

**STATE INTERAGENCY COORDINATING COUNCIL
ON EARLY INTERVENTION**



“Together, we make a difference!”

WestEd, Sacramento

February 20 & 21, 2014

**INTERAGENCY COORDINATING COUNCIL
FEBRUARY 20 & 21, 2014**

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Additional materials can be found at:

<http://www.dds.ca.gov/EarlyStart/ICCOverview.cfm>

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Interagency Coordinating Council On Early Intervention

Mission Statement

The mission of the ICC is to promote and enhance a coordinated family service system for infants and toddlers, birth to three years, who have a developmental delay or disability, and their families, utilizing and encouraging a family centered approach, family-professional partnerships, and interagency collaboration.

The History of the ICC

California has a long history of providing early intervention services to infants and toddlers, ages birth to 3 years old, and their families. In the 1960s and 1970s, special education services for infants and toddlers were provided in public schools and funded through various local, state and federal sources. With the advent of the Lanterman Developmental Disabilities Services Act in 1982, California demonstrated its support of young children for prevention and early intervention services for infants with developmental disabilities through the regional center system. This was a huge effort and viewed as a major investment in California's children.

In 1988, the first Interagency Coordinating Council (ICC) was developed to provide advice and assistance to the Department of Developmental Services (DDS) regarding implementation of a coordinated early intervention system in California. In 1993, after five years of state and local planning activities in preparation for full implementation of Part C of the Individuals with Disabilities Education Act (IDEA), the Governor signed the California Early Intervention Services Act (CEISA: Title 14, Government Code, Section 95000 et seq.). CEISA established state authority to enhance California's early intervention service system to meet the new federal requirements under Part C. It was CEISA that assigned DDS as lead agency in collaboration with California Department of Education (CDE). Other collaborative partners involved in the ICC include Department of Mental Health (DMH), Department of Social Services (DSS), Department of Alcohol & Drug Programs (DADP), Department of Managed Healthcare (DMHC), and First 5 of California.

Although the early intervention landscape has changed over the years in California, the ICC has continued to follow and advise and assist DDS on the state of the early intervention community. The changes have included amendments to CEISA which included the addition of provision of family support services by Early Start Family Resource Centers (FRCs) which include, but are not limited to, parent-to-parent support, information dissemination and referral, public awareness, family-professional collaboration activities and transition for families. CEISA also clarified state coordination and collaboration with families and communities, service coordinator competencies and caseload size, evaluation and assessment, parent rights, referral to local FRCs and monitoring efforts. Lastly, CEISA was also amended to clarify that the Part C program is based on existing systems and regional centers must comply with the Lanterman Developmental Services Act. This includes regulations related to vendorization and rate setting as long as the application of state law does not conflict with early intervention statute.



Interagency Coordinating Council on Early Intervention
1600 Ninth Street, Room 330, Sacramento, CA 95814
 (916) 653-4017 · FAX (916) 654-3255 · TDD 654-2054



DATE: January 6, 2014

TO: ICC MEMBERS AND COMMUNITY REPRESENTATIVES

SUBJECT: FEBRUARY 20 & 21, 2014 ICC Meetings - Public Notice

The following is information regarding the February 20th and 21st, 2014 ICC Meeting which will be held at WestEd in Sacramento. Directions, parking, and airport shuttle information to WestEd are included in this notice. Remote connection information is also included.

Individuals who require accommodations in order to attend the meeting (i.e., assistive listening devices, interpreting services, materials in alternative format) should notify Patric Widmann at (916) 654-3722 or pat.widmann@dds.ca.gov or call (916) 6542054 (TDD) ten days in advance of the meeting. The meeting location is accessible to individuals with disabilities. Visit our website at www.dds.ca.gov/earlystart to view previous ICC meeting minutes and additional information about California Early Start.

PROPOSED AGENDA

DATE: THURSDAY, FEBRUARY 20, 2014
TIME: 10:00 A.M. – 12:00 P.M.

Executive Committee Meeting

The Executive Committee will discuss the status of member recruitment, ICC budget and the Association of Regional Centers (ARCA) Initiative. DDS staff will share information on training issues and monitoring tools. There will be a special presentation on Services for Families Experiencing Domestic Violence.

1:30 P.M. – 4:30 P.M.

Committee of the Whole (COTW)

The COTW will discuss strategies for providing services to families experiencing domestic violence, develop a framework for a paper on delivering services in natural environments and finalize review of *The Assessment of Family Strengths and Needs* document.

DATE: FRIDAY, FEBRUARY 21, 2014
TIME: 8:30 A.M. – 1:30 P.M.

General ICC Meeting

The ICC will hear reports from the Chairs of the Executive Committee, the Committee of the Whole and State Agencies. There will be a special presentation on the Mental Health Services Act and Infant Mental Health projects. The ICC will also receive public input from those interested in early intervention.

TRAVEL INFORMATION

MEETING LOCATION:

WestEd Center for Prevention & Early Intervention
1000 G Street, 5th Floor
Sacramento, CA 95814
Telephone: 916-492-4011

LODGING INFORMATION:

Holiday Inn Capitol Plaza
300 J Street
Sacramento, CA 95814
Telephone: 916-446-0100 toll free 888-465-4329

I-5 NORTH:

Take I-5 North. Take J Street Exit. Right off of ramp onto J Street. Take left onto 10th Street. The WestEd offices are located at 10th & G Street.

I-5 SOUTH:

Take I-5 South. Take J Street Exit. Take a right off of ramp onto J Street. Take a left onto 10th Street. The WestEd offices are located at 10th & G Street.

FROM HWY 99 North:

Take Business 80/Capital City Freeway split toward San Francisco. Take 10th Street Exit. The WestEd offices are located at 10th & G Street.

FROM HWY 50:

Take the Business 80/Capital City Freeway split toward San Francisco. Take 10th Street Exit. The WestEd offices are located at 10th & G Street.

PARKING:

Below are the recommended parking garages nearby the WestEd CPEI offices. Please note that with the daily rates, vehicles are not allowed to come and go. A ticket must be pulled and paid each time entering and exiting. Please note that some garages offer tandem parking arrangements.

Parking Garage/Lot	Early Bird (Before 9:00A.M.)	Daily Rate (maximum)
City Hall Garage 10 th & I Street 11 th & I Street	N/A	\$18
Priority Parking 1117 J Street	\$10	\$20
Lot 297 7 th & G Street	N/A	\$9
Priority Parking Lot 12 th & F Street	N/A	\$6

There are 10 hour parking meters on the street in and around the WestEd offices. You will need \$8 in quarters to max out at 10 hours. Note: Be very cognizant of street sweeping signs as the meter attendants are consistent about issuing parking tickets.

SUPER SHUTTLE:

Reservations: 1-800-BLUE-VANSuper Shuttle is located directly outside the baggage claim area at each terminal. Reservations are not required for large parties or private charters. Go to the Super Shuttle service center, and purchase either a round-trip or a one way ticket.

INSTRUCTIONS FOR JOINING FEBRUARY 2014 ICC MEETINGS from a remote location:

For those who cannot participate in person, the ICC Executive Committee and Committee of the Whole Meeting (Thursday, February 20, 2014 at 10:00 A.M. and 1:30 respectively) and the ICC General Meeting (Friday, February 21, 2014 at 8:30 A.M.) will be offered in an webinar format.

Participants need to call into the teleconference line AND login with a computer to view any online materials.

To join the meetings by phone:

Call 1-888-251-2909 when prompted enter 507301#

To login to the online conference site

Go to <https://www.teleconference.att.com/servlet/AWMlogin>

Your screen will look like this.



The Meeting Number is 888-251-2909

The Code is 507301

You enter your own email address and name.

