

INTERAGENCY COORDINATING COUNCIL (ICC)



NOVEMBER 13, 2014 MEETING MINUTES

MEMBERS/APPOINTEES PRESENT

Lisa Chavez, Karen Lucero, Jim Copeland, Andrea Leon, Cynthia Mantegna, Samantha Carl, Janis Gonzales, Cindy Faris, Robin A. Wells, Sara Einfalt, Lourdes Vizcarra, Arlene Waters, Peggy O'Neill, Kathey Phoenix-Doyle, Amanda Gibson-Smith, Naomi Sandweiss, Ida Tewa

PROXIES PRESENT

Cindy Faris Proxy for Paula Seanez, Rhonda Montoya Proxy for Karen Ziegler

MEMBERS ABSENT

Joanne Corwin, Marc Kolman

OVERVIEW

Lisa Chavez, ICC Co-Chair, welcomed ICC members and guests to the meeting and thanked Cindy Faris and the New Mexico School for the Blind and Visually Impaired (NMSBVI) for hosting the ICC. Lisa asked ICC members and guests to introduce themselves. Lisa distributed copies of the handout guide *Making Main Motions* and asked ICC members to review and use the guide when making motions. Lisa asked for a motion to approve the meeting agenda.

MOTION: Robin A. Wells made a motion to approve the meeting agenda. Cindy Faris seconded the motion. There were no objections or abstentions. The motion passed.

NMSBVI PRESENTATION

Cindy Faris distributed a handout and presented a PowerPoint presentation on the statewide early intervention services provided by the NMSBVI. Cindy stated she has been working on an in-state, national and international level to share information and strategies on how to provide effective home based early intervention services for infants and toddlers who are blind or visually impaired and their families. Cindy has been using video to demonstrate children's progress and to document how orientation and mobility strategies can be effectively used with young children. Cindy has three (3) orientation and mobility providers in NM and she has another group in orientation and mobility training. She has four (4) providers attending university training and these folks have to send in video to be assessed. Cindy highlighted the importance of starting orientation and mobility with young children who are blind or visually impaired before the age of three (3) to support their learning, independence and safety. Other states such as Wyoming and Washington State are starting to implement NMSBVI's model. Cindy showed several video clips of young children with their parents supporting their use of assistive mobility devices (AMDs) to move around on the playground and in the community. Cindy has twenty (20) staff who provide home based early intervention services. Families who agree to be videotaped know the videos will be used for training and for national and

international presentations. Families always have the option to decline being videotaped or to determine if their videotapes are only to be used internally by their IFSP team. Cindy provided a brief overview on how their early intervention program began and she expressed appreciation for the FIT Program, the Navajo Nation and the NMSBVI Board who collaborated to help implement the program. Cindy stated a quarter of her staff will be retiring. She recently hired a Navajo speaker for the NW region who will work on early literacy in Navajo. NMSBVI's early intervention program is using literacy as a means to help families support concept development in their children. Cindy highlighted a number of coming events including the Western Regional Conference which the NMSBVI will co-host with the NM School for the Deaf in September of 2015. Cindy said the NMSBVI Orientation and Mobility Tool has been updated.

ICC CONSENT AGENDA

Lisa Chavez asked for a motion to approve the consent agenda which included the ICC July Meeting Minutes, the September Retreat Minutes, the ICC 2015 Meeting Dates & Locations, and the ICC Financial Report. Lisa asked Andy Gomm for an explanation of the ICC's financial report as it showed a \$3,797.02 deficit. Andy stated Zia, as the ICC's Fiscal Agent, was now under a price agreement instead of a contract. This price agreement should have been renewed in April or May of 2014 but no one knew to do this. In the interim, FIT and Zia have had to do a bid from state purchasing to cover ICC meeting costs until the new price agreement is in place. Zia has to cover some of the ICC meeting costs and will be reimbursed when the price agreement is in place. **MOTION: Peggy O'Neil made a motion to approve the Consent Agenda. Arlene Waters seconded the motion. There were no objections or abstentions. The motion passed.**

VOTING ON PARENT REPRESENTATIVES

Nelli Calame and Nick Nanz applied. Lisa Chavez stated the ICC had the options of voting to accept both parents since there are two open parent positions. Lisa emphasized the importance of ICC members attending all four (4) public meetings and the yearly strategic planning retreat and she asked the ICC Coordinator to discuss this with the parent(s) who are selected. ICC members voted using paper ballots. Both parents were chosen to have their information forwarded to the Governor for appointment.

