



Friday, June 27, 2025

Meeting Minutes

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

ZOOM Meeting Platform

A regular public meeting of the New Jersey State Interagency Coordinating Council (SICC) was held on Friday, June 27, 2025. The meeting was held via ZOOM meeting platform. The meeting was called to order at approximately 9:30 a.m. by Joyce Salzberg, Acting Chair.

Welcome

- I. Joyce Salzberg welcomed attendees and read the Welcome Statement.

Attendance

- I. Maintained by the Department of Health (DOH)

Introductions

- I. SICC members and DOH representatives were introduced.
- II. Quorum requirements were met.
- III. Public members signed their attendance through the chat box in the ZOOM platform.

Approval of Minutes

- I. The March 21, 2025 Minutes were *APPROVED*; no discussion. Motion by Catherine Colucci, seconded by Virginia Lynn.

SICC Standing & Ad Hoc Committees Reports

- I. **Administrative/Policy Committee**, Samuel Kivell, Chair and Saira Hussain Akhter, Co-Chair

- A. The Committee continues to work on initiatives of transparency and education. Also working on refreshing the new board member packet.

- II. **Service Delivery Committee**, Virginia Lynn, Chair

- A. The Committee is continuing to work on child issues in childcare.

Susan Evans stated the Department will let the Committee know soon if the components can be adopted and distributed.

- B. Ms. Lynn states an ongoing challenge is that some childcares are requesting the child/children be removed/pulled out for the services. The Committee has developed a rough draft letter to childcares explaining why it is requested that children be seen in their natural environment with their peers and working on talking to the License Board. Cynthia Newman wrote a sample letter to the childcares and families thanking them for allowing services to occur in the childcare.

Corinne Catalano added it may be helpful to speak with GROW New Jersey Kids.

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

A. Kathleen Hinnigan-Cohen summarized the Early Intervention (EI) mileage, travel time reimbursement survey:

- i. 30 agencies responded
- ii. Camden & Gloucester had the most service providers represented
- iii. 4 agencies provide mileage reimbursement to all staff, 13 offer it to some, 13 do not provide any
- iv. 14 agencies have a set mileage reimbursement rate, varying from 31 cents to 79 cents per mile
- v. Some offer to pay 1 gas take fill up per month.
- vi. Reimbursement incentives for remote areas:
 1. 7 agencies reported that incentives are offered in Cumberland, Sussex, and Camden counties
 2. 1 agency offers half of the pay rate for traveling 30 minutes or more in Cumberland County.
 3. Some agencies offer a referral bonus to take cases outside of their normal case area
 4. Some rotate staff assignments in municipalities
 5. 1 noted providing a different rate for anyone traveling over 30 minutes for a case.
- vii. Travel Time Compensation:
 1. 10 agencies provide some form of reimbursement to practitioners for time spent traveling with compensation rates varying widely
 2. Some offer full time staff a rate for all hours worked
 3. Some offer part time staff an administrative rate for travel time
 4. Half for face to face time for a rate
 5. A flat driving rate
 6. Some pay 30 minutes between each case regardless of travel time, which would include time for emails and paperwork.

B. The Committee had a few questions for the Department:

- i. Are there any updates on the Rutgers study?
Susan Evans stated there is a presentation from them later in the agenda.
- ii. Are there any updates regarding the concerns about service provision in the southern region?
Susan Evans stated this is covered later in the Lead Agency report.
- iii. Any update on the Medicaid rates?
DOH stated that has not gone anyplace different.

Josephine Shenouda added the question was asked across country and DOH is in the process of putting that together.

IV. Personnel Preparation Committee, Corinne Catalano, Chair

- A. The Committee continues to work on revisions to the Personnel Standards, mostly a Developmental Specialist role that collapses the Child Development Specialist, Behavior Specialist, and Special Educator roles.
- B. Susan Evans shared some information from a conversation she had with Connecticut at the Early Childhood Intervention Personnel Center.