EASY TIPS for SUCCESSFUL WEBEX and CONFERENCE CALLS*
PARTICIPANT ETIQUETTE

1. Use a landline if possible for the least static interference.
2. Avoid cellular and cordless phones. The potential static and poor or broken connections reduce the sound quality for all conference call participants. If you must use a cell phone, find a quiet location with excellent reception and limit moving around during the call.
3. Know your phone's features and how to use them. Don't wait until the call to figure them out.
4. Turn off call waiting. It's very disruptive to the call. Most call waiting features can be deactivated by pressing 70# or *70 before dialing the conference number. (Check with your carrier.)
5. Use the speaker feature on your phone only if the room is quiet and others in the room are participating on the call with you. Speakerphones can add to the overall noise of the teleconference and create a hollow sound on the call.
6. Choose a quiet location. Avoid background noises such as a radio, TV, pets, or side conversations with others.
7. Stay focused and participate on the call. Avoid using this time to answer email, eat, clear off your desk, file papers, or talk to others.
8. Be on time.
9. Introduce yourself when you join the call. If you join the call late, wait for a break in the conversation to announce that you've joined or until the moderator asks who joined.
10. Introduce yourself each time you speak. Not everyone will be familiar with your voice.
11. Mute your phone (*6) if you are not participating at the time, need to talk to someone else, or need to leave the call for any reason. Unmute your phone (#6) when you're able to return to the call.
12. Never put the call on hold. Either mute your phone (*6) and unmute your phone (#6) to rejoin. Hang up and call in again if you must leave the call.

FACILITATOR/CHAIRPERSON COURTESIES

1. Be familiar with the audio controls.
2. Start—and end—at the scheduled time.
3. Have an agenda—preferably one that's been distributed prior to the conference.
4. Identify yourself when you first connect to the conference call.
5. Identify yourself each time you speak. Others may not know your voice. Speak clearly and at a moderate speed.
6. Take roll call at the conference start so that everyone knows who is involved and listening.
7. Review the rules of etiquette and ask that each participant identify him or herself before speaking.
8. Allow only one individual to speak at any given time during the conference.
9. As much as possible, when appropriate, address questions to individuals by name.
10. Mute the microphone or speakerphone (*6) if you must speak to others in the room with you during the conference. Unmute by pressing #6.
11. Address agenda items in their specified order.

*Thank you to the Family Resource Center Network of California, the source for many of these tips, for sharing its teleconference etiquette.

ICC Contact List

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Full ICC Roster Information can be found at:
<http://www.dds.ca.gov/EarlyStart/ICCRosters.cfm>

ICC 2014 STAFF DEADLINES AND CHECKLIST FOR ICC MEETING MATERIALS

ICC MEETING ACTIVITY ALL MATERIALS ARE SUBMITTED TO MADLINE JOURNEY-LYNN (MADLINE.JOURNEY-LYNN@DDS.CA.GOV) AND/OR PATRIC WIDMANN (PAT.WIDMANN@DDS.CA.GOV)	2014 MEETING DATES			
	FEBRUARY 20 & 21	MAY 15 & 16	SEPTEMBER 18 & 19	NOVEMBER 20 & 21
ALL MINUTES (PRIOR MEETING NOTES) & DOCUMENTS (This includes all minutes and notes, handouts, work plan updates, agendas, electronic reports from each Department) 2 WEEKS AFTER ICC	03/07/2014	05/30/2014	10/03/2014	12/05/2014
DEVELOPMENT OF ICC/EC AGENDAS: 45 DAYS PRIOR TO ICC	01/06/2014	03/31/2014	08/04/2014	10/06/2014
MASTER CALENDAR ITEMS 10 DAYS BEFORE MEETING	02/10/2014	05/05/2014	09/09/2014	11/10/2014
ACTION ITEMS (30 DAY NOTICE!!)	01/28/2014	04/15/2014	08/19/2014	10/22/2014
PUBLIC NOTICE Posted on DDS website NO LATER THAN 30+5 DAYS PRIOR TO ICC	01/17/2014 (MJL 15Jan14)	04/10/2014	08/14/2014	10/16/2014
PACKET DUE DATES: Final Packet Preparation <ul style="list-style-type: none"> • Final ICC minutes and agenda • Final EC minutes and agenda • Final COTW minutes and agenda NO LATER THAN 30+7 DAYS PRIOR TO ICC	01/14/2014	04/08/2014	08/12/2014	10/14/2014

**EXECUTIVE COMMITTEE
AGENDA, MINUTES &
ATTACHMENTS**

AGENDA
FEBRUARY 20, 2014

MINUTES with LINKS TO ATTACHMENTS
NOVEMBER 14, 2013

**STATE INTERAGENCY COORDINATING COUNCIL
EXECUTIVE COMMITTEE AGENDA**

**Thursday, February 20, 2014
10:00 A.M. ~ 12:00 P.M.**

1. Call to Order.....Marie Kanne Poulsen
2. Roll Call.....Madeline Journey-Lynn
3. IntroductionsMarie Kanne Poulsen
4. Review Agenda.....Marie Kanne Poulsen
5. Approval of November 14, 2013 Minutes.....Marie Kanne Poulsen
6. Recruitment Update.....Marie Kanne Poulsen
Update on DDS efforts to Governor.....DDS Staff
 - a. Zero to Three (Diane Brown)
 - b. First 5 of California (Linda)
 - c. Local First 5 agencies (Linda)
 - d. ARCA (Linda)
 - e. Developmental Disabilities Council (Linda)
 - f. CASHA (Elaine)
 - g. Hydra-Simpson programs (Elaine)
 - h. CAPECE (Maurine)
 - i. Family Resource Network (Debbie)
 - j. State Senators and Assembly Representatives (Everybody) - please contact your applicable senator and representative
7. Discuss FRCNCA and First 5 status (sit at table, voting members).....DDS Staff
8. Department of Developmental Services Update.....Jim Knight, DDS
Training Issues and Monitoring Tool.....Erin Paulsen, DDS
9. Special Presentation 11:00 A.M. to Noon.....Alicia Bernstein, CA Partnership to End Domestic Violence
Families Experiencing Domestic Violence
10. ARCA Initiative.....Marie Kanne Poulsen
11. Review ICC General Meeting Agenda.....Theresa Rossini
Proposed Special Presentations
12. Other Business.....Marie Kanne Poulsen
ICC Budget
13. Adjournment

LUNCH: NOON – 1:30 P.M.

PENDING APPROVAL

**STATE INTERAGENCY COORDINATING COUNCIL
EXECUTIVE COMMITTEE MINUTES**

**Thursday, November 14, 2013
10:00 A.M. ~ 12:00 P.M.**

MEMBERS PRESENT

Marie Kanne Poulsen, Chair
Theresa Rossini*
Arleen Downing
Gretchen Hester*
Jim Knight
Beverly Morgan-Sandoz

MEMBERS ABSENT

Elaine Fogel Schneider

STAFF

Madeline Journey-Lynn
Patric Widmann

OTHERS PRESENT

Refer to [Attachment A](#)

*Parent

CALL TO ORDER

The meeting was called to order at 10:00 a.m.

OPENING ROLL CALL

Madeline Journey-Lynn did roll call

INTRODUCTIONS AND ANNOUNCEMENTS

Marie Kanne Poulsen requested those calling into the meeting to mute their lines.

AGENDA REVIEW

The agenda was approved with the following additions and revisions:

- The Association of Regional Center Agencies (ARCA) has made it their top priority to reinvest in Early Start so that children Birth-3 may receive the early intervention services they were entitled to prior to eligibility changes in 2009. This item was placed under Agenda Item: Other Business.

APPROVAL OF THE SEPTEMBER 19, 2013 MINUTES

The minutes were approved with the following changes:

- Elise Parnes noted on page 25 under recruitment: Chris Krawczyk works for the Department of Public Health Home Visiting Program, not the High Risk Infant Program
- Jim Knight noted on page 24 under DDS update: Teri Delgadillo has 30 years of "Public" Service, not "State" Service

PENDING APPROVAL

RECRUITMENT – MARIE KANNE POULSEN

The discussion centered on many points surrounding the issue of recruitment.