LEGISLATIVE ADVOCACY TRAINING

Anna Otero Hatanaka presented. Anna is the Director of the Association of Developmental Disabilities Community Providers (ADDCP). ADDCP has 30 members who are Executive Directors of programs across the state providing supports and services to children and adults and their families. Anna has been working as a legislative advocate since 1981. She only advocates for human needs and social justice issues. Anna gave a brief overview of New Mexico's legislative process. The New Mexico State Legislature convenes in regular sessions on the third Tuesday in January each year. The Legislature meets for 60 days in odd-numbered years and for 30 days in even-numbered years. Between regular sessions, legislators serve on

interim committees that study a variety of issues. The Legislature is composed of a 70-member House of Representatives and a 42-member Senate. The members are unpaid for their legislative work, but do receive a daily living allowance for each day of official legislative work. There is diversity in New Mexico's Legislature. Each member brings different life experiences and works collaboratively to discuss issues, make compromises and take action. There are two (2) different types of legislative committees. Interim committees meet in the summer and fall and legislative committees meet during the legislative session.

A bill is a change in law or an appropriation of funds for a specific purpose. Bills require passage in both chambers and the signature of the governor. A bill can be introduced in the House or the Senate or both. A bill can have more than one sponsor or can be joint legislation, meaning identical bills with different sponsors are introduced in both the House and the Senate. A bill is introduced by the sponsor or sponsors and then assigned to one, two or three committee hearings. The committee can choose to pass the bill with or without amendments, defeat it, or table it. Tabling a bill can either mean setting it aside for later consideration (to be added as an amendment onto a larger bill such as an appropriation bill), or it can be a way of defeating a bill without taking a vote. If a bill receives a "Do Pass" from House committees, it goes to the floor of the House to be voted on, then it is sent to the Senate, if the bill receives a "Do Pass" from Senate committees, it goes to the floor of the Senate to be voted on. If the bill passes both the House and the Senate, it goes to the Governor who can sign the bill entirely, or veto the bill entirely. Sometimes there is a roll call vote or a voice vote in both chambers. Anyone can create a bill. All bills have to have a legislative sponsor. Legislative council services draft bills on behalf of a bill's legislative sponsor.

Anna discussed appropriation requests such as a bill asking for money to fund the FIT Cost Study. The legislative sponsor would introduce the bill in the Senate. It would be heard by one or more Senate committees and then be heard by the Senate Finance Committee. The Senate Finance Committee would table the bill and then Anna would advocate to have the bill put into the big money bill. Typically, money bills go to the Senate Finance Committee where they are tabled.

General appropriations bills are introduced in the House and called House Bill 2 (HB2). There are also other budget bills that get introduced in the House as well as the Senate. HB2 receives one (1) committee referral to the House Appropriation and Finance Committee that will break into subcommittees that will look at different parts of the budget and make recommendations. HB2 is then sent to the floor where it is debated and voted on. It is then sent to the Senate, and then it goes to the Senate Finance Committee, who will make Senate amendments to have things included or taken out. The Senate Finance Committee will vote on the amendments that are in or taken out (this is in private) and they then produce a public spreadsheet on what they voted on. This goes to the floor where it is debated and voted on by the entire Senate and the House. If they concur, it goes to the Governor who can sign it all, or

do line item vetoes. If the House decides they do not agree, a Conference Committee comprised of House and Senate members will be formed. There used to be a Conference Committee on HB2, but now there is more dialogue on the budget which is good. A special session will be called if the Governor vetoes the budget.

The governor has 72 hours to sign or veto any legislation passed before the last three (3) days of the legislative session. If the governor takes no action, then a bill is automatically enacted. The governor has 20 days to sign or veto bills passed during the last three (3) days of the session. If the Governor takes no action, then the bill is killed by what is called a "pocket veto."

The Legislative Finance Committee (LFC) holds hearing around the state, then toward the fall, they meet in Santa Fe. At that time, different State departments will go and present their budget recommendations. The LFC will use these budget recommendations to create the LFC budget request for the next fiscal year. At the end of December, or in early January, the LFC will disseminate a document regarding how they think New Mexico State government should be funded. At the same time, the Governor will develop the Executive funding request. FIT has always been included as part of the DOH DDSB budget request. Andy Gomm stated it might be better to have a separate line item for the FIT budget.

Anna emphasized that communication with legislators should happen all year long. Starting in the fall, it is difficult to reach legislators and it is very difficult to talk with them during the Legislative session. Anna encouraged ICC members and guests to talk with their legislators. Legislators care about New Mexico and its people. Anna stated it is important to contact legislators now. Magi Gerety said she has asked parents in her program to write letters to their legislators. Magi said one of the legislators had requested a copy of the FIT Cost Study. Anna requested that a copy of these letters be sent to her to use in her advocacy efforts. Magi stated she has asked the Santa Fe First Born Program and St. Vincent's to write letters. Anna encouraged ICC members, guests and families to come to ADDCP day at the legislature. ADDCP will hold a rally in the rotunda. The ICC also participates in Children and Youth Day at the Legislature. Anna stated that folks should always leave their name and address with their legislators and let them know that you are their constituent. If legislators are in committee, they will not come out of committee. If they are on the floor, you can request they come off the floor briefly to talk with you. Folks can find out who their senator and representative is by calling their local county clerk's office. If you go to the legislative website and look at the tables on the right, you can find the tab that will take you to the list of newly elected legislators. Andy Gomm suggested that as a Governor appointed body, the ICC could invite Cathy Stevenson, Division Director, and Secretary Retta Ward to an ICC meeting to discuss the ICC's legislative priorities. The ICC Finance Committee is requesting a meeting with the Governor's office to discuss the critical funding issues of FIT provider agencies. Andy stated that the Office of General Council is looking at the 2004 insurance legislation. It is legal for a state to impose a cap, but health plans cannot impose a cap. If New Mexico removes the \$3500