V. **Family Support Committee**, Nicole Edwards, Chair

A. The Committee's focus is birth to 12 referrals.

B. The Committee surveyed primary health care providers and had 88 responses. Nicole Edwards shared A document of the results. Below are portions of the Document:

New Jersey Pediatrician Survey – AGGREGATED RESULTS (n = 88)

NJ State Interagency Coordinating Council's Family Support Committee - 2024-2025

Our committee is interested in understanding birth-1 year referral rates to the NJ Early Intervention System in New Jersey for young children (birth-36 months) with suspected developmental delays or disabilities.

***When thinking about New Jersey Early Intervention System (NJEIS) services (0-36 months), I am HIGHLY familiar with (CHECK ALL THAT APPLY)**

- How children get referred to NJEIS- 82 (93.18%)
- Which children are eligible for NJEIS services – 80 (90.91%)
- The family-centered nature of NJEIS services – 55 (62.50%)
- How NJ EIS embeds recommendations/ supports across developmental areas or domains (social-emotional, cognitive, motor, communication) – 53 (60.23%)
- The location(s) where NJEIS services typically take place – 47 (53.41%)
- NONE OF THE ABOVE – 1 (1.14%) - (17 years in field)

***On a Likert Scale of 1-4, where 1 is 'not comfortable at all' and 4 is 'very comfortable', how comfortable are you in referring patients under 1 year of age for NJEIS services? _____**

- VERY COMFORTABLE – 70 (79.55%)
- Somewhat comfortable – 4 (4.55%)
- Neutral – 9 (10.23%)
- VERY UNCOMFORTABLE – 5 (5.68%)
 - Even though familiar with EI – Employed: 1 year, 7 years, 20 years, 24 years

***Please check all that are TRUE for you:**

- I have referred one or more children under 1 year of age to NJEIS in the past year? – 75 (85.23%)
- I have referred one or more children 24-36 months to NJEIS in the past year? – 85 (96.59%)
- I have referred one or more children under 1 year of age to other options outside of NJ EIS (e.g., hospital-affiliated clinic; private or out-patient therapy) in the past year – 54 (61.36%) (1 who was 'very comfortable' with NJEIS infant referral still only referred an infant to an outside option)
- I have referred one or more children 24-36 months to other options outside of NJEIS services in the past year – 61 (69.32%)

C. DOH is working on a parent portal for easier access to documentation.

VI. **Transition Committee**, Steven Weiss, Chair and Josephine Shenouda, Co-Chair

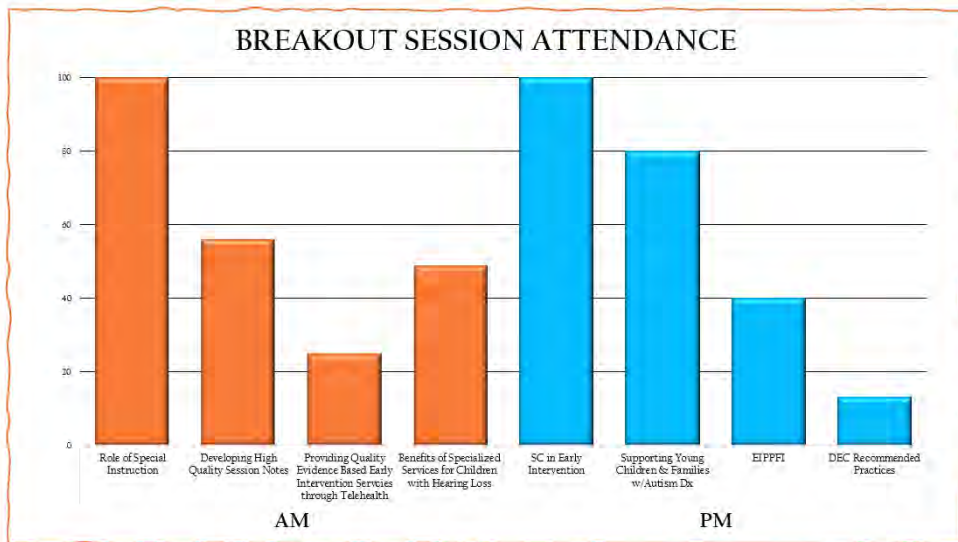
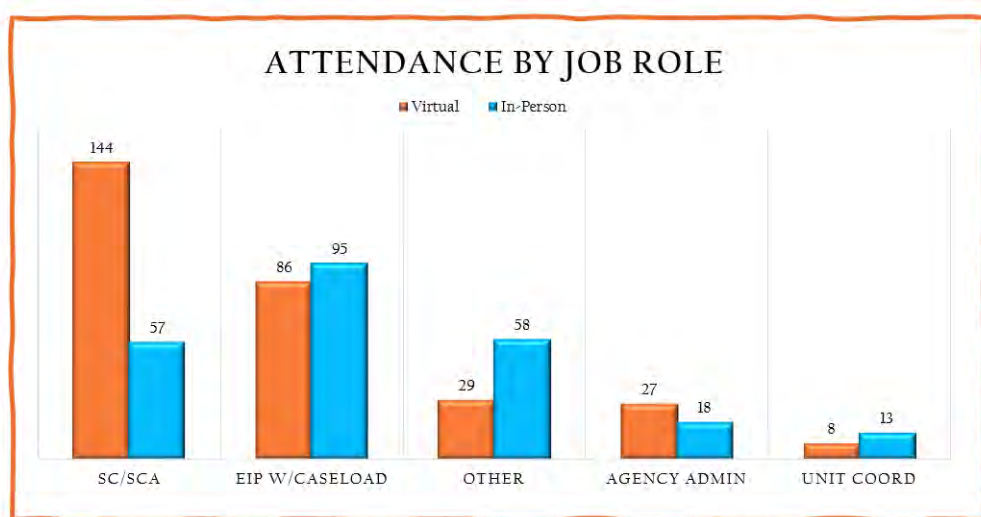
- A. Formed 2 sub-Committees; Bridging Part C to Part B, and establishing data sharing protocol between Part C and Part B.