Marie reviewed who would send the Appointment to the ICC template letter and follow-up with a phone call to the following list of agencies:

- IDA (Marie) - Done
- Zero to Three (Diane Brown)
- First 5 of California (Linda)
- Local First 5 agencies (Linda)
- CA Center for Infant-Family & Early Childhood Mental Health (Marie) - Done
- American Academy of Pediatrics (Arleen) Done
- ARCA (Linda)
- Developmental Disabilities Council (Linda)
- CDPH Home Visiting Program (Chris Krawczyk)
- CASHA (Elaine)
- Hydra-Simpson programs (Elaine)
- CAPECE (Maurine)
- UCEDD at Davis (Marie) - Done
- UCEDD at USC (Marie) - Done
- Family Resource Network (Debbie) - will follow-up
- Everybody needs to contact their State Senators and Assembly Representatives. Beverly and Marie have visited their L.A. area representatives

More discussion followed on who has applied to the ICC and what has happened to those applicants, particularly in the area of the Governor appointments to the ICC.

- Applicants to the ICC are directed to the web site.
<https://www.dds.ca.gov/EarlyStart/ICCRepApplications.cfm>
- Currently we have 27 community reps who expressed interest in remaining as reps. However, only four reps were on the WebEx and only two for the full day: Linda Landry, Laurie Jordan, and Julie Widman. They are to be commended for their valuable participation.

Parents are needed on the ICC. The discussion centered on the barriers to parents which hinder participation. Solutions were put forward and will be looked into.

- Prepaid credit cards and/or Purchase of Order for hotel costs
- Interpreter for parents where English is not primary language
- Private sponsorship for the ICC travel expenses to meetings with possibility of State Council donating travel funds
- Marie suggested everyone think outside the box to support families in attending
- ICC meetings are open meetings and people who can travel to the meeting are invited to do so.

ICC acknowledgement of the ICC members when they end their services

- If we receive a formal letter or email of resignation, a letter and a certificate of appreciation are sent to that individual.
- The issue of acknowledgment becomes confusing when members informally end participation.

PENDING APPROVAL

- DDS will send Theresa a list of the community representatives. Theresa will review attendance and determine who will stay on as a community representative and who will be sent a letter thanking them for their service. If they wish to participate in the future they can reapply to be community representatives.
- Certificates of appreciation will be sent to Dwight Lee, Connie Moreland-Bishop and Jill Abramson.

A point was made that when speaking at the ICC meetings it is important to identify oneself, so the people participating by phone know who is speaking.

Community representative recruitment and retention will continue to be addressed at the February 2014 meeting including looking for outside funding for expenses.

STATUS OF FIRST 5 AND THE FRCNCA ON COUNCIL – discussion deferred to General Meeting on Friday.

DEPARTMENT OF DEVELOPMENTAL SERVICES UPDATE – deferred to General Meeting on Friday

SPECIAL PRESENTATION

Patricia Lavalas-Howe, R.N., BA, BS, MSN. Nurse Consultant III at the Department of Health Care Services, Primary and Rural Health Division, Indian Health Program
<http://www.dhcs.ca.gov/services/rural/Pages/IndianHealthProgram.aspx>

Patricia spoke on their outreach efforts, home visiting, and support of high risk pregnant and parenting American Indian women. The program is in five counties; Humboldt, Sacramento, San Bernardino, Riverside, and San Diego. The Healthy Families America Model is used; focusing on the benefit of prenatal care, parenting skills, mother-child relationship, and resource referral. The program screens for maternal depression and will be using developmental screening for the children and making appropriate referrals. It was suggested that a workgroup of interested parties be put together to examine the barriers and solutions unique to serving young American Indian children and their families. Pat and DDS will follow up.

Pat offered to send scanned copies of the manuals/workbooks used with the families if anyone is interested in them. Patricia.Lavalas-Howe@dhcs.ca.gov Attachment B

RACE TO THE TOP – deferred to General Meeting on Friday

REVIEW ICC GENERAL MEETING AGENDA – approved

PROPOSED SPECIAL PRESENTATIONS

Domestic Violence (February 2014), Infant Mental Health Project (February 2014)

OTHER BUSINESS

ARCA Initiative deferred to General Meeting on Friday

ADJOURNMENT

Meeting Adjourned at 12 Noon. (Lunch 12 Noon – 1:30 P.M.)

PENDING APPROVAL

ATTACHMENT A
OTHER ICC EXECUTIVE COMMITTEE MEETING PARTICIPANTS

Thursday, November 14, 2013

Community Representatives

Laurie Jordan*
Linda Landry*
Virginia Reynolds

DDS Staff

Elise Parnes
Erin Paulsen
Ashley Ramirez

Guests

Patricia Lavalas-Howe
Diane Williams
Ellen Wright

*Parents

**COMMITTEE OF THE WHOLE
(COTW)
AGENDA, MINUTES &
ATTACHMENTS**

AGENDA
FEBRUARY 20, 2014

MINUTES with LINKS TO ATTACHMENTS
NOVEMBER 14, 2013

**INTERAGENCY COORDINATING COUNCIL
Committee Of The Whole Agenda**

**Thursday, February 20, 2014
1:30 P.M. ~ 4:30 P.M.**

1. Call to Order.....Theresa Rossini
2. Roll Call.....Madeline Journey-Lynn
3. IntroductionsTheresa Rossini
4. Review Agenda.....Theresa Rossini
5. Approval of November 14, 2013 Minutes.....Theresa Rossini
6. Natural EnvironmentTheresa Rossini
 - Develop a framework for the white paper
 - Appoint a workgroup
7. Discussion on Providing Services to Families Experiencing Domestic Violence.....
2:00 P.M.to 3:00 P.M......Theresa Rossini
8. Finalize Review of *Assessment of Family Strengths and Needs*.....Theresa Rossini
9. Actions and Recommendations.....Theresa Rossini
10. Other Business.....Theresa Rossini
11. Adjournment

PENDING APPROVAL

**INTERAGENCY COORINATING COUNCIL
COMMITTEE OF THE WHOLE MINUTES**

**Thursday, November 14, 2013
1:30 P.M. ~ 4:30 P.M.**

COMMITTEE MEMBERS

PRESENT:

Arleen Downing, Gretchen Hester*, Beverly Morgan-Sandoz, Marie Kanne Poulsen, Elise Parnes, Erin Paulsen, Ashley Ramirez, Madeline Journey-Lynn, Patric Widmann

COMMUNITY REPRESENTATIVES:

Maurine Ballard-Rosa, Laurie Jordan*, Kristine Pilkington, Virginia Reynolds, Nancy Sagar, Debbie Sarmiento*, Julie Kingsley Widman*

GUESTS:

Diane Williams, Ellen Wright

RECORDER:

Elise Parnes (DDS)

*Parent

MEETING NOTES

WELCOME AND INTRODUCTIONS

Arleen Downing welcomed everyone to the meeting at 1:35. Arleen is chairing the meeting for Theresa.

OPENING ROLL CALL

Madeline Journey-Lynn did roll call.

REVIEW AGENDA

Agenda items from the Executive Committee that were not addressed due to time constraints were deferred to the General Meeting on Friday.

The Executive Committee Agenda item on First 5 and FRCNCA was discussed briefly. Federal regulation state that voting members of the ICC must be appointed by the Governor. This means that currently First 5 and FRCNCA are not voting members in spite of the fact the ICC approved them as voting members. The appropriateness of how this decision was made (if the ICC has authority) has been questioned.

TASKS AND WORKPLANS – deferred

REVIEW NATURAL ENVIRONMENT (NE) RESOURCES

PENDING APPROVAL

Led by Arlene, the group discussed the intent of why and for whom the articles are being read/discussed and the focus. Patric reminded members that the Council decided to look into creating a white paper promoting NE for the early intervention community.

