

Approved 3/24/06

**INTERAGENCY COORDINATING COUNCIL
COMMITTEE MEETING NOTES**

COMMITTEE: Integrated Services & Health

RECORDER: Annette Ostertag

DATE: 11/17/05

COMMITTEE MEMBERS

PRESENT: Arleen Downing, Gretchen Hester, Hallie Morrow, Ed Gold, Jean Brunelli, Robin Millar, Peter Michael Miller, Dwight Lee, Nenita Herrera, Beverly Ching

ABSENT: Sylvia Carlisle, Toni Gonzales, Sandy Harvey, Kat Lowrance, Eileen McCauley, Mara McGrath, Ivette Pena

GUESTS: Felice Weber Parisi

LIAISON: Patric Widmann, Sam Yang and Nancy Sager

MEETING NOTES

I. INTRODUCTION AND WELCOME

Meeting was convened at 1:45. Arleen shared that she had received a letter from Jean Brunelli announcing that she is retiring and planning to start a new adventure in other parts of her life. This is her last committee meeting.

Jean shared new website resources:

www.ncsl.org - National Conference of State Legislators

www.mypyramid.gov - children can check/create their own food pyramids

II. AGENDA REVIEW

Agenda was reviewed with no additions

III. REVIEW AND APPROVAL OF PRIOR MEETING NOTES

September 2005 minutes were approved with the correction in the spelling Kat Lowrance's last name.

IV. DISCUSSION OF INDICATORS

Reviewed State Performance Plan (SPP) Template – Part C for 2005-2010 (from OSEP)

ISHC Committee Recommendations for Indicators:

Indicator #1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.
Concern: Measurement needs to be clarified (data referral?).

Recommendation: Committee recognized that services within 60 days are too long – therefore add: “Services to be completed within 30 days from the date of IFSP meeting.” However, it should be the same in the two systems - Part B (Education) and Part C (Early Start).

Indicator # 3: Percent of Infant and toddlers with IFSP who demonstrate improved:

Concern: Having appropriate evaluation and assessment tools for each individual child and are administered by appropriately trained persons.

Recommendation: Establish 3 different categories reportably by: “at risk”, “established risk” and “developmentally delayed” (Lanterman Act) to represent the data sample on 30 records for each category.

Indicator # 5: Child Find - Percent of Infants and toddlers birth to 1 with IFSPs compared to:
No changes recommended

Indicator #6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

Recommendation: On page 12 of the SPP Template, 3rd paragraph, 2nd sentence reads, “ Fully ten percent of children born in the United States are born in Los Angeles, therefore this process is bound to yield increased numbers of referrals to Early Start programs in the southern California region. Los Angeles should be changed to reflect the three counties: San Bernardino, Alameda and Riverside.

Committee has also requested that DDS mail “Reasons for Concern” brochure to all ISH committee members

Indicators 9 –12 & 14:

Committee chairs provided further clarification on these indicators. No changes required.

Indicator #13: **Percent of mediations reduction from 100% to 50% held that resulted in mediation agreements.**

Regarding paragraph on *Overview of the State Performance Plan Development*, second sentence: “The stakeholders chose to set the criteria

for this item at 100%". The committee members agreed with the DDS Early Start team lowering of this target from 100% to 50%.

V. STRATEGIC PLANNING MEETING (January 11 – 12, 2006)

Chairs were directed by the ICC Executive committee to bring committee concerns and recommendations for presentation at the Strategic Planning meeting on the following issues:

DDS RESPONSE TO ICC PRIORITIES, OUTCOMES AND RECOMMENDATIONS document:

- Committee members are asked to review this document and email their concerns and recommendations to the Integrated Services and Health (ISH) Chairs and to Patric Widmann, DDS.
- Committee members have also been asked to look at past ISHC minutes and select priorities for the next two years. Patric will pull past committee minutes to send to all members.

ISH committee members emphasized the need for more parent representation.

Other priorities/concerns that should be addressed by the ICC:

- Increasing Parent representation in ICC
- FRC – role of parents on the ICC
- ICC meeting locations across state
- LEA representative on the committee
- Look at Integrated Services - Health membership list - 2003
- Primary prevention (developmental disabilities)
 - Causes (evaluation)
 - Fetal Alcohol Syndrome (FAS)
- Secondary Prevention
 - Target Hi-Risk population
- Tertiary Prevention
 - Target for established risk
- Increase Physician referrals to Early Start -
Concerns:
 - MD education
 - MD reluctant to refer
 - MD doesn't listen to (or believe) parent
- Increase parental knowledge to self-refer
- Increase knowledge of community agencies and child care centers about how to refer to Early Start (ensure assessments are appropriate to the child)
- Increase health assessments at earlier age and track/monitor
- Identify the numbers of deaf/blind and/or medically fragile

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- Third party payer funding for developmental evaluation
- Train child care providers to identify children and refer to Early Start
- Local variation in CCS participation on IFSP team
- HIPPA barriers to communication
- Multidisciplinary team – clarify what this actually means
- Too much fragmentation for parent – need “one stop shop”
- Agencies not trained to help - parent told to go to other agency rather than refer– training needed
- Early Start Service Coordination Institute will include training on Health, Vision and Hearing
- Training & technical assistance for service coordinators
- Increase use of Early Start Personnel Development Fund training grants
- Early Start is LEA and Regional Center – data – include the following programs:
 - California Children Services
 - Family Resource Centers
 - Mental Health
 - Social Services
 - Alcohol & Drug
 - Managed Care
- Integrated and Coordinated

Chairs/Committee need to select the top three priorities from this list.

ADJOURNMENT: The committee adjourned at 4:30 PM