

HAWAII EARLY INTERVENTION COORDINATING COUNCIL
 Quarterly Meeting
 August 25, 2021

O'ahu	Zoom Meeting
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MINUTES

Members Present: Bobbie-Jo Moniz-Tadeo (Chair), Kerrie Urosevich (Co-Chair), Reinalyn Terrado (Parent), Nagisa Kimura, Kehau Golis, Bonyen Colunga, , Doug Mersberg, Sharon Thomas, Kimberly Allen, Bernadette Lane, Daintry Bartoldus, Danette Tomiyasu

Members Absent: Ku'ulei Arceo, Amy Tamashiro, Representative Lisa Kitagawa, Leah Muccio, Verna Chinen, Brianna Levy, Dayna Luka,

Ex-Officio: Charlene Robles, Dr. Patricia Heu

Guests: Jennifer Rivera (parent), Chris Jackson, Arlene Ige, Tina King (fill in for Rosie Rowe), Christopher Au (fill in for Leah Muccio),

Staff: Amy Rivera, Jeffrey Lee

TOPIC	DISCUSSION	DECISION/FOLLOW-UP
I. Call to Order	<p>Chair, Moniz-Tadeo, called the meeting to order at 9:01 a.m.</p> <p><i>a. Welcome/Introductions</i> 1 member shy of quorum. Unable to vote on any decisions.</p> <p><i>b. Review Agenda</i> Agenda reviewed. No additions or comments</p> <p><i>c. Review Minutes from May 26, 2021 HEICC Quarterly Meeting</i> Minutes reviewed. Not approved due to not having quorum.</p>	
II. Early Intervention Section Update (9:30-10:15)	<p><i>a. Part C Update</i> <i>[Refer to the Early Intervention Section Update]</i></p> <p>Robles reported that Katherine Neas is the new Deputy Assistant Secretary and Acting Assistant Secretary of the Office of Special Education and Rehabilitative Services (OSERS).</p> <p>She reported Hawaii received the following FFY 2021 (July 1, 2021-June 30, 2022) funding:</p>	

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	<p>Part C Grant \$2,369,091 an increase of \$36,047 Part C American Rescue Plan Act (ARPA) \$1,218,273</p> <p>Robles reported Part C monies to be spent on:</p> <p><u>BDI-3 Licenses and supplies-</u> Purchase 58 subscription licenses, estimated 2500 sets of electronic protocol records, and estimated 2000 sets of hard copy protocol. \$78,441</p> <p><u>BDI-3 Online Training-</u> On-line BDI-3 training subscription for 151 providers statewide (i.e., State and contracted staff); this is good for 3 years and transferable among the providers over the 3 years. \$19,389</p> <p><u>Pyramid Model Training Cohorts 1-3-</u> Implementation of Pyramid Model Consortium Training for up to 3 cohorts 1-3. This is for approximately 75-120 providers (State and contracted staff) who support families and their children in social-emotional development which may or may not have been the result of the pandemic. \$88,500</p> <p><u>Data System Phase 2 Enhancements-</u> Cost for additional work on web-based data system to improve functionality for the end user. Work to be completed by Harris Public Health Solutions – CCP, current vendor. This would be to adjust features, develop workflows with the system, modify the initial build-out. \$200,000</p> <p><u>Expertise support for Phase 2 Enhancement-</u> Contract with local IT vendor (Waimanalo Blooms) who completed needs assessment, development, & implementation of new web-based system to support Phase 2 Enhancements. This is a content area expert that currently supports and assists with data system development and technical discussions with data system vendor. \$89,920</p> <p><u>Comprehensive System for Personnel Development (CSPD) Data Analysis-</u> Contract UH-Hawaii Center on Disability Studies to support evaluation activities for CSPD (e.g., develop evaluation plan for CSPD; subcomponents survey review, data collection, and analysis; infographic development; and support development of Dashboard). \$49,500</p>	

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	<p><u>System Improvement and Targeted Training of Part C Staff and Providers-</u> Part C staff and provider training on evidence-based practices and specific topics such as assessment of language level of children who are deaf/hard of hearing, equity, etc. Training is expected to be for targeted groups (e.g., Speech Language Pathologist’s for hearing assessment). \$56,300</p> <p><u>Operating Expense-</u> State staff mileage, assessment protocols to determine level of development, publications, interpreter services, translation of documents, etc. Cover cost for support services (e.g., zoom license, wi-fi device) that are needed to support the implementation of tele-practice and access to "new" data system that will house each child's record and all child related documents including IFSP. \$10,000</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 50%;">Description of Each Direct Early Intervention Service</th> <th style="width: 50%;">Approximate Amount of Federal IDEA Part C Funds to be spent on Each Direct Service</th> </tr> </thead> <tbody> <tr> <td>Speech-Language Services</td> <td style="text-align: right;">\$225,756</td> </tr> <tr> <td>Occupational Therapy Services</td> <td style="text-align: right;">\$179,636</td> </tr> <tr> <td>Physical Therapy Services</td> <td style="text-align: right;">\$82,111</td> </tr> <tr> <td>Special Instruction Services (SpEd and Teacher)</td> <td style="text-align: right;">\$138,720</td> </tr> <tr> <td>Subtotal of amount under C</td> <td style="text-align: right;">\$626,223</td> </tr> </tbody> </table> <p>The direct services applied to ARPA Grant will allow EIS to provide Purchase of Service (POS) EI Programs additional operational expense funds through the State General Funds. This equates to 5% of Direct Services and Program cost per program which is to support POS EI Programs transition to the implemented 10% restriction on Indirect Discretionary Cost.</p> <p>Urosevich asked, as advisory, does EIS need any advising support on ARPA dollars and how they get spent and implemented? When the ARPA cliff hits, what need will EIS have for sustaining these funds for direct service, training etc.?</p> <p>Robles responded: At this point based on what we needed, and feedback we got from partners the budget has been submitted to OSEP. ARPA funds are being used on items that will not need to be sustained for the most part. Example:</p>	Description of Each Direct Early