insurance cap, then the health plans will have to pay. This would require a bill to change the insurance legislation. Anna stated that ADDCP will consider supporting a bill to change the insurance legislation at their meeting next week.

ICC Legislative Action Plan

The ICC discussed and committed to the following Legislative Action Plan regarding FIT funding bills:

- Committee hearings regarding FIT funding bills will be communicated to Jim Copeland who will communicate this information to the ICC Coordinator who will then send an "Urgent Action Needed" email to the ICC and to the FIT Coordinators list serves.
- Committee hearings regarding other early childhood bills will be sent to the ICC Coordinator who will identify these types of bills in the subject line of the email which will be sent to the ICC and the FIT Coordinators list serves.
- ICC members will attend committee hearings on FIT bills and talk, stand or raise their hands in support.
- ICC members who cannot attend committee hearings will call and/or email their legislators and ask for their support.
- ICC parents will develop a brief personal story postcard of how FIT services helped their child and family and leave these at their legislators' offices. NOTE: PRO can assist with this. The ICC Coordinator will email Lisa Chavez's postcard to use as a guide.
- ICC to request that FIT provider agencies ask families to call or write their legislators about how FIT services helped their child and family and ask their legislators to support increased FIT funding.
- ICC to request that FIT provider agencies talk with the families in their programs about attending the January 20, 2015 Children and Youth Day at the Legislature. The ICC will provide a \$50.00 stipend, round trip mileage, assistance in finding their legislators offices, etc.
- Copies of parent letters regarding the benefits of FIT services to be emailed to Anna Otero Hatanaka at Anna's cell phone number is 505-250-6229.
- ICC members to attend and also request that FIT providers attend the rally at 11:00 am in the Rotunda on the February 11, 2015 ADDCP Day at the Legislature.
- ICC Executive Committee to consider how to weave the 2015 IDEA & ADA anniversaries into the ICC's Legislative Fact Sheets.
- ICC Executive Committee to work on having a Legislator appointed to the ICC.
- ICC parents to participate in Children & Youth Day at the Legislature.
- FIT providers to be emailed ICC Legislative Fact Sheets so they can share these with interested families.
- ICC to attend the Health and Human Services Subcommittee on November 24-25 in Room 307 at the State Capital. Public comment can be given starting at 4:30 pm.
- ICC members to make phone calls, send emails to their representatives to let them know the importance of the FIT Program in NM and what it would mean to NM's children and

families if these services were not available or if additional FIT provider agencies were forced to stop providing critical early intervention services.

- ICC members who cannot attend committee hearings can go to the legislative website and watch these hearings. While watching a hearing, ICC members can call and email their representatives on the committee and ask them to support FIT funding.

Legislative Parking:

- East side of Roundhouse in the PERA parking lot.
- Gallisteo Parking Garage
- Garret's Desert Inn - \$8.00 per day.
- Southwest corner of Paseo de Peralta and Old Santa Fe Trail - dirt lot. \$10.00 per day
- Shuttle pick-up in the parking lots at State buildings.
- Take Railrunner - Provides van to Roundhouse.

Hotels:

- Hotel Santa Fe and other area hotels - request reduced legislative rate.

MOTION: Jim Copeland made a motion that the ICC supports ADDCP's legislative request for rate increases for the FIT Program. Peggy O'Neill seconded the motion. There were no objections or abstentions. The motion passed.