Erin shared that although NE are required by federal statute, it still is an issue in site reviews. Erin shared the conflict about NE when parents have to access private insurance, which traditionally provides services in a clinic setting rather than NE. Oftentimes, private insurance looks at the service in a medical model. If it is clinic-based it is considered a medical service. If the service is provided in the home, it is considered a developmental service and insurance companies won't pay for it, even if it is the same provider and service. She also said we are lucky if a home-based/NE service provider takes the effort/time to become an insurance provider as well as a regional center vendor. This is happening in Orange County. The group discussed that NE isn't just about providing the service in the home. It is providing a learning opportunity with the parent so that the same intervention can be carried over to the rest of the week/time with the parent/child interaction in the home.

SPECIAL PRESENTATION

Panel on Natural Environments (NE)

Ellen Wright and Diane Williams from Alta California Regional Center (ACRC)

In September 2011 Alta asked DDS and WestEd to meet with all of their service coordinator and vendors to help them incorporate the ICC Recommended Early Start Personnel Manual competencies for service providers into service standards and to expand NE practices into the way service providers do business. Over the last few years a foundation for systems change was established to foster change in the way service providers delivered services. The foundation for systems change included trainings on a variety of subjects followed by ongoing opportunities for discussion for service coordinators and service providers. Additional training was provided in July 2012 on relationship based early intervention services and in March 2013 on writing functional outcomes. Infusing the three concepts into delivering services resulted in a decrease in the no-show rate and an increase in parent involvement.

ACRC's plan is to continue to support additional vendors to embrace these evidence based practices, continue to obtain feedback about what is working/not working so that the ACRC can continue to respond and learn from the changes.

The ICC plans to acknowledge the efforts of Alta during the February 2014 ICC Meeting. Maureen Ballard-Rosa will draft an acknowledgement regarding ACRC's efforts.

Arleen Downing, ICC Member

Arleen provided a synopsis of an article from the September 2013 issue of **Pediatrics** – *Early Intervention, IDEA Part C Services, and the Medical Home: Collaboration for Best Practices and Best Outcomes*. The article focused on NE, coaching and how the medical home and EIS communities should work together. See Attachment A

Kristine Pilkington, Occupational Therapist

Kristine presented a field perspective on delivering services in NE with a focus on the importance of coaching with families including the following highlights:

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In delivering services, Kristine acts as a coach to the parent as part of the trans-disciplinary Early Start team, helping them to learn strategies that will enhance their child's development during family activities and routines. She explains to the families what her role is and what their role is early during the evaluation process so that families will know what to expect and how to be engaged in the intervention process. The steps of coaching the parents include asking, listening, and recalling past statements and then planning what and how to coach within the family's naturally occurring activities. Observing and wondering together is important to creating a space for the family to share what they've been doing (easier to do when parents are feeling competent and confident) and setting the stage for experimentation with new strategies.

As an occupational therapy consultant, Kristine's role is to also work collaboratively with other team members on each child's IFSP team, frequently conducting joint visits. The whole team aligns with the family's priorities and practices. This can be a struggle when a particular team member has an agenda or is at odds with some part of the family's priorities or even lifestyle. Parents follow the child's lead and the professionals follow each family's lead.

The family's IFSP focuses on developing outcomes within contextual activities that engage family member participation and community participation and highlight their expectations. Delivering services within and strategies embedded in the family's daily routines and activities opens a rich opportunity for natural environment interventions ("The ball is still rolling when the professional goes out the door" in other words, intervention continues whether the professional is present or not.) It is not about what the professional does with the child, or how the professional works in isolation of parents, caregivers, siblings, etc. It is about identifying who key partners are for learning, and engaging them in the discovery process. Coaching parents and caregivers is the means to achieving IFSP success.

Shifting from clinic-office-based to home and community-based services can be difficult, especially if services have long been conducted in this way. It takes a mind shift and passion for working in natural environments through everyday learning opportunities. Some of the reduced costs associated with need for less clinic/office space can help off-set the driving and other expenses incurred with home visiting. Vendors can seek to renegotiate their contracts in order to think about how they might need to re-structure their contracts and practice/billing/etc. Allowing time for collaborative staff meetings and individual reflective supervision are a must when implementing services in natural environments.

There has been positive feedback about the NE online courses offered through West Ed and Kristine feels that those are a really positive, helpful resource to help train the field. Kristine's handouts are Attachments B and C.

Nancy Sager, California Department of Education

Nancy promotes the importance of a linguistically-rich environment. She recommends that children need to be able to access the environment and all its learning opportunities including those that children who are hearing/vision/orthopedically impaired. A fully accessible natural environment (sign language, oral/spoken language) for children who are deaf and hard of hearing children includes an environment where they are interacting with language, even if that means in a special environment. Children who hear are surrounded by other children who they can talk to. That doesn't happen for children who are deaf/hard hearing unless you create a specific environment so the natural

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environment for a child that is deaf or hard of hearing is a specially-created linguistically-rich environment and the child needs to be served in the context of this.

Arleen asked Nancy if she had any ideas about how the ICC can support NE for children who are deaf or hard of hearing. Nancy said that she would like to see (1) a disclaimer about the unique needs of children in the context of a linguistically-rich environment that responds to the unique needs of these children; (2) Joint Committee on Infant Hearing (JCIH) 2013 article and addressing the perception that the hearing loss (invisible) is less important than the other disabilities/delays that the child has. We know, based on research, the critical age is six months when we need to address solely low incidence disabilities and the focus on providing linguistically-rich environment in order for the child to develop/receive the services and supports they need.

REVIEW NATURAL ENVIRONMENT RESOURCES (con't)

With one hour remaining, the group agreed to continue discussing NE and to clarify how the ICC could address the NE topic.

- The following ideas were suggested:
 - Encourage trainings on NE within RC catchment areas,
 - Explore the feasibility of renegotiating vendor contracts and rates,
 - Highlight the efforts and accomplishments of ACRC,
 - Encourage ACRC to document their process for system change including promoting delivering services in NE so it can be shared with others.
 - Develop a list of issues about NE as it relates to parents, service coordinators, vendors, administration, such as information to parents about their role in enhancing their child's development.
 - Explore the role of private insurance in NE.
- The group decided that the discussion for the white paper will need to carry over to tomorrow's General Meeting.

ADJOURNMENT

Meeting adjourned at 4:30

**ICC GENERAL
MEETING AGENDA, MINUTES &
ATTACHMENTS**

AGENDA
FEBRUARY 21, 2014

MINUTES with LINKS TO ATTACHMENTS
NOVEMBER 15, 2013

STATE INTERAGENCY COORDINATING COUNCIL

Thursday, February 20, 2014

Executive Committee Meeting..... 10:00 A.M. – 12 Noon
Committee of the Whole..... 1:30 P.M. – 4:30 P.M.

FRIDAY, FEBRUARY, 2014,

8:30 A.M. – 1:30 P.M.

