Friday, November 19, 2021 Meeting Minutes ZOOM Meeting Platform

Public Meeting 9:30 a.m. to 12:30 p.m.

A regular public meeting of the New Jersey State Interagency Coordinating Council (SICC) was held on Friday, November 19, 2021. Due to COVID-19 pandemic, the meeting was held via ZOOM meeting platform. The meeting was called to order at 9:34 am by Joyce Salzberg, Acting Chair.

Attendance

I. Maintained by the Department of Health (DOH)

Welcome

I. Joyce Salzberg welcomed attendees and read the Welcome Statement

Introductions

- I. SICC members and DOH representatives were introduced.
- II. Ouorum declared
- III. Public members signed their attendance through the chat box.

Approval of Minutes

- I. Chanell McDevitt motioned to approve the September 24, 2021, meeting minutes; Seconded by Michele Christopoulos.
- II. The September 24, 2021 minutes were approved; no opposed; no discussion.
- III. Kathleen Hinnigan-Cohen motioned to approve the October 8, 2021, meeting minutes; Seconded by Chanell McDevitt.
- IV. The October 8, 2021 minutes were approved; no opposed; no discussion.

SICC Member Updates

I. No Updates

SICC Standing & Ad Hoc Committees Reports

I. Administrative/Policy Committee, Chair-Chanell McDevitt

MOTION: Chanell McDevitt motioned that the SICC request the Family Link Regional Early Intervention Collaborative (REIC) assign the performance of administrative duties in support of the SICC to an existing Program Specialist position funded by Family Link, and further

authorize Family Link to use the SICC's budgeted funding for a part-time Administrative Assistant to fund the SICC administrative support duties of that Program Specialist position. Brandy Acolia is in this position at this time. Seconded by Corinne Catalano

APPROVED; no opposed; no discussion

- II. Service Delivery Committee, Chair-Virginia Lynn
 - A. Virginia Lynn shared "A Revised Proposed Recommendations of the SICC Service Delivery Committee" document with the committee members prior to the meeting.
 - i. # 1-Standard Business Operations and Hours.

TABLED: Would like to table # 1 for further analysis by the Committee.

ii. #2-DOH should allow Early Intervention Providers (EIPs) to provide services to Children and Families in 1 or more counties. Committee agrees with this recommendation.

<u>MOTION</u>: Virginia Lynn motioned that the Council vote in agreement that EIPs be able to provide services in 1 or more counties. Seconded by Kathleen Hinnigan-Cohen APPROVED; no opposed; no discussion

iii. # 3-DOH should eliminate the designation and contracting of EIPs as comprehensive and/or vendors. Committee agrees to eliminate the designation, however, there should be specific competencies for low incidence specialty agencies, specifically hearing and vision.

<u>MOTION</u>: Virginia Lynn motioned that the Council vote in agreement to eliminate the designation of comprehensive and vendor in the new RFP, with the exception of specialty agencies.

Seconded by Kathleen Hinnigan-Cohen

APPROVED; no opposed; no discussion

- iv. # 4-DOH should allow programs that serve "low incidence" populations (hearing and vision impaired only) to be designated as the Early Intervention Program provided:
 - 1. The agency meets all the identified requirements in the Request for Application (RFA), and
 - 2. The agency takes responsibility for providing all identified services on an assigned child's Individualized Family Service Plan (IFSP.)

<u>MOTION</u>: Virginia Lynn motioned that the Council vote in agreement. Seconded by Michele Christopoulos <u>APPROVED</u>; no opposed; no discussion

v. #5-DOH should establish procedures to assign children through a rotation

process that will operate in each county. Committee agrees, considering that the low incidence populations should have their own rotation. Committee has not decided exactly what the rotational assignment should look like and would like to table # 5 for further analysis by the Committee.

vi. #6-DOH should require that EIPs be responsible to provide services geographically to an entire county, consistent with the established rotation procedures. Committee agrees. Susan Evans added that #6 is contingent on #5.

<u>MOTION</u>: Virginia Lynn motioned that the Council vote in agreement. Seconded by Joyce Salzberg APPROVED; no opposed; no discussion

vii. # 13-DOH should require each EIP to conduct the New Jersey Early Intervention System (NJEIS) business using the Early Intervention Management System (EIMS) and assume responsibility for all technology components needed by the agency and their practitioners. Committee recommends removing the "and assume responsibility for all technology components needed by the agency and their practitioners." Committee also recommends enforcement of NJEIS-17 for the agency and practitioners providing direct service provisions. Susan Evans clarified EIMS is a generic term and not necessarily specific to Public Consulting Group (PCG.)

<u>MOTION</u>: Virginia Lynn motioned that the Council vote in agreement with Committee updates to # 13.