ELIGIBILITY LIST-ICD-9 CODES - CONDITION TYPE

Andy Gomm and Yvette Dominguez reported. Andy distributed copies of the draft list. Andy stated FIT providers have waiting a long time for the list. This is a much more comprehensive, definitive list that includes rarer genetic conditions. FIT providers will use the list to classify children correctly. Similar lists from Colorado and Texas were used as a guide although neither of these states serve children at risk. The FIT "Yellow Card" was the model for the list. The list was developed by doctors (including Janis Gonzales, Judy Ledman, and Andy Shi), representatives from the state supported schools (Joanne Corwin and Cindy Faris) and FIT staff (Verna Trujillo and Yvette Dominguez). The ICC thanked Janis Gonzales for her assistance with diagnoses and codes. Andy stated there will always be rare conditions that will need to be added in the future. To add conditions, contact Yvette Dominguez at the FIT Program. FIT worked with Dr. Donna Weston from California to look at diagnostic codes for mental diagnoses for children birth to three years. Dr. Weston works with Zero to Three. The list is categorized by Condition Types and ICD-9 Codes. Bolded font indicates where to find the condition in DC 0-3. Yvette Dominguez stated she could send FIT Coordinators the list as an Excel worksheet or as an Adobe PDF. If it is sent as an Excel worksheet, then FIT providers could do a search by entering a code. Andy Gomm stated it might be better to send the list as a PDF because if it is sent as an Excel worksheet, the way a search is done might sort the document incorrectly.

ICC members and guests asked the following questions and provided the following feedback:

- Providers typically use developmental delay for some conditions (such as Expressive Language Disorder) that are now under Mental/Psychosocial Disorders which could be really confusing to Family Service Coordinators (FSCs).

Reply: Andy Gomm replied that FIT may want to keep the medical diagnoses on the list and have developmental delay as the category for some conditions.

- Will this list be part of FIT KIDS?

Reply: Andy Gomm replied that a limited list will be provided for FIT KIDS data entry folks. Yvette Dominguez stated these codes are all billable through Medicaid.

- When will the list be distributed to FIT providers?

Reply: Andy Gomm replied the list will be distributed in the next week or so.

- What type of training will be available for FIT providers?

Reply: Andy Gomm replied that it could be a two page instruction memo or a webinar. Consensus was that a webinar followed by a two page instruction memo would be the best.

- Can a psychologist on an evaluation team give a diagnosis?

Reply: Andy Gomm replied stated a psychologist could give a diagnosis.

- Robin Wells suggested that neurological or developmental be added to the condition types and then list items such as expressive language disorder underneath the appropriate categories.

PARENT PANEL

Rosie presented. She has a seven (7) year old daughter with Down syndrome. Rosie works with Parents Reaching Out (PRO) on a volunteer basis. Her daughter was referred to early intervention while in the Presbyterian NICU. The referral process was disappointing. A social worker came in, gave her a packet and said read this packet when you have a moment. Rosie stated that it may look like parents have a lot of time to read information while their child is in the NICU, but it is much more helpful to be guided through the information. It was a very difficult time and Rosie could not hold her baby until her daughter was five (5) days old. The social worker spent a lot of time with the single moms whose babies were in the NICU and did not give Rosie and her husband the same level of support. In some ways, Rosie self-referred to early intervention. The best support Rosie and her husband received came from Nadine Maes. They choose an early intervention program that was close to their home. Two very nice young ladies provided the evaluation which went okay. Rosie and her husband were able to provide input into the evaluation and the IFSP. Rosie stated she felt "pushed" to sign the IFSP even though she did not think the agency's service model would work for their child and family. Their daughter needed the support of an SLP and a PT. Rosie and her husband were told the agency could not provide these services but they could provide a Developmental Specialist. Rosie contacted another area early intervention provider agency and they were able to receive the services their child and family needed. It was wonderful to have great early intervention services. Transition was very difficult. They were fortunate in that their child was able to

receive one (1) extra year of FIT services. The transition process went well and they decided not to transition their daughter into preschool. She is now a first grader in a full inclusion, bilingual classroom in a small Charter school. FIT provided great services but some children need one (1) more year of FIT services before starting school. Rosie stated she is on a mission to provide information and support to monolingual Spanish families who often don't have information correctly given to them. Rosie works as the first contact for Spanish only families. Magi Gerety stated it would be helpful to meet with pregnant moms who have been told their babies might have Down syndrome. Rosie said the mourning process is different for every mom and dad. It never goes away but comes and goes at different times. Rosie said it is so important to let parents of babies with Down Syndrome know about the Rio Grande Down Syndrome Network. Rosie said heart surgery for a child with Down syndrome is so scary and other parents who have been through this offer the support needed. Rosie stated parents who are not here legally are very fearful about reaching out for the information and services their children and families need.

RECOGNITION OF OUTGOING CO-CHAIRS

Lisa Chavez and Karen Lucero were thanked for their years of service as ICC Co-Chairs. The incoming Co-Chairs, Peggy O'Neill and Andrea Leon, presented thank you cards and certificates of appreciation.

