

HAWAII EARLY INTERVENTION COORDINATING COUNCIL
Quarterly Meeting (Final & Approved)
April 29, 2015

O'ahu	Shriners Hospital for Children, 1310 Punahou Street, Makai Auditorium, Honolulu, Hawaii
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MINUTES

- Members Present:** Jill Arizumi, Dr. Daniel Buehler, Ashley Anne Diaz (via conference call), Michael Fahey (Chair), Dr. Kenneth Fink (designee for Robin Kobayashi), Sabrina “Kehau” Golis, Keri Kobayashi, Bernadette Lane, Lisa Lemon, Jason Maga, Dr. Bobbie-Jo Moniz-Tadeo, Leolinda Parlin (Vice-chair), Carrie Pisciotto, Toby Portner, Colonel Daniel Roy M.D., Patricia Sheehey, Peter Trang, Julie Walsh
- Members Absent:** Senator Suzanne Chun Oakland, Patricia Dong, Representative Bertrand Kobayashi, Robin Kobayashi (appointed designee), Dr. Stanton Michels
- Ex-Officio:** Sue Brown, Dr. Patricia Heu, Haaheo Mansfield
- Guests:** Ted Burke, Dr. Louise Iwaishi (Sponsor), Chris Jackson, Douglas Mersberg, Leah Milne, Ann Sasuga
- Staff:** Danelle Cheng (recorder)

TOPIC	DISCUSSION	DECISION/ FOLLOW-UP
I. Call to Order	<p>Fahey, Chairperson, called the meeting to order at 8:34 a.m.</p> <p>A. Welcome/Introductions Introductions were made. New council members were welcomed.</p> <p>B. Review Agenda Agenda reviewed. No additions or comments.</p> <p>C. Review Minutes from October 29 & December 15, 2014 HEICC Quarterly Meetings Minutes reviewed. No corrections or changes. Motions made and seconded to approve both meeting minutes.</p>	

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<p>II. Community Update</p>	<p>A. Parent Sharing of Their Child’s EI Journey – Peter Trang</p> <p>Son Lincoln was born with a cleft lip and palate. He received Early Intervention (EI) services from the Kapiolani Mobile Team and the Lanakila Early Childhood Services Program. Also received support from Kapiolani Hospital’s Cleft Clinic and is a member of Lifetime of Smiles Cleft Support Group. Born on February 4th (almost 2 months before due date) and weighed 3 lbs, 3 oz. Lincoln spent six weeks in the Neonatal Intensive Care Unit (NICU). Suggested some areas of possible improvement: (1) Information overload. When information is provided during session, focus is on Lincoln so not able to attend to information. (2) When transferred to Lanakila Program they didn’t have access to cell phone so was unable to easily contact them. Appreciated the fact that Kapiolani Mobile Team had cell phone access so they were able to text them with questions. (3) Suggested a website for families to exchange information and stories. (4) Issue regarding speech therapy. There was a four month lag before Lincoln was able to receive speech therapy as speech therapist was on medical leave. System wide lack of speech therapists. (5) Support vs. Supervision. As parents ask for support and guidance. Not asking to be told what to do and to be supervised on how they raise their child. (6) Too many acronyms. Requesting cheat sheet of acronyms. (7) Need more inclusion in education. Need to educate other children about special needs.</p> <p>B. Update on Early Learning Advisory Board (ELAB) Activities</p> <p>Fahey shared that the position of Executive Office of Early Learning Director has been offered to someone. As of July 1, 2015 the Executive Office will be attached administratively to the Department of Education (DOE). Positions will need to be created within the Department of Education.</p> <p>C. Agency Sharing – Keri Kobayashi – Public Health Nursing (PHN)</p> <p>Kobayashi shared an overview of Public Health Nursing services in Hawaii. Part of the DOH. There are about 100 PHNs who are registered nurses across the state. Five offices on Oahu (East Honolulu, West Honolulu, Central Oahu, Leeward and Windward Oahu). Offices on every neighbor island. Attempt to address root causes of poor health and chronic conditions. Provide services from prenatal till end of life. Provide health consultation to public schools, preschools and childcare facilities. Receive referrals from many sources including the general public, doctors and Hawaii Keiki Information Service System</p>	