Lead Agency Report, Susan Evans, Part C Coordinator

I. The 2025 NJEIS Conference Review, Kristen Kugelman, Professional Development Coordinator

- A. Susan Evans shared a video summarization of the conference.
B. Kristen Kugelman shared a powerpoint presentation. Some slides are below:
535 attendees in all.

Working with the presenters to record all of the workshops and put them on the Learning Management System (LMS) so they are available for everyone.



Virtual attendees attended the ballroom breakout sessions.

SICC Members added great job.

II. Federal Updates

A.

NJ's Part C allocation for FFY25-26 = \$14,170,600

- This was a 1% increase from last year's allocation
- DOH does not expect delays in receiving these federal funds

NJEIS received a Determination of Needs Assistance.

- This does not affect funding
- Indicator 3/Child Outcomes affected the final determination
- Requires NJEIS to have TA to improve

NJ received official notification of a delay in our federal monitoring site visit.

- Was scheduled for 2026
- The new date is TBD

B. Federal Proposals we are watching:

- Part C is currently *proposed* to remain an independent line-item for funding.
- The determination letter states that OSEP is "considering modifying the factors to be used in 2026 determinations." NJEIS still needs to submit data and an APR, the determination matrix may change.
- Proposed changes to Medicaid have potential fiscal implications for NJEIS if less children are eligible for Medicaid.

III. State Updates

A. DOH Leadership

- Jeff Brown is now Acting Commissioner.
- Dr. Navneet Sahu is now Deputy Commissioner for Public Health Services.
- Alicia Simmons is Acting Assistant Commissioner for Family Health Services.

B. Monitoring and Accountability

- Cyclical monitoring will begin in July with Cohort 1A.
- TheraCare and Somerset ARC are the first Early Intervention Providers (EIP) to undergo the cyclical monitoring process.
- APR and other monitoring activities are ongoing.

C. County Determinations will be provided in a few weeks. The scoring Matrix has been updated to award points based on county compliance and the county's performance relative to the state's performance and state targets.

D. Passaic County Service Coordination Unit (SCU) transition is complete. But still has support from the DOH Team and consultants with the team at Youth Consultation Services (YCS.)

E. Intensive TA Ocean and Cumberland Counties

- i. DOH is working with stakeholders/EIPs in Ocean and Cumberland counties to identify barriers to service provision, re-imagine options to meet the needs of these counties, and pilot innovative strategies.
- ii. Proposed strategies include the expansion/development of group services for children with similar needs, training and support for Interpreters who work with families in EI, and more. This is a starting point.