ICC PARENT PANEL REFLECTION

ICC member reflection on the Parent Panel was as follows:

- Referral process from NICUs to early intervention still needs work including training for hospital social workers.
- Early intervention providers could visit hospital social workers, give brochures, offer training, etc.
- Transition from early intervention to preschool can be an issue, especially during the summer months.
- PRO provides twenty (20) hours a week of assistance at the UNMH NICU.
- Monolingual Spanish families may not be given information about early intervention services in a way they can understand what is available for their children and families.
- Obstetricians serving high-risk moms need information and training.
- Some families do not like or want the Primary Service Provider Model.
- Some service providers are not able to provide effective bilingual services.
- Families experience various aspects of the grieving process throughout their lives. They need sensitive support and services so they can develop new dreams for their children.
- Families need ready access to information about FIT services. FIT materials need to be available at places where families go.
- FIT paperwork requirements/timelines can be difficult for new staff.
- FIT providers are doing their best to match service providers to families, especially families new to early intervention services.

- Increase in staff turnover at early intervention program. Persons applying for early intervention positions don't come with the skills or expertise needed to meet job requirements.
- Parents, family members, and extended family members experience the grieving process.
- Mentoring for new staff is critical.
- Primary Service Provider Model is challenging when trying to make the best possible match for families.
- Required paperwork timelines can negatively impact the developing relationships between families and service providers.

STATE SYSTEMATIC IMPROVEMENT PLAN (SSIP) RECOMMENDATIONS

Patti Ramsey presented. The State Systematic Improvement Plan (SSIP) focuses on improving results for children with disabilities and their families. The SSIP is a multiyear improvement plan. The task is to choose a State Identified Measurable Result (SIMR) and pick strategies to achieve the result. This is an added indicator for our Annual Performance Report (APR). Phase 1 is due in April 2015. The SIMR has to meet the following criteria:

- It has to be clearly based on data.
- It has to be a child or family level outcome.
- It can be a single result or a cluster of results.
- It has to be based on an identified need.
- It has to include evidenced based practices.
- It has to be aligned with current initiatives.
- FIT has to have the capacity to implement it.

New Mexico's SIMR will look at all three (3) outcomes for children under developmental delay who were in services for at least one (1) year and who exited the FIT Program. FIT will identify eight (8) provider agencies with reliable Early Childhood Outcomes (ECO) data who are willing to participate in the initiative. These provider agencies must have strong supportive leadership and good professional development in place. New Mexico's SIMR is: *"If we write quality routines based IFSPs with functional descriptions, outcomes and strategies which utilize transdisciplinary team participation, then functional IFSP strategies will be implemented by a transdisciplinary team who support routines based early intervention, and children will have improved functioning in their social emotional skills, acquisition and use of knowledge and skills, and in taking actions to meet their needs."* **MOTION: Robin A. Wells made a motion that the ICC endorses the State Systemic Improvement Plan (SSIP) recommended by the Ad Hoc SSIP subcommittee. Cindy Faris seconded the motion. There were no objections or abstentions. The motion passed.**

RACE TO THE TOP - TIERED QUALITY RATING & IMPROVEMENT SYSTEM (TQRIS) REPORT

Linda Askew reported. She distributed a PowerPoint handout. The Race to the Top grant was funded by the US Department of Education and the US Department of Health and Human Services. The grant applies to all New Mexico early childhood programs for children birth to five. There are three (3) FIT Race to the Top priorities which are: the TQRIS, continuous quality improvement, and data. A number of other states are starting this initiative. New Mexico's system is called FOCUS which is the focus on young children's learning. Linda reviewed the background of FIT FOCUS which includes moving beyond compliance to focusing on quality, self-assessment and continuous quality improvement, support through training and coaching, and verification by the FIT Program. Linda highlighted the FIT FOCUS TQRIS structure and process. She reviewed the work to date and the process for determining FIT essential elements of quality. TQRIS is moving from compliance to focusing on quality. It goes beyond Community Based Assessments (CBAs) and Annual Performance Reports (APRs) and looks at the assessment of quality practices. FIT will be implementing a continuous quality improvement process by having FIT providers trained to utilize tools to assess their internal quality and make changes to improve their performance. FIT will look at the continuous quality improvement process and tools to assess quality within agencies. FIT will access training and technical assistance at the national level. Larry Edelman will assist with the Video Demonstration Project. The ICC Quality Committee and the FIT FOCUS Stakeholders Group will provide input and oversight. FIT and the Early Childhood Learning Network (ECLN) have drafted FIT Essential Elements of Quality which will be reviewed and edited by the FIT FOCUS Stakeholders Group. FIT Essential Elements of Quality looks at elements of quality that impact caregivers' ability to support the development of their children. FIT is looking at the following eleven (11) areas of practice:

- Family Practice
- Cultural Competence
- Professional Development
- Assessment
- Leadership
- Intervention/Intentional/Instructional Practice
- Team Collaboration
- Quality IFSP
- Inclusion
- Reflection
- Environmental Practices
- Transition
- Social Emotional Development/Promoting Social Relationships

FIT is looking at ways to use video as a tool to support continuous quality improvement. Andy Gomm stated FIT has about seven (7) months to develop the processes and tools. Provider

implementation costs have been discussed with Cathy Stevenson and Mark Kolman. The possibility of doing a new FIT rate study that includes the cost of implementing TQRIS is being considered. For example, if FIT expects each provider agency to have a staff person review all program IFSPs twice a year, a fiscal impact study should be done on how much time this would take and what would be the cost to the agency. Anna Otero Hatanaka stated FIT needs \$10,000,000 to fund the 2003 Cost Study but this figure does not include all the additional requirements that have been added since 2003.