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<p>III. Council Business</p>	<p>(H-KISS). Provide both home and office visits for complex medical cases and those with limited income. Collaborate with other community agencies. Up until July 2009 PHNs acted as Early Intervention care coordinators for those children with medical problems. Administratively the decision was made to pull back from care coordination. Still can be included as a part of the Early Intervention team. PHNs act as a safety net for preschool programs that cannot provide their own health consultant.</p> <p>A. Election of HEICC Officers</p> <p>Fahey & Parlin’s terms as chairs are coming to an end. Fahey will continue to support the council as a member for another year. Parlin will be reapplying to the council to continue her support as a member. A slate of candidates who were nominated by the Executive Committee were presented on a ballot to the council. A request for nominations from the floor was extended. No additional nominations were given. Ballots were completed, collected and tallied. Moniz-Tadeo was elected Chair and Maga was elected Co-Chair.</p> <p>B. Legislative Update</p> <p>Fahey provided an update. Preschool Open Doors Bill is still alive. Executive Office of Early Learning Bill is still alive to fund seven resource teacher positions which support the Pre-k programs in the DOE. Heu shared that Bill 1377 which is requesting \$200,000 to develop the specifications, pricing and implementation plan for a web based data system for EI and to make an appropriation for operating expenses and to establish a social emotional Coordinator position in the Children with Special Health Needs Branch (CSHNB) to support children from birth to age 5 is still in committee. This bill began a year and a half ago as an omnibus bill from the HEICC. Members Representative Kobayashi and Senator Chun- Oakland have been instrumental in supporting this bill to keep it alive. Heu also provided updates on HB174 relating to mandating insurance coverage of orthodontic treatment for oral facial anomalies. The Magas have been attending the hearings. Question regarding the inclusion of language involving dental. Next hearing is tomorrow afternoon. Family Health Services Division and CSHNB are supporting a bill which requires birthing facilities to conduct pulse oximetry screening to screen for critical congenital heart defects. House is not opposing it, so there is a good chance it is going before the Governor.</p>	

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<p>IV. Early Intervention Section Update</p>	<p>C. Update on Recommendations for HEICC Reappointments and Vacancies</p> <p>Cheng shared that currently there are 22 filled positions with 3 vacancies. One of the vacancies is the position, “Other Members of Interest Selected by the Governor”. There are potential applicants for the remaining 2 vacancies.</p> <p>D. Future Meeting and Orientation Dates</p> <p>Future meeting dates were proposed. A meeting must be held every quarter. Historically meetings have been held in the months that have 5 Wednesdays. Comments were shared by EIS program managers who are also council members that they have been unable to attend council meetings scheduled after the Stakeholder’s meeting in December, due to a conflicting Program Managers Meeting held at the same time. Two parents shared their preferences for half day meetings rather than a full day. Decided to have Orientation in the morning on July 29th. Next Quarterly Meeting will be held in September.</p> <p>E. Endorsement of EI Part C Policies and Procedures</p> <p>Public Hearings will be held on new EI Policies and Procedures (P&P). Members have the option of attending public hearings to provide testimony or testimony can be taken from members by submitting to Fahey or Cheng if you would like the council to testify as a group on these (P&P). Heu shared that they are required by the Office of Special Education Programs (OSEP) in order to apply for Federal funding. We are several years behind in completing it. The (P&P) reflect the requirements of Part C of the IDEA, State law and administrative rules. Reflects everything that EI is doing and should be doing. Thanks was given to Sue Brown for writing the (P&P). The Deputy Attorney General has also reviewed it. The Hearing Notice was available as of April 29th. Public has 30 day notice regarding hearing. It is then followed by 30 days to comment. Last date for comment is June 19th. There is space for testimony. It will then be sent to OSEP.</p> <p>A. Budget</p> <p>Heu reported that there is no deficit anticipated for this fiscal year.</p>	