GENERAL MEETING AGENDA

1. Call to Order.....Theresa Rossini, Acting Chair
2. Roll CallMadeline Journey-Lynn
3. Introductions and Announcements.....Theresa Rossini, Acting Chair
4. Review Agenda.....Theresa Rossini, Acting Chair
5. Approval of November 15, 2013 Minutes.....Theresa Rossini, Acting Chair
6. Chair’s Report.....Theresa Rossini, Acting Chair
7. Executive Committee Report.....Marie Poulsen
 ICC Recruitment Update.....Marie Poulsen
8. COTW Report.....Theresa Rossini, Acting Chair
9. ICC Staff Report.....Madeline Journey-Lynn
10. Outreach to Special Populations.....Theresa Rossini, Acting Chair
11. Public Input **10:00 A.M.**.....Theresa Rossini, Acting Chair
 Interested Parents and Members of the Public
12. Special Presentation **11:00 A.M.**.....Mental Health Services Act and Infant Project, Jo Ellen Fletcher, et al
13. Family Resource Centers Network of CA.....Linda Landry
14. Race to the Top.....Virginia Reynolds
15. Agency Reports
 Department of Developmental Service.....Jim Knight
 Department of Social Services.....Diane Brown
 Department of Health Care Services.....Virginia Bliss
 Department of Managed Health Care.....Susan Burger
 California Department of Education (CDE), Special Education.....Vacant
 CDE, Homeless Education.....Leanne Wheeler
 First 5 California.....Vacant
 Department of Public Health.....Vacant
16. Other BusinessTheresa Rossini, Acting Chair
17. Adjournment

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**STATE INTERAGENCY COORDINATING COUNCIL ON EARLY INTERVENTION
GENERAL MEETING MINUTES
FRIDAY, NOVEMBER 15, 2013**

MEMBERS PRESENT

Theresa Rossini, Acting Chair*
Virginia Bliss, M.D., designee for the Director (DHCS)
Diane Brown, designee for the Director (DSS)
Susan Burger, designee for the Director (DMHC)
Arleen Downing, M.D.
Gretchen Hester*
Jim Knight, designee for the Director (DDS)
Beverly Morgan-Sandoz
Marie Kanne Poulsen, Ph.D.

MEMBERS ABSENT

Elaine Fogel Schneider, Ph.D.
Leanne Wheeler, designee for the Superintendent (CDE)

STAFF

Madeline Journey-Lynn, ICC Coordinator (DDS)
Patric Widmann, ICC Supervisor, (DDS)

OTHERS PRESENT

Refer to [Attachment A](#)

*Parent

INTRODUCTIONS AND ANNOUNCEMENTS

Theresa Rossini welcomed everyone to the meeting at 8:30 A.M. Theresa asked everyone on the conference call to mute their phone lines.

ROLL CALL

Madeline Journey-Lynn took roll

AGENDA REVIEW

Agenda was reviewed and approved with the following additions under "Other Business": First 5 and FRCNCA, Race to the Top, ARCA initiative, CCS Eligibility and Family Assessment. These items were deferred from Thursday meetings.

APPROVAL OF SEPTEMBER 20, 2013 MINUTES

The minutes were approved with the following corrections:

- Minor grammatical changes to page 16 were submitted for the DHCS report.
- Jim Knight noted on page 24 under DDS update: Terry Delgadillo's has 30 years of "Public" service, not "State" service.
- Elise Parnes noted on page 25 under recruitment: Chris Krawczyk works for DHCS's Home Visiting program, not the High Risk Infant Program.

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CHAIR'S REPORT

Beverly Morgan-Sandoz agreed to chair the afternoon portion of the meeting.

EXECUTIVE COMMITTEE (EC) REPORT

Marie Kanne Poulsen reported the following; refer to EC minutes for further details:

ARCA has made its top priority the reinvestment in ES in order to allow children from birth to three to receive the early intervention services they were entitled to prior to changes in 2009. The item needs further discussion by the ICC.

EC Discussed recruitment and retention of Council members, parents and community representative and barriers to participation.

Patricia Lavalas-Howe, DHCS, Nurse Consultant, with the American Indian Infant Health Initiative Program shared information on outreach, home visiting, and support of high risk pregnant and parenting American Indian women.

COMMITTEE OF THE WHOLE REPORT (COTW)

Arleen Downing reported the following; refer to COTW minutes for further details:

COTW continued discussion on the white paper to be developed by the ICC promoting delivering services in Natural Environments.

A panel presentation on NE included Ellen Wright and Diane Williams from Alta California Regional Center (ACRC); Arleen Downing, ICC Member; Kristine Pilkington, Occupational Therapist; Nancy Sager, California Department of Education.

- Ellen Wright and Diane William discussed how ACRC moved towards services in NE, vendor reaction, progress, barriers and solutions.
- Arleen Downing provided a synopsis of the pediatric article focusing on NE, coaching and how medical home and EIS should work together.
- Kristine Pilkington spoke from a field perspective on delivering services in NE including the role of Coaching.
- Nancy Sager discussed how NE fit with children who are deaf or hard of hearing.

The COTW discussed frame work purpose and audience for a position statement. An ad hoc group will be formed.

ICC STAFF REPORT

Madeline Journey-Lynn provided information on the webinar scheduled for November 22, 2013: *The Role of Parents and Stakeholder for SSIP*.

OUTREACH TO SPECIAL POPULATIONS

Theresa Rossini said that the ICC is gathering information through presentations. At a previous ICC there was a presentation on the families experiencing homelessness. Yesterday's presentation was on the American Indian population. The presentation for today was on supporting children in foster care. The ICC is planning on having a presentation on families experiencing domestic violence.

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ACTION ITEM

Madeline Journey-Lynn presented the 2014 ICC meeting schedule and Council approved without changes.

PUBLIC INPUT

Theresa asked for public Input. Hearing none via the phone, Theresa asked for public comment in person.

Tony Anderson of The Arc of California spoke on the Lanterman Coalition <http://www.thearca.org/53.html>. The Lanterman Coalition consists of 16 major stakeholders in California's community based developmental services system who are working to restore Early Start eligibility criteria which was restricted in 2009.

2012-2013 ICC ANNUAL ACTIVITIES REPORT (AAR)

Patric Widmann shared that every year the Department of Developmental Services is required to submit the California Annual Performance Report to the Office of Special Education Programs (OSEP). The ICC Annual Activities Report is an attachment to this report.

The AAR was distributed at the meeting and then emailed to all members for input. Madeline requested that it be returned to her with comments and edits by December 4th. On or before December 15th it will be posted as an Action Item to the ICC web site for 30-days. On January 15th ICC Council Members will vote on the Action Item.

SPECIAL PRESENTATION

Diane Brown, Department of Social Services presented on *Building a System of Support for Young Children in Foster Care*. See Attachment B.

Site information on the Child Welfare Council

<http://www.chhs.ca.gov/Pages/CChildWelfareCouncil.aspx>

[Site information for the Children in Foster care report](http://www.chhs.ca.gov/search/results.aspx?k=children%20in%20foster%20care)

<http://www.chhs.ca.gov/search/results.aspx?k=children%20in%20foster%20care>

[Katie A. information - http://www.dhcs.ca.gov/Pages/KatieImplementation.aspx](http://www.dhcs.ca.gov/Pages/KatieImplementation.aspx)

FAMILY RESOURCE CENTERS NETWORK OF CALIFORNIA REPORT (FRCNCA)

Linda Landry reported the following:

Outreach and collaboration activities included participation at the UCLA Tarjan Center University Center for Excellence in Developmental Disability Consumer Advisory Committee, MIND CEDD CAC Committee, USC/UCEDD Advisory Committee, Lanterman Coalition, California Network of Family Strengthening/Support Networks Training and Technical Assistance Collaborative, California Standards for Family Strengthening & Support Committee, The Arc California Board of Directors, California Family Strengthening Roundtable Steering Committee and the Screening Collaborative.

The FRCNCA is participating in the California Employment Consortium for Youth and Young Adults with Intellectual and Other Developmental Disabilities (CECY) (pronounced SEE SEE).

Over 100 ESFRC staff and collaborative partners have been trained on the Standards of Quality for Family Strengthening and Support. Training on the Standards was held in Bakersfield in October. We

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have four certified trainers and two who are in the process of completing the training for trainers requirements.

The FRCNCA had an outreach table at the "CA Child Abuse Prevention and Early Intervention Summit: Preventing Child Abuse & Neglect: The Power of Community/The Summit" in Sacramento with 400 registered. An FRCNCA representative co-presented at a workshop on Supporting Fathers of Children with Special Needs with 40 attendees. The FRCNCA had an outreach table at the International Division of Exceptional Children Conference held in San Francisco in October.