ICC COMMITTEE REPORTS

Quality Committee

Cindy Mantegna, Quality Committee Chair, reported. She distributed copies of the committee's action plan. The committee deleted the action to work on home visiting guidance. The committee has been working on the responsibilities of qualified IDA evaluators. She distributed a draft entitled *Qualified IDA Evaluator Responsibilities* and asked that this draft not be disseminated. Revisions to the draft include input from the field. Existing evaluators may be grandfathered in and the FIT Program will determine the criteria for this. Cindy stated the committee is asking the ICC to approve the draft *Qualified IDA Evaluator Responsibilities* so that the draft can be reviewed by the FIT Program.

Kathey Phoenix-Doyle, ECO Subcommittee Chair reported. Kathey distributed a detailed Early Childhood Outcomes (ECO) packet developed by the ECO Subcommittee which included the following documents:

- An Introduction to Early Childhood Outcomes brochure for parents;
- Draft NM Child Outcomes Summary Form with a sample completed form;
- NM Early Childhood Outcome Descriptors;
- Decision Tree for Summary Rating Discussions;
- Measure of Engagement, Independence, and Social Relationships (MEISR).

Kathey also distributed a list of 6 recommendations that the ECO Subcommittee would like the ICC to endorse as well as a description of the MEISR and why the ECO Subcommittee would like the MEISR added as an approved FIT assessment tool. The ECO Subcommittee is also recommending that the Child ECO Summary Form not be completed with the parents present.

This recommendation generated the following discussion:

- Sophie Bertrand commended the work of the ECO Subcommittee. She expressed concern about the recommendation to not have the parents be part of the ECO scoring. Sophie stated parents need to have an active role and practice working through the ECO Decision Tree so they are able to advocate for their child when they leave the FIT Program. Parents should be asked to help figure out where their child is.
- Kathey Phoenix-Doyle said parents score the MEISR and the information from the MEISR will be used to help score the ECO.

- Lisa Chavez stated that as a parent, we think our "child is doing great", and it can be hard to help parents understand where their child is functioning.
- Cindy Mantegna said programs may not be giving children accurate ECO scores because they want to preserve their relationships with parents.
- Magi Gerety stated New Mexico was one of the few states that included parents in scoring ECOs. The purpose of ECO at the national level is to provide data.
- Sara Einfalt stated that when parents are shown their child's ECO scores, if the parents don't like them, then there can be a more in depth discussion at that time about why and how their child was given the scores.
- Cindy Faris said she really likes the brochure for the parents.
- Samantha Carl said she likes numbers but at the beginning of her child's services, it was hard to deal with all the assessment results. Parents who wants all the details of their child's ECO scores should be taken through the Decision Tree.
- Andy Gomm stated this was a rich discussion. The ECO was designed for national accountability. It was never meant to help families. Some families would want to know where their child falls. Andy asked if ECO scores might be included on the IFSP page. If we keep the ECO outside of the IFSP, is it always this extra thing that happens.
- Kathey Phoenix-Doyle stated the ECO is not as separated as it has been in the past. Family Service Coordinators should have training on how to share ECO scores with parents.
- Michelle Staley - IFSP outcomes, no matter what they are, will always support the three (3) ECO areas.

Kathey stated the ECO Subcommittee has met for nine (9) months and has completed its work. Cindy Mantegna stated the Quality Committee is excited about the draft ICD-9 Codes. The Quality Committee would like to take a look at the draft list and work on making the list more user friendly. **MOTION: Kathey Phoenix-Doyle made a motion that the ICC endorses the six (6) recommendations of the ECO subcommittee and asks the FIT Program to adopt the ECO Summary Form, the ECO descriptors, the ECO Decision Tree, the ECO parent brochure, the Sample Child Outcome Summary Form, and add the Measure of Engagement, Independence, and Social Relationships (MEISR-COSF) to the list of approved FIT assessment tools, and for the FIT Program to change the requirement to add to FIT-KIDS the initial ECO scores in the first month of billing to 60 days from the date of the IFSP. Cindy Faris seconded the motion. There were no objections or abstentions. The motion passed.**

Qualified Workforce

Robin Wells reported. Robin discussed the need for better collaboration regarding training opportunities available through the FIT Program, the Children, Youth and Families Department and Early Head Start. **Motion: Robin A. Wells moved that the Qualified Workforce Committee will add a 3rd critical issue to their action plan in order to identify birth to**

three training opportunities which will be put into a training schedule that will be kept updated and posted on the FIT website and other appropriate websites as identified. Cindy Faris seconded the motion. There were no objections or abstentions. The motion passed. Amanda Gibson Smith stated that Early Head Start can provide ten (10) extra training slots and post this availability on their training calendar.