Virginia Lynn shared that the Service Delivery Task Force will share a Competencies for Interpreters document.

Kathleen Hinnigan-Cohen voiced a concern about the change in the BDI and its impact on child eligibility.

Josephine Shenouda replied DOH is tracking the issue on our end. And looking into what other states are seeing.

Procedural Safeguards Office (PSO), Beth Lohne, PSO Coordinator

I.

**ADMINISTRATIVE
COMPLAINTS SFY25 July1,
2024-June 1, 2025=20**

- *1 Formal Mediation held; agreement reached.
- *1 Formal Mediation: Withdrawn.



II.

Summary of Dispute Categories

**Please note that there may be more than one category in a complaint.

Dispute Category	Total Cases	Findings of Non-Compliance	Corrective Action Required	Other Outcomes
Family Cost Participation	3	1	1	
Practitioner Conduct	10	3	3	4 Pending
Timely IFSP Services	9	4	4	
Eligibility Disputes	3	0	0	
Native Language	2	2	2	

Samuel Kivell asked for the timely IFSP services disputes, do we know where those kids are?

Is it in those southern counties that Susan was talking about?

Beth Lohne answered no.

Samuel Kivell asked is it where the new service coordinator group came in?

Beth Lohne replied there has been 1 in relation to that.

III. Procedural Safeguards Office Initiatives

- A. Office Hours SFY25: In SFY 2025, the PSO held monthly dedicated office hours for the NJEIS, via Zoom platform, January 2025-March 2025 there was a total of 362 attendees. In April, the PSO began using Microsoft teams to allow a larger audience. April attendance 138, May attendance=93, June attendance 245. April to June there was a total of 476 attendees.
**Using Teams had a 32% increase in attendance.
- B. Training Initiative: PSO Quarterly Trainings: Continuous education on Procedural Safeguard requirements for direct service providers.
**Assurance that families have been informed of their right to formal dispute resolution.
- C. Ongoing Initiatives: Monthly Office Hours: Regular sessions to address questions, discuss trends, and provide support.
Partnership with the Statewide Parent Advocacy Network: Collaboration for a training for families on Creating Agreements and Formal Dispute Resolution Options in the NJEIS. SICC Family Support Committee collaboration for roll out late September for families.

D.

PSO SFY25 Compensatory Awards Data Since April 2025

Month	Children	Compensatory hours
April	25	2,066
May	23	1346
June	15	596
Total	63	4,008

E. Benefits of the New Compensatory Process

- Early Implementation: Begins the process at 32 months of age, allowing more time for planning.
- Increase in Exit Data: Improved data collection, supporting better outcomes analysis.
- Timely Access to Services: Reduction in delays, ensuring families receive needed services on time.
- Proactive Missed Services Review: Missed services are identified and addressed earlier during Individualized Family Service Plan (IFSP) meetings, ensuring that families' needs are considered promptly.

F. Fraud, Waste & Abuse

Beth Lohne stated there are several under investigation. There is 1 practitioner that is currently suspended from providing EI services. If it is identified in 1 agency and that practitioner works for other agencies, we notify those agencies that the practitioner is not eligible to work in the system without giving any details. Josephine Shenouda added she thinks a memo will be sent out to the field probably toward the end of Summer.

National Institute for Early Education Research (NIEER) Presentation, Allison Friedman-Kraus

A. Allison Friedman-Kraus shared a powerpoint. Below are some slides from it:

NJ EIS Deep Dive Timeline

Deliverable	Status	Completion Date
Literature review	In progress & used to inform other deliverables	Fall 2026 & ongoing as needed
50 state scan	In progress	Summer 2025
State comparison: structure	In progress	Summer 2025
Family satisfaction survey	Survey draft	Launch Survey late summer/early fall
Survey of EIPs	Not started	TBD
Analysis of existing data	Discussions about accessing data	TBD
NJ EI landscape	Draws on all other components	Summer 2026
Final recommendations	Draws on all other components	August 2026

Family Satisfaction Survey Topics

- Child/family demographics
- Referral date
- Opinions about Early Intervention (referral, evaluation, coordination, and services)
- Experiences such as family involvement in setting IFSP goals, outcomes, and services
- Staff consistency
- Location of services

B. Allison Friedman-Kraus stated this survey is different from the Indicator 4 survey and will avoid overlapping questions.