The FRCNCA continued the implementation of Prevention Resource and Referral Services (PRRS). During the new contract period ESFRCs providing PRRS will be able to include the Ages and Stages Questionnaire (ASQ) in their services. The FRCNCA developed a white paper on the ASQ. For a copy, please contact Linda Landry or Debbie Sarmento. The FRCNCA is in the process of completing the 2013 -2015 PRRS contracts with the 41 FRCs that are implementing the service. Bimonthly 1800 Second PRRS calls on the 1st and 3rd Wednesday continue to be held for all PRRS staff and provide a forum to ask questions, raise issues, express needs or make comments on general program, budget, data, outreach, training or other items related to PRRS. Attendance averages around 25. Individualized technical assistance and training is ongoing. Regional trainings were held in Bakersfield and Sacramento in October.

We continue to seek additional funding sources to maintain the coordination of the FRCNCA.

OTHER BUSINESS

Family Resource Network of CA and First 5

Theresa Rossini continued the discussion on FRNCA and First 5 voting privileges. Theresa explained the background behind adding FRCNA and First 5 as voting members. There is a question on whether First 5 is actually a voting member since they are not specified in the law nor are they appointed by the Governor. There is a need to look at the law and by-laws in reference to the ICC's rights and powers. Arleen asked who is allowed to vote. Jim will check with DDS's legal department on this matter.

Race to the Top-RTTT-ELC <http://www.cde.ca.gov/sp/cd/rt/rttelcapproach.asp>

Jim Knight, DDS and Virginia Reynolds, WestEd reported the following:

Update for the last two months (September – October, 2013)

Office of Special Education (OSEP)/Early Childhood Technical Assistance Center (ECTAC) RTT-ELC Early Learning Community Part C/619 conference call was held October 7, 2013. Rhode Island provided a presentation on the development of their workforce competencies within the RTT-ELC. The next call is scheduled for December 2, 2013.

Action Items/Outcomes: California was able to report about existing Part C/Part B workforce competencies and efforts to enhance those through DDS' participation as a Participating State Agency (PSA) on RTT-ELC.

The State Advisory Council (SAC) was held on September 11, 2013. The primary goal of this meeting was to provide a final report/summary of all of the SAC Projects and integration into California's Comprehensive Early Learning Plan (CCELP). The next meeting is scheduled for January 22, 2014.

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Action Items/Outcomes: The SAC entertained recommendations for future focus areas. Addressing the early learning needs of young children with disabilities and other special needs was strongly suggested as a priority area, particularly within the context of the overall goal of RTT-ELC to close the achievement gap for children with high needs.

The Integrated Action Team (IAT) meeting was held on October 14, 2013. The Department of Public Health provided a presentation on the Early Childhood Comprehensive Systems (ECCS) grant requirements and their interface with RTT-ELC. The IAT was also asked to prioritize the next round of focus areas for the group.

Action Items/Outcomes: While children with special needs was not identified as one of the top three priority areas it was agreed their early learning needs can be infused and embedded across the identified priorities.

Dates and times for 12 of the 17 Consortia have been made for WestEd to discuss the training needs of each Consortium. The remaining 5 Consortia are in the Bay Area and are deciding whether to meet with WestEd singularly or as a group. Meetings should be completed in January 2014.

Meetings with the Regional Center Early Start Supervisors were held on October 4, 2013 at North Bay Regional Center and on October 15, 2013 at Harbor Regional Center. Representatives from Regional Center of the East Bay, North Bay, Central Valley, San Andreas and Valley Mountain Regional Centers attended in the North. Regional Center of Orange County, Harbor, North LA, East LA, South Central LA, San Gabriel Pomona, Westside, Lanterman and San Diego Regional Centers were represented in the South. A presentation on RTT-ELC was provided which included background on the Federal goals of the initiative, California's key reform areas and organizational structure and DDS' primary focus areas as a PSA. Discussion topics included: 1) identification of any Regional Center participation with local Consortia, 2) the QRIS, 3) ideas about potential areas for collaboration, and 4) suggestions about DRDP training for vendored early intervention programs.

Action Items/Outcomes: None of the participants identified themselves as having knowledge about RTT-ELC, nor did any report participation on their local Consortia leadership or implementation activities. They were encouraged to contact their Consortia Leads. Consortia will also be queried about Regional Center participation during their TA visits and planning meetings. Information shared during the discussion topics have informed and shaped the learning outcomes for the RTT-ELC Early Start modules. Concern was expressed about the ability of vendored early intervention program staff's ability to participate in any type of training given the nature of operating on billable hours.

Learning Outcomes were developed for the two (2) Early Start On-Line Training Modules to be completed in FY13-14. Development team members were identified to reflect representation across RTT-ELC agencies/stakeholders, state and local levels and geographic regions. Review and comment of the learning outcomes were solicited.

Timeline/Benchmarks: A meeting will be scheduled to convene those members of the development team involved in writing the modules. The content of the first module will be written by December 20, 2013.

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Questions/Answers

Q1: Which counties are involved in the RTT-ELC Consortia?

A1: There are 17 Consortia participating from 16 Counties: Alameda, Contra Costa, El Dorado, Fresno, LA (2), Merced, Sacramento, San Joaquin, San Francisco, Santa Barbara, Santa Clara, Santa Cruz, Santa Barbara, Orange, Ventura, and Yolo.

Q2: How were the Consortia chosen?

A2: Counties selected were operating or developing a local Quality Rating and Improvement System (QRIS) or quality improvement system (QIS) and allocating local resources to the efforts. Approximately 70% of children with high needs ages 0-5 reside within the 16 Counties participating in RTT-ELC.

Q3: For the Quality Rating Improvement System (QRIS), what were the priorities and common areas across all the Consortia?

A3: The hybrid, tiered QRIS matrix includes 3 common tiers (1, 3, 4) and 2 locally determined tiers (2,5). Rationale was to establish commonalities across the 17 Consortia while allowing for local flexibility given existing infrastructures/quality rating improvement systems and efforts. Tier 1 starts with basic California Child Care Licensing (CCL) requirements. The three (3) Core Elements of the QRIS are Child Development and School Readiness, Teachers and Teaching and Program and Environment. For more information about the Quality Continuum Framework, which includes the QRIS and Common Tools and Resources (Pathways), please review the documents located at www.cde.ca.gov

Department of Health Care Services - California Children's Services

Virginia Bliss, M.D., DHCS discussed the following:

How can the public access the specific criteria for CCS eligible medical and surgical condition Reference to CCR Title 22 Sections that govern the California Children's Services:

- <http://www.dhcs.ca.gov/formsandpubs/publications/Documents/CMS/cmsin/cmsin0902.pdf>
- The CCS conditions are stated in the California Code of Regulations, Health and Safety Code. Under Individuals, choose "Find out if I qualify"; choose <http://www.dhcs.ca.gov/services/ccs/Pages/medicaleligibility.aspx>

Is Rett Syndrome a CCS eligible condition?

- County CCS policies may vary. A child with Rett Syndrome may have physical conditions that qualify for CCS subspecialty treatment (such as neurology, cardiology, GI, adaptive equipment) and developmental conditions that qualify for Special Education and Regional Center services (occupational, behavioral, and speech therapies). Questions about eligibility for CCS treatment services for individuals with Rett Syndrome may be referred to the CCS Medical Consultant for the county in which the family resides.

A referral to the CCS program may come from any source. Determination of medical eligibility for CCS is based on CCS review of medical documents for presence of a medical or surgical condition that is listed in the CCS regulations in the Health and Safety Code.

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Financial Eligibility

- Financial eligibility is present for Medi-Cal beneficiaries. Financial eligibility for individuals or families who do not qualify for Medi-Cal is based on family income and the expected annual treatment cost of the CCS eligible medical condition. Financial eligibility determination is not required for CCS diagnostic services or for CCS Medical Therapy Program services.