FIT Forms & Process Review

Sara Einfalt reported. The FIT Program still needs to finish making the corrections to the Spanish IFSP form and to send out the parent letter. Sara asked that the updated FIT forms be more accessible and available on the FIT website. She asked that FIT distribute required forms to programs in a timely manner. Andy Gomm informed the ICC that FIT is not covered under incident reporting to DOH. Abuse and neglect still needs to be reported to CYFD. Andy asked if the Forms Committee would be taking a look at the areas in the FIT system that need to be streamlined. Andy asked if all ICC Committees should be working on this. Cindy Mantegna said it would fit the best under the Quality Committee. Andy stated that if we can't find more money to pay providers, we can at least find ways to cut down on some of the requirements. ***MOTION: Cindy Mantegna made a motion that the Quality Committee will work on streamlining processes within the FIT system. Sara Einfalt seconded the motion. There were no objections or abstentions. The motion passed.***

ICC Finance & Funding Committee

Peggy O'Neill reported. The committee is working on one critical issue which is to advise and assist the DOH, DDS in the implementation of the FIT budget. Several ADDCP and ICC members attended legislative subcommittee meetings to talk about the need for provider rate increases. Legislators are supportive of FIT provider agencies. The Executive Committee drafted and mailed a letter to the Governor that discussed provider funding issues. A meeting with the Governor will be requested using the online request form. Hopefully, the meeting will happen before the legislative session. A meeting with Cathy Stevenson and Secretary Retta Ward will also be requested.

Interagency Coordination

Rhonda Montoya reported on behalf of Karen Ziegler. She distributed draft copies of the *New Mexico Family Infant Toddler (FIT) Program Inclusive Practices Guide*. Yvette Dominguez provided a brief overview of the *Inclusive Practices Guide*. Yvette thanked the committee, ECLN, PRO, and others for their work on the guide. The guide is designed to support understanding of inclusive practices from intake through transition. The guide will be presented in a FIT webinar, and it will be incorporated into service coordination training and FIT core trainings. The committee will continue working on Autism. ***MOTION: Amanda Gibson-Smith made a motion that the ICC endorses the New Mexico Family Infant Toddler (FIT) Program Inclusive Practices Guide. Andrea Leon seconded the motion. There were no objections or abstentions. The motion passed.***

MOTION: Arleen Waters made a motion to approve committee reports. Robin A. Wells seconded the motion. There were no objections or abstentions. The motion passed.

ICC Committee Chairs will send their updated Action Plans to the ICC Coordinator who will collate them into the ICC Strategic Plan. The ICC will vote on the Strategic Plan at the January 2015 ICC meeting.

LEAD AGENCY REPORT

Andy Gomm distributed copies of the report for ICC members to read after the meeting. There was not time for Andy to review the report. Andy stated tribal numbers had been added to the report.

J. PAUL TAYLOR TASK FORCE RECOMMENDATIONS

Claudia Medina presented. Claudia is the Chair of the J. Paul Taylor Task Force. The task force has been meeting consistently every month for two years. The task force has 56 members that include community advocates, service providers, representatives from the LFC and MCOs, representatives from DOH, CYFD, HSD, private foundations, Anna Otero Hatanaka and Andy Gomm. During the last two years, the task force developed the Executive Summary. The main objective of the task force is to identify children from prenatal to five years of age who might be abused or neglected. The task force is partnering with primary care and behavioral health providers. 700,000 children in New Mexico are on Medicaid. The task force wants to identify children who were referred to Child Protective Services but the allegation was not substantiated and who are still at risk of being abused. Community health worker will be connected to these families. The task force is recommending that FIT reinstate services for children at environmental risk. Anna Otero Hatanaka was the only member who opposed the recommendation. The task force is working to ensure that at the county, regional and state level, everyone is talking to each other and no child is lost. UNM was appointed by the Legislature to bring players together in a neutral place to discuss the issues.

ICC members made the following comments:

- Anna Otero Hatanaka clarified that she was the only member who vocalizes opposition to FIT reinstating services to children at environmental risk although other members were opposed. Cuts to the at risk population were made under DOH Secretary Vigil.
- Robin A. Wells stated the DOH and the ICC were faced with funding issues and had to make a hard decision. The ICC supports the need to serve children at environmental risk. The ICC also supports the rates in the 2003 Cost Study and not all the rates have been funded.
- Anna Otero Hatanaka asked that if the task force is recommending that FIT reinstate services to children at environmental risk, then the task force should also recommend the funding needed for this.

