack of referrals being received (approximately 25% of the typical amount); and concerns about the influx of referrals that will occur when data entry is caught up, including the implications this will have on timelines (e.g., meeting 45 day requirements).

*Update on Central Intake:* Sandy Oxley and Jye Breckenridge provided an update on the status of Central Coordination and took questions from the group. Oxley provided an overview that CSC was awarded the Central Coordination grant and took over Central Coordination work as of August 1. She apologized for the issues and thanked the group for their patience. She indicated that ODH had a 90 day transition plan, which was compressed to 30 days.

A summary of the issues experienced so far, as well as some of the factors contributing to them, was discussed. These included several different forms are being submitted to CSC which are sometimes incomplete and/or difficult to read; CSC not having a full understanding of what their duties are regarding entering data and contacting families; and general communication issues. Oxley and Breckenridge indicated CSC has 24 hours to implement a correction plan, and if that was not done, ODH had a backup plan. They also indicated that rather than wait until 90 days after implementation began, the ODH QI Coordinator would start working on the QI plan with CSC next week. They encouraged the group to keep sending e-mails outlining their concerns and issues they are experiencing. Questions/concerns raised by the group included the following:

- A question was asked about to which 14 days were being referred. Breckenridge responded that CSC had a different interpretation of 14 days, and ODH had clarified the correct meaning.
- Concerns were raised about referrals that were pending at the time CSC took over. Breckenridge committed to ensuring all of the previously pending referrals would be taken care of by the end of the week.
- An attendee asked how many staff CSC had, how much they were working, what kind of training they had, and if they met the rule requirements for CC. Breckenridge indicated

they meet the OAC rule personnel requirements for central intake and, additionally, must take the intro to EI training module.

- An attendee mentioned that CSC is the first impression families get of EI and HV and that we want that impression to be as positive as possible.
- An attendee expressed that with the significant decrease in referrals thus far, she hopes CSC has a marketing plan in place and asked “When will we have marketing materials in hand?” Oxley and Breckenridge explained that CSC is contracting with a marketing firm and will share information about the plan as it becomes available.
- An attendee expressed appreciation for shared goals and that it will be helpful to collaborate.
- An attendee asked Oxley and Breckenridge if they could share their backup plan if CSC does not produce a sufficient action plan to address issues. Oxley responded that she would prefer to give CSC an opportunity to produce their plan first. She also indicated she will pull her staff off of other duties to help out if needed.
- Concerns regarding the drop in referrals from Parents and Hospital Based Child Find were specifically mentioned, as these are two of the system’s primary referral sources
- An attendee mentioned that ODH said they would reach out to WIC clinics and asked whether that has happened. Oxley responded that it has not occurred since the transition of Central Coordination, but that those at the local level are welcome to reach out to their local WIC clinics.
- A concern was expressed about incorrect information being received via form 8021, that there have been lots of issues with this form, and that the county worries about sending referral follow up information to the wrong person.
- An attendee asked whether counties would be receiving PCSA forms and indicated that these forms typically contain a lot of helpful information beyond what is required, including vital safety information.
- An attendee reported continued issues with the phone survey – parents have reported being hung up on before getting to the CSC quality assurance survey
- An attendee asked if CC was going to go ahead with the referral form/acknowledge that referrals were received.

#### **f) Assistive Technology Draft Policy Review**

Hauck indicated that since the previous discussion had gone long and there wasn’t much time left, DODD would e-mail the draft Assistive Technology policy to the group.

#### **g) Closing**

Hauck pulled up the EI website to show attendees some of the features discussed throughout the day, including the location of forms, the SFY16 EI one page summary, and advisory council information. She pointed out the photos, stories, and quotes of/from actual Ohio EI families. She also demonstrated the browse aloud feature and indicated it could be utilized for other purposes, at the request of the field. The group provided positive feedback about the website, and Hauck thanked them for their input, reminding them that their input had been very important in the development of the website and in creating the final product.

Attendees were offered the opportunity to provide any updates. One attendee indicated that given all of the issues with referrals at this time, and that the EI service coordination allocation is

based partially on referrals and referral outcomes, that she would really appreciate us taking these things into consideration when creating the allocation table for next year's EI service coordination contract. No further updates were provided.

**V. Adjournment**

The meeting adjourned at 3:00 p.m.