Documentation of immigration status is not required for CCS program eligibility.

EPSDT [Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)]

- EPSDT contains the Federal Medicaid provisions for states. All medically necessary diagnostic and treatment services within the federal definition of Medicaid medical assistance must be covered, regardless of whether or not such services are otherwise covered under the state Medicaid plan for adults ages 21 and older.

ICC members are invited to call Dr. Bliss with questions about the CCS program at (916) 327-1316.

Assessment of Family Strengths and Needs

COTW discussion on the *Assessment of Family Strengths and Needs* document was continued from Thursday.

- Do we have a deadline when this needs to be done? Why are we doing this?
Patric responded that the Department asked for input from the ICC and hopes to have a final document by June 2014.
- Should the focus be on concepts or editing the document? Is it part of a bigger document that has a context?
Patric responded that this document is a section of the Service Coordination Handbook but can stand alone. Edits need to focus on concepts at this point.

AGENCY REPORTS

Department of Developmental Services

Jim Knight reported the following:

Per ICC request, a copy of the letter to the regional centers on insurance co-pays was emailed to the full ICC and applicable Certificates of Appreciation were mailed to recipients.

Corrective Action Plan (CAP)

- CAP submitted August 14th outlines how California will address collecting valid and reliable transition data for 2012-13. DDS worked with CDE to devise the CAP that will resolve the data issue.
- Electronic self-assessment tool was made available to selected LEAs to collect transition data for children who exited the program during FFY 2012 on 9/25/13.
- CDE expects to analyze self-assessment data for submission to DDS by November 15, 2013.

2012 Annual Performance Report

- Early Start staff is in the process of gathering data and drafting the APR for submission to OSEP on February 3, 2014.
- OSEP requires that the ICC review and sign off on the APR each year.

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- DDS would like to share information on the APR indicators with Council members before submission.
- DDS would like to propose that summary information be sent via email to Council members by mid-January with a follow-up conference call to walk everyone through the information.

The transition guide, *Effective Early Childhood Transitions, A Technical Assistance Guide for Transition at Age Three, Early Start to Preschool* and the 2013 Early Start Central Directory have been approved for posting.

WestEd has a new online skill base module under final development entitled – *Facilitating Sensory Processing Development*

Monitoring Activities

- Erin Paulsen reported that during the remainder of 2013 DDS completed 7 RC site visits; during the spring of 2014: three additional RC were visited. Site visits focus on gather data for the APR and only include DDS staff. The ICC requested that DDS share information at the next meeting regarding compliance issues that may be potential training topics and the current tool used during site visits.

Tree Lighting Ceremony

- Erin Paulsen shared that the Tree Lighting Ceremony is scheduled for Dec. 12th at the Capitol.

DDS Recruitment Efforts

- Letter was sent to CDE on October 18th requesting a representative for the ICC
- Head Start representative is required under federal regulations. Beverly Morgan-Sandoz recruited someone from her area but there was no follow through that we know of. As a possible next step, DDS can send a letter to the Division of Child Development under CDE to request that someone be appointed from the Head Start Collaboration Office. ICC needs to discuss whether a State or local rep is preferred.

California Department of Education (CDE) Special Education

No report available

CDE Office of Homeless Education

No report available

First 5 California

No report available

Department of Health Care Services

No report available

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Department of Managed Health Care

Susan Burger reported the following:

Current Status of Department Activities Relevant to Children Birth to Three

The Department of Managed Health Care (“DMHC”) continues to track and respond to inquiries and complaints related to the implementation of Senate Bill 946 (“SB 946”) which requires health care service plan contracts and health insurance policies to provide coverage for behavioral health treatment (as defined) for pervasive developmental disorder or autism. During the first year of implementation (July 1, 2012 – June 30, 2013) the Help Center received and resolved 148 SB 946-related complaints. The most common complaints included treatment denied with a non-network provider, treatment denied based on medical necessity, and delays experienced in accessing service. The case outcomes for the 148 complaints are as follows: 65.2% were found in favor of the enrollee and 34.8% were found in favor of the health plan. If you have a question or problem accessing services or care related to SB 946, please contact the DMHC’s Help Center at its toll-free phone number, **1-888-466-2219** or via email (click the “email” icon displayed on the home page of the DMHC’s website, <http://www.healthhelp.ca.gov>).

Legislative Update: Senate Bill 126 - Health care coverage: pervasive developmental disorder or autism (authored by Senator Darrell Steinberg) was chaptered into law on October 9, 2013. This bill extends the operation of the provisions of SB 946 until January 1, 2017. To view the bill’s language visit <http://www.sen.ca.gov>.

The DMHC’s Help Center provides a **free** consumer service that is available 24 hours a day, seven days a week to answer any questions consumers may have about accessing health care services. You do not have to be enrolled in a managed care health plan to contact the Help Center. If you have a question or you are uncertain about how to proceed with a dispute or problem with your health plan, have questions regarding health care reform, or need insurance please contact the DMHC’s Help Center at **1-888-466-2219, TDD: 1-877-688-9891**. If the Help Center cannot help you directly, we will connect you to programs that can. The Help Center can provide help to consumers who speak any of 100 different languages.

The Help Center also receives and resolves complaints from managed care enrollees to ensure that enrollees receive all the necessary medical and mental health care to which they are entitled. (Managed care enrollees have coverage with a HMO or have PPO coverage with Anthem Blue Cross or Blue Shield). If medical treatment has been delayed, denied, or modified, managed care enrollees have the right to an Independent Medical review (“IMR”). The DMHC’s website contains information on the IMR process as well as information on the benefits, rights, and the grievance system process for managed care enrollees. The DMHC’s website is located at <http://www.healthhelp.ca.gov>.

As a reminder, managed care enrollees now have the option to complete and submit a complaint IMR application to the DMHC’s Help Center online. Online application forms are currently available in English and Spanish: http://www.dmhc.ca.gov/dmhc_consumer/pc/pc_forms.aspx

Department of Public Health

No report available

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Department of Social Services

Diane Brown reported the following:

Current Status of Department Activities Relevant to Children Birth to Three

KATIE A: The *Katie A v. Bonta* refers to a class action lawsuit concerning the availability of intensive mental health services to children who are either in foster care or at imminent risk of coming into care. The settlement agreement requires child welfare and mental health leaders at the state and local level to work together to establish a sustainable framework for the provision of an array of services that occur in community settings and in a coordinated manner. Four regional Learning Collaborative groups are working together to develop an integrated system at the local level to develop collaborative relationships between child welfare and mental health agencies to best deliver the needed services to children in care.

TITLE IV-E WAIVER DEMONSTRATION PROJECT: For the past six years, two California counties have participated in a project that allows the county child welfare agency to use federal funding in a more flexible manner. This project is intended to test new approaches to the delivery and financing of child welfare services by using these funds to facilitate improved safety, permanency and well-being for children. Currently, several other counties have shown an interest in participating in the Title IV-E Waiver project, and CDSS is working with the counties and federal partners to expand the program.

The Child Welfare Council (CWC)

Subcommittee on Child Development and Successful Youth Transition Committee White Paper – *Building a System of Support for Young Children in Foster Care*

- The work of this committee reviews recommendations from initiatives that are specific to children and families involved in the child welfare system. The committee has finalized a white paper and the recommendations regarding children age zero to five, which was initially presented to the CWC has been presented to the Council for consideration. The goal is to bring awareness of the effects of “toxic stress” (neglect, exposure to violence, etc.) on young children’s development, and to recommend that the courts and child welfare agencies collaborate to reduce the number of placements and promote greater opportunities for stable relationships for young children in foster care.

A formal presentation of the paper and recommendations to the Council will be presented in December 2013.