Claudia stated the task force is a powerful group that can advocate for the funding FIT needs. Claudia said the task force needs the dollar amount between now and next Tuesday. We need to join together to fight for more funding. The task force wants to be an ally. Claudia stated she couldn't promise that the task force could get more funding, but they would do their best to get the funding needed.

ICC members made the following comments:

- Peggy O'Neill - The ICC was charged with slowing the growth of the FIT Program because of the economy. New Mexico is one of only a few states that provide services to children at risk. The provider agencies in the FIT system are at risk of closing their doors. The 2003 rate study indicated that FIT provider agencies were underfunded. Only one (1) rate is being paid at the rates recommended in 2003. Provider agencies are beyond struggling and there are agencies close to having to stop providing early intervention services. The FIT Program may not have the capacity to reinstate services to children at environmental risk. Agencies have lost experienced staff who have had to find higher paying jobs.
- Anna Otero Hatanaka - The dollar amount needed is \$10,000,000. This amount will not cover all the requirements that have been added over the past ten (10) years. Anna asked how FIT provider agencies could be asked to expand services when they are struggling to deliver the current level of services.
- Sophie Bertrand - The FIT system does not have the workforce needed to provide these services. It is not just about training, it is also about being able to pay a wage that attracts and keeps people working at FIT provider agencies.

Claudia stated the full report includes capacity building. She asked Andy Gomm if more federal dollars were available for FIT. Andy Gomm replied that FIT has a federal grant and also maximizes the amount that Medicaid pays. Cindy Faris asked Claudia if the task force was coordinating with the UNMH program for child abuse prevention and Claudia stated they were. Cindy Faris asked how FIT and home visiting services would go together. Claudia said it would depend on the needs of individual children and their families. Claudia said the task force would support the funding amount FIT needs but they could not lobby on behalf of this funding. Claudia suggested that the ICC use the task force's Executive Summary to help advocate for the funding needed.

Andy Gomm stated the DOH had to make these cuts because of the recession. It is a perverse public policy to have children with no identified risk factors receiving weekly home visits and kids at high risk only getting two (2) visits a month. Andy stated the FIT Program will look at delivered services to children at risk last year, as well as delivered service to children at risk this year with the slight increase in rates. FIT can also run the rates at four (4) hours per month and at the average of six (6) hours per month. FIT can also run the rates at the 2003 Rate Study rates plus COLAs. Claudia stated the task force needs this information as soon as

possible. They have a meeting with the Health and Human Services Committee coming up. Andy Gomm said FIT would run the numbers for both environmental and medical biological risk and use the cost study rates.

ICC members made the following comments:

- Cindy Mantegna stated that children at environmental risk are an expensive population to serve. They need family therapy, social work and developmental specialist services. There are more no shows with this population. There are health issues, mental health issues, housing issues, and families in crisis.
- Peggy O'Neill stated home visiting programs have healthy funding and should be providing services to children at environmental risk.
- Sara Einfalt said CYFD and Head Start should be serving these children.
- Kathey Phoenix-Doyle said she is an advocate for services for children at environmental risk. CYFD focuses on bonding and not on development. Kathey said there is no harm in looking at the cost of serving this population. We are trying to work together for all children because they all matter.
- Anna Otero Hatanaka said the ICC was not in favor of cutting services to children at risk but was required to make recommendations on how to reduce services. Dave Schmet (spelling?) will be the lobbyist for the task force.

MEETING ANNOUNCEMENTS & EVALUATION

Karen Lucero, ICC Co-Chair, asked members and guests to complete and turn in the meeting evaluation forms. Karen asked for a motion to adjourn the meeting. **MOTION: Arlene Waters made a motion to adjourn the meeting. Andrea Leon seconded the motion. There were no objections or abstentions. The meeting was adjourned at 5:00 pm.**

FOLLOW-UP MEETING RECOMMENDATIONS / TASKS

RECOMMENDATIONS/TASKS	STATUS
Andy Gomm will run the numbers for both environmental and medical biological risk services using the cost study rates and COLAs and provide these figures to the J. Paul Taylor Task Force.	
FIT Program to adopt the ECO Summary Form, the ECO descriptors, the ECO Decision Tree, the ECO parent brochure, the Sample Child Outcome Summary Form, and add the Measure of Engagement, Independence, and Social Relationships (MEISR-COSF) to the list of approved FIT assessment tools, and the FIT Program to change the requirement to add to FIT-KIDS the initial ECO scores in the	

ICC NOVEMBER 2014 MEETING MINUTES

Page 17

first month of billing to 60 days from the date of the IFSP.	
ICC members to implement their Legislative Action Plan.	
ICC Committee Chairs to send their updated Committee Action Plans to the ICC Coordinator to collate in the ICC's Strategic Plan.	
ICC to vote to approve the ICC's Strategic Plan at the January 2015 ICC meeting.	