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	<p><i>B. EI State and Purchase of Service (POS) Vacant Positions</i></p> <p>Heu announced that Cheng has accepted the position of supervisor for the Early Intervention Referral Line and will continue with Public Awareness and HEICC Support. Recruitment and interviews for the EI supervisor position is now in progress. 14 vacant positions which are interviewing for and waiting for lists. 4 positions awaiting approval to start and have planned start dates. 6 positions awaiting reorganization. Through the reorganization Quality Assurance positions will be added. 2 positions are having descriptions updated and then will be available to recruit. As of January, 14 POS programs reported that 9 programs are fully staffed and 5 reported 1-2 vacancies. Speech is an area that we do have shortages. Developing a fee for service contract with those providers that do have speech services. Requested a list of speech pathologists from the Office of Commerce and Consumer Affairs. We hope to send a letter to each to ask if they have an interest in applying for a position or contracting with us.</p> <p>We have a long term plan to move the Early Intervention Section to a primary service model with coaching. Consultants to primary service provider will support families in having the services they need. Question asked regarding how this is different from the transdisciplinary person who already provides services? Heu replied that there is a need for discussion with staff and program managers. Concern raised that when there is a vacancy in a certain area then there is no one to coach the team in that discipline. There is a need to look at compensation to retain staff.</p> <p><i>C. Initiatives and Activities</i></p> <p>Cheng shared that the Hawaii Keiki Information Service System's (H-KISS) name will be changing to the Early Intervention Referral Line. It will be introduced in our new brochure and poster. Cheng shared a draft of the design that was created pro bono by the University of Hawaii senior design students. Feedback was welcomed.</p>	

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	<p>Fahey pointed out that another activity of the council in the next year is to take a look at the issues that keep coming up, such as increasing compensation to aid in retention and recruitment of providers to make it a part of our policy agenda at the next meeting. If there are any initiatives and activities that the council should take a look at to make the system better we would like to hear it. Pisciotto requested that State Systemic Improvement Plan (SSIP) Update be added to Initiatives and Activities.</p> <p><i>D. Program Measures Dashboard</i></p> <p>Cheng shared first four measures in regards to H-KISS. The number of information and referral calls as of third quarter on track to be the same or slightly increased from last fiscal year. Measures 2-4 referring to number of referrals and referral agents remains stable. Heu shared measures five to eight. There has been a decrease in timely multidisciplinary developmental evaluations to 86% partly due to staffing shortages. In regards to eligibility measure number 5, there has been a decrease in the percentage of eligibility for those with developmental delay. Percentage of those found not eligible has been stable over the last two quarters. Enrollment data for previous quarter compared to quarter immediately following eligibility change is about the same. Number of Individualized Family Support Plans and those exiting from Early Intervention Services remains stable.</p> <p>Parlin pointed out that the number of declines reported due to family not interested in Measure 8 has increased. Reasons shared were change in procedure of obtaining consent. Early Intervention Referral Line no longer obtains consent. It is now up to programs to obtain consent. Declined referral data obtained from Oahu programs. Moniz-Tadeo interested to see declined referral data by programs to determine what's going on. Pisciotto expressed that we need more data to understand what this number is reflecting. Suggestion to compare old H-KISS data when referral line was obtaining consent to current data. Question raised as to why this data is not statewide. Early Intervention Referral Line system does not collect this information. Need to work on data collection. We would like to collect this data from all programs. Parlin suggested the need for regular and current feedback regarding where people are in the context of a system. Perhaps this information can be shared with programs more often. Comment regarding Measure 7. Following the change in eligibility there has been a significant reduction in the number of children receiving services. It would be interesting to find these children and track them. We need more information to inform our policy decisions. Under Measure 10 "Withdrawal by parent / guardian" don't know if there's any outreach to these families to find out what the reasons are for withdrawal. Program</p>	

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<p>V. Public Comment</p> <p>VI. Announcements</p> <p>VII. Future Meetings</p> <p>VIII. Adjourn</p>	<p>managers on council responded. Suggestion made to have minutes of previous meeting sent several days ahead of the next meeting so members will have time to look over before the actual meeting. Suggestion made to add data to dashboard of how many children found not eligible are reevaluated three months later and found to be eligible.</p> <p>No public comment.</p> <p>Walsh introduced Leah Milne as a potential parent applicant to the council. Parlin shared about the upcoming Special Parent Information Network (SPIN) Conference. SPIN has an acronym list that can be found on their website. There will be an HEICC Orientation for new members held in July.</p> <p>Next meeting will be held on September 30, 2015.</p> <p>Fahey adjourned the meeting at 11:35 p.m.</p>	

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