ADJOURNMENT

Beverly Morgan-Sandoz adjourned the meeting at 1:05 pm

PENDING APPROVAL

ATTACHMENT A
OTHER ICC GENERAL MEETING PARTICIPANTS

Friday, November 15, 2013

Community Representatives

Tony Anderson
Maurine Ballard-Rosa
Laurie Jordan*
Linda Landry*
Kristine Pilkington
Virginia Reynolds
Nancy Sagar
Debbie Sarmento*
Julie Kingsley Widman*

DDS Staff

Elise Parnes
Erin Paulsen
Ashley Ramirez

Guests

Chris Krawczyk
Erika Trainer

*Parents

TRAVEL INFORMATION AND FORMS

INTERAGENCY COORDINATING COUNCIL ON EARLY INTERVENTION

SUMMARY OF ALLOWED TRAVEL EXPENSES

ICC Members will be reimbursed for the actual cost, up to the maximum allowance, for each meal, lodging, and incidental expense for each complete 24 hours of travel. Original receipts with zero balance are required to substantiate actual lodging expenses.

Travel and per diem for the Wednesday prior to the ICC meetings may be approved by the ICC Supervisor when travel options on Thursday morning are not practical for member's arrival for the start of the Executive Committee meeting. The State of California has policies and regulations regarding expenditure of state funds on travel, which includes transportation, meals, and lodging. The following are the allowances and travel reimbursement rates approved by the Department of Personnel Administration. **If in doubt about any expense, consult with ICC Manager prior to incurring expense.**

MEALS

It is important to remember there are **NO FLAT RATE** reimbursements. All meals claimed are to be for the actual amount of expense, up to the maximum allowed. Since no provision requires submission of meal receipts, it is the traveler's responsibility to retain receipts and other records of expense in case of an audit. **No lunch or incidental may be claimed on trips of LESS than 24 hours.**

BREAKFAST	Up to \$7.00	May be claimed for a trip that begins at or before 6:00 a.m. and ends after 8:00 a.m.
LUNCH	Up to \$11.00	May be claimed for a trip that begins at or before 11:00 a.m. and ends at or after 2:00 p.m. on the following day.
DINNER	Up to \$23.00	May be claimed for trips that begin at or before 5:00 p.m. and end at or after 7:00 p.m.
INCIDENTALS	Up to \$5.00	May be claimed for trips over 24 hours.

LODGING

Travel must be 50 miles or more from home to claim lodging expense.

All Counties/Cities located in California (except as noted below):	Actual lodging expense, supported by a receipt, up to \$90 per night, plus tax.
Napa, Riverside, and Sacramento Counties:	Actual lodging expense, supported by a receipt, up to \$95 per night, plus tax.
Los Angeles, Orange, and Ventura Counties and Edwards AFB, excluding the city of Santa Monica:	Actual lodging expense, supported by a receipt, up to \$120 per night, plus tax.
Alameda, Monterey, San Diego, San Mateo,	Actual lodging expense, supported by a receipt,

Santa Clara Counties:	up to \$125 per night, plus tax.
San Francisco County and the City of Santa Monica:	Actual lodging expense, supported by a receipt, up to \$150 per night, plus tax.

TRANSPORTATION

Please choose the most economical method of travel. A personal car or rental car may be used in lieu of other transportation options if it is more cost effective. **Any use of a rental car requires prior authorization by the ICC Staff Manager.**

AIRLINE	All flights are booked thru Southwest Airlines (SWA). Privately arranged airline travel to and from the meeting will be reimbursed for actual costs, up to a maximum of the cost of state contracted airline travel. Southwest air flights must be arranged according to SWABIZ procedures. Please contact ICC Coordinator for more information.
PERSONAL CAR	Actual mileage to and from the meeting will be reimbursed at 0.565 cents per mile with the maximum allowance up to the cost of state contracted airline transportation. Your automobile license number will need to be listed on your travel claim form. Actual mileage to and from the airport will be reimbursed at 0.565 cents per mile.
TAXI/SHUTTLE SERVICE	Fare plus 15% tip is allowed. Requires submission of original receipt.
CAR RENTAL	Actual rental cost, with original receipt, is reimbursed with prior approval. No reimbursement will be made for the purchase of a damage waiver (collision insurance) or "PEC" (Personal Effects Coverage). Gas reimbursed with original receipt.
PARKING	Receipts are required for reimbursement of any amount over \$10.00. Airport parking cannot exceed the economy, long term rate.

GENERAL TRAVEL ARRANGEMENTS

ICC Members must arrange airline travel through www.swabix.com or by calling (800) 435-9792. Please submit your travel needs no later than three weeks prior to the ICC meeting. You will need the following information:

- Your name and fax number
- State that you are traveling under Department of Developmental Services/Interagency Coordinating Council
- Billing Code 86232
- Destination details

It is not necessary to show the airfare cost on your travel worksheet for travel arranged through STS, however you must submit your itinerary with your Travel Expense Claim.

CHILD CARE REIMBURSEMENT

ICC Members who are a parent of a child with special needs may claim reasonable childcare costs for meeting attendance by submitting a signed receipt (including child's name, dates, number of hours and cost per hour) from the provider.

TRAVEL ADVANCES

Travel advances are available to ICC Members by contacting the ICC Coordinator Madeline Journey-Lynn at (916) 654-1590 or Madeline.Journey-Lynn@dds.ca.gov.

Advances may be used to secure your room deposit as well as other travel expenses. Please request a travel advance no later than three weeks prior to travel to allow time for processing and mailing of the advance to you. Travel advances **must be cleared within two months of use** by submitting a travel expense claim or remitting payment for the remaining balance. Following the meeting, a Travel Expense Claim must be submitted to clear the advance before another advance can be issued.

SWABIZ

The SWA website for making reservations is www.SWABIZ.com or call Toll Free 800/435-9792.

To make online reservations, each traveler must establish a Rapids Reward Account before a reservation can be made. The Rapid Rewards phone number is 214/792-4223.

Instructions for STD. 236 Hotel/Motel Transient Tax Waiver

Fill out the STD. 236 to get your Hotel/Motel Transient Occupancy Tax Waived. Please note that not all hotel motel-operators will honor this form as they are not mandated to do so.

Print or type in the following fields

- Date
- Hotel/Motel Name
- Hotel/Motel Address
- Occupancy Dates
- Amount Paid
- Traveler's Name
- Executed At
- Traveler's Signature
- Date Signed

Provide Hotel/Motel Operator with a copy for their records.

If you should have any questions, please call Patric Widmann at 916/654-3722 or Madeline Journey-Lynn at 916-/654-1590.

STATE OF CALIFORNIA

HOTEL/MOTEL TRANSIENT OCCUPANCY TAX WAIVER
(EXEMPTION CERTIFICATION FOR STATE AGENCIES)
STD.236 (NEW 9-91)

HOTEL/MOTEL OPERATOR:

RETAIN THIS WAIVER FOR YOUR FILES TO SUBSTANTIATE YOUR REPORTS
PARTICIPATION BY OPERATORS IS STRICTLY VOLUNTARY

DATE EXECUTED

TO: HOTEL/MOTEL NAME

HOTEL/MOTEL ADDRESS (Number, street, city, state, ZIP code)

This is to certify that I, the undersigned traveler, am a representative or employee of the State agency indicated below; that the charges for the occupancy at the above establishment on the dates set forth below have been, or will be paid for by the State of California; and that such charges are incurred in the performance of my official duties as a representative or employee of the State of California.

OCCUPANCY DATE(S)

AMOUNT PAID
\$

STATE AGENCY NAME

HEADQUARTERS ADDRESS

TRAVELER'S NAME (Print or Type)

I hereby declare under the penalty of perjury that the foregoing statements are true and correct.

EXECUTED AT: (City)

TRAVELER'S SIGNATURE

DATE SIGNED

, CALIFORNIA