Seconded by Kathleen Hinnigan-Cohen

DISCUSSION: Some programs use different systems that have information not found in EIMS. It is important to capture a child's full record/all information in the EIMS and not fracture the child's record according to Susan Evans.

APPROVED; no opposed

viii. # 14-DOH should require assigned EIPs to participate in all IFSP development, including the initial IFSP.

Committee recommends amending # 14 to state "invite and encourage" rather than "require."

<u>MOTION</u>: Virginia Lynn motioned that the Council amend # 14 to state DOH should invite and encourage assigned EIPs to participate in all IFSP development, including the initial IFSP.

Seconded by Chanell McDevitt

APPROVED; no opposed; no discussion

- ix. # 16-DOH should revise the current personnel standards to include:
 - 1. The creation of a specific personnel standard for Targeted Evaluation

Team (TET) members;

- 2. Additional requirements in Early Childhood Development for all personnel; and
- 3. The creation of specific personnel standards for Interpreters. Committee agrees.

<u>MOTION</u>: Virginia Lynn motioned that the Council vote in agreement. Seconded by Michele Christopoulos

DISCUSSION: Joyce Salzberg stated that there was some discussion years ago regarding qualifications for TET by the Service Delivery Committee and suggests they are revisited. Virginia Lynn agrees.

APPROVED; no opposed; no discussion

- x. Recommendations for a competitive (RFA) issued by DOH
 - 1. # 1-DOH should identify and make available to potential applicants:
 - a. The number of projected children/families to be served by EIPs in each county; and
 - b. The projected number of evaluations to be completed in a year, in each county, and by category (initial, annual, exit, assessment)

DISCUSSION: Clarified that DOH, in issuing the RFA, will provide to those applying agencies data so they are aware of where they wish to apply or not.

- 2. # 2-DOH should require a letter of interest (non-binding) from potential applicants that includes the identification of the anticipated minimum number of children they would be applying to serve in each county
- 3. # 3-DOH approved and published Provider Competency Standards should be used to set a performance standard for reviewing/scoring RFAs
- 4. #4-DOH should provide a Self-Assessment Tool designed to accompany the Competency Standards to assist potential agencies in addressing agency performance prior to the release of an RFA
- 5. # 5-DOH should require applicants to demonstrate that staffing capacity is available to provide all needed services directly or document the ability to sub-contract for services.

Committee recommends amending the word "sub-contract," replacing it with "provide."

DISCUSSION: The word "sub-contract" was removed because the Committee felt that the services should be provided by system approved agencies only. The original intent of this was to support the Early Intervention (EI) Home.

More discussion is needed prior to a vote on # 5.

<u>MOTION</u>: Virginia Lynn motioned that the Council vote in acceptance with the recommendations for a competitive RFA issued by DOH, # 1 through 4 only, # 5 is tabled.

Seconded by Chanell McDevitt

APPROVED; no opposed; no further discussion

III. Fiscal Infrastructure Committee, Chair-Kathleen Hinnigan-Cohen

- A. Committee is reviewing the Components of the State Early Intervention Budget. Over 33% of the State budget is represented by Medicaid funds. PCG systems being used to obtain the funds needed for the Medicaid match have increased the dollars coming in from Medicaid in the last few years.
- B. Cost share comprises about 3% of the budget. Federal Government has announced that they may soon require states who receive Part C funds for EI to possibly be required to eliminate any family cost share charges. Committee looking into how this could be supplemented.
- C. Committee recommends DOH reinstate suspensions to families who are non-compliant with cost share payments beginning in January 2022.

DISCUSSION: Steven Weiss questioned how many dollars and families are currently outstanding. Susan Evans responded approximately \$500,00 & 400 families currently outstanding. To reinstate requires changes to the EIMS programming, and is more complicated by the 60-day family billing cycle and practitioner 90-day logging cycle.

Nicole Edwards questioned why the January 2022 date. Kathleen Hinnigan-Cohen responded that the Committee was thinking of a "clean slate" come January 2022. Joyce Salzberg added that the Ongoing Service Coordinators (OSCs) should revisit cost share with the families. Kathleen Hinnigan-Cohen agrees. Susan added families can and have been able to adjust cost share whenever fiscal changes occur.

Council agreed to continue this discussion at future meetings and on-going.

D. Funds are available to replace the Procedural Safeguards Office (PSO) positions, But do not have permanent people in at this time.

<u>MOTION</u>: Kathleen Hinnigan-Cohen motioned that the Council make a formal recommendation to the DOH administration to move swiftly in approving the filling of these PSO positions.

Seconded by Michele Christopoulos

DISCUSSION Sandra Howell states she is pushing forward on temporary position purchase orders to fill these positions as soon as possible.