Samuel Kivell asked what the hold up is getting the data.

Allison Friedman-Kraus replied there's not a specific hold up. It's just one thing that conversations are ongoing at this point. There's no delay, we're just in the process of coordinating.

Samuel Kivell asked if they will be able to get run whatever you have to run? There's no HIPAA or other issues?

Josephine Shenouda stated all the data sharing has to go through as IRB approval process. Because it is Rutgers, there is an institutional review board that has to approve receiving the data from us.

Joyce Salzberg stated Sunny Days is in quite a few states and from our experience the number of children needing services is diminishing. Ms. Salzberg asked about Ms. Friedman-Kraus's statement regarding an increase in the number of children needing services.

Allison Friedman-Kraus replied that maybe she is a few years back on that but she thinks coming out of a pandemic, there was definitely some increases. Ms. Friedman-Kraus mentioned she sees data that's a little older, and hadn't considered the birth rate decrease. There's still wait lists and kids who need services that can't get them as soon as they need.

Josephine Shenouda added referrals are down and eligibility is also down in New Jersey and many comparable states, and the birth rate is down. But the National data on developmental delays, disabilities, especially autism, has been increasing. More and more children are having a diagnosis of delays and other disabilities.

Nicole Edwards has a concern for family's survey fatigue. And if all SICC Members can see the survey ahead of time, not just 1 Committee.

Allison Friedman-Kraus answered they are cognizant of that and will not launch their survey right before the Indicator 4 survey and will go to different families.

Josephine Shenouda added We can start with the Family Support Committee and then can open it to the whole group as well.

Regional Early Intervention Collaborative (REIC) Update, Nicole Brogden, Laura Washington, & Tiffany Martinez, Family Support Coordinators

I. 2025 Early Intervention Week look back with a powerpoint.

Received an Official Proclamation from the Governor.

II. Shared social media links:

HELPFUL HANDS (Bergen, Hudson, Passaic) <https://www.facebook.com/helpfulhandsEI>

FAMILY LINK (Essex, Morris, Sussex, Union, Warren) <https://www.facebook.com/FamilyLinkNJ>

MID JERSEY (Hunterdon, Mercer, Middlesex, Monmouth, Ocean, Somerset) <https://www.facebook.com/MJCREIC/>

SOUTHERN REGION (Atlantic, Burlington, Cape May, Camden, Cumberland, Gloucester, Salem) <https://www.facebook.com/NJESouthernRegion/>

New Business

I. Future HYBRID Meeting Dates:

September 19, 2025

November 21, 2025

Old Business

I. SICC Member Appointments Update, Josephine Shenouda, Executive Director

A. Hoping to have at least 5 new appointments to the SICC Council by the end of the year.

II. Congratulations to Nicole Edwards for her promotion to full Professor.

Public Comments

The following comments were made by members of the public:

Kenneth (David) Holmes, ABCD EIPA – Mr. Holmes' statement is summarized below:

Congratulations to Nicole. Very interested in her survey results. Regarding the Rutgers study, can some questions be about family preference towards groups? What is the status of the EIMS RFP?



Submitted Chat Messages as Public Comments:

02:22:46 Shelly Fairman: Are any of the new appointments Service Coordinators?
02:23:30 Jessica Stengel: Reacted to "Great Job on another..." with ❤️
02:23:32 Edwards, Nicole M.: Thank you!
02:25:51 Maureen Archibald: Is the question about SC appointment one that can be answered here?
SC is a critical part of EI

Submitted Written Comments (Attached):

No written comments submitted.

There were no additional public comments.

The Public can submit comments to the Department or in the Chat Box which are recorded for the Department.

The next SICC public meeting is September 19, 2025, 9:30 a.m. to 12:30 p.m.

MOTION to adjourn the meeting by Kathleen Hinnigan-Cohen and seconded by Catherine Colucci at approximately 12:00 p.m.