Currently in tandem forwarding the permanent position paperwork. *APPROVED*, no opposed, Sandra Howell abstains

E. Family participation on Committees is lacking.

<u>MOTION</u>: Kathleen Hinnigan-Cohen motioned that the Council develop an outreach campaign to EIPs and Service Coordinators for them to recommend family members who would be interested in participating in some capacity on either the SICC or a Sub-Committee, being aware that there are significant barriers to having anybody appointed to the SICC, itself. But participation on Committees does not require appointment to the SICC.

APPROVED; no opposed

FURTHER DISCUSSION: Kathleen Hinnigan-Cohen clarified that the Committee feels it would be beneficial for some type of a formal outreach. Susan Evans offered a Massachusetts contact as a resource. Joyce Salzberg asked about a Committee Member to be a Chair for this. Susan Evans recommended the Chairs of the Committees work together. Possibly offer a stipend. Looking for more of a widespread outreach rather than a one-to-one outreach.

IV. Personnel Preparation Committee, Chair-Corinne Catalano

- A. Corinne Catalano shared a power point
 - i. Creating a draft Applicant Review Form and Guiding Document to assist in the onboarding process.
 - ii. Working with current Personnel Standards, helping to interpret, and streamline the process of review.

V. Family Support & Transition Committee, Chairs-Nicole Edwards

- A. Congratulations, Alexis Ziegler, on Baby Wes
- B. Looking at why New Jersey is below average in Birth to One referrals

Review and Approval of State Performance Plan Indicators 3,4,11

- I. Indicator 4 Family Outcomes
 - A. Power point presentation by Patty Green, Kendra Taggart, and Sue Ross

<u>MOTION</u>: Kathleen Hinnigan-Cohen motioned to approve the targets set by the stakeholders in the power point presentation.

Seconded by Michele Christopoulos

APPROVED, no opposed, Nicole Edwards abstained

II. Indicator 3 - Child Outcomes

A. Power point presentation by Patty Green, Susan Evans, Jennifer Blanchette-McConnell, and Danielle Cuskey

<u>MOTION</u>: Michele Christopoulos motioned to approve the targets set by

the stakeholders in the power point presentation.

Seconded by Kathleen Hinnigan-Cohen

DISCUSSION: Joyce Salzberg asked about the significant difference between 2016 and 2017. Susan Evans will have the DOH Research Scientist look into this.

Joyce Salzberg questioned the "80 baseline" on the last power point slide. Susan Evans and Patty Green addressed.

APPROVED; no opposed; no further discussion

III. Indicator 11 - State Systemic Improvement Plan (SSIP)

A. Power point presentation by Kristen Kugelman, Kaitlin Mulcahy, and Yolanda Sosa

Lead Agency Report

- I. Power point presentation by Susan Evans
 - A. Federal Updates
 - i. Office of Special Education Programs (OSEP) has provided 2 guidance documents
 - ii. President's Budget with Part C Implications Possible \$250 million increase and policy changes to Part C
 - B. State Updates
 - i. Rate Study is actively underway
 - ii. RFP for a new Data Vendor
 - iii. Progress Summary Forms for IFSPs
 - iv. Family Matters website has been updated
 - v. Challenges in meeting the goal of the NJEIS being a modern, efficient, and sustainable system that provides quality services to children and families
 - vi. Recruitment and retention
 - 1. DOH is hosting a "Solution Session" on November 30, 2021
 - vii. Family Cancellations investigate the reasons for this increase
 - viii. Broadcast Procedures looking into a technology solution specific to make the broadcast more efficient, uniform, and required for all to participate
 - ix. On-boarding DOH is in procurement phase of a new Learning Management System (LMS)
 - x. NJEIS Rules updating in phases
 - xi. Service Coordination Services
 - xii. REIC additional Single Point of Entry (SPOE) Service Coordinators needed to accommodate increase in volume; length of time spent with families has increased
 - xiii. PSO updates
 - xiv. Services updates
 - xv. Fiscal updates Rate table increase
 - xvi. Staffing changes at DOH will announce once the person is physically in office

New Business

I. No updates

Old Business

I. No updates

Public Comments

- I. David Holmes Shared comments of support regarding addressing the broadcast, family cancelations, and hiring retention. States he appreciates the clarity on the 2.5% increase. He mentioned wondering if any of the Committees can do any prepatory work regarding the NJEIS Rules expiring in September 2022 to assist in that process.
- II. Mary Krupp Questioned if the DOH can make a stipulation to the PCG extension to request asking PCG to work on the issues around the reports.
 Susan Evans answered this cannot be done, but Mary Krupp can email Sirisha Vadrevu to request reports are looked at. Sandra Howell added that DOH cannot renegotiate deliverables at this time, but can request the reports work as expected.

The next SICC meeting is TBD.

<u>Motion</u> to adjourn the meeting by Sandra Howell and seconded by Michele Christopoulos at 1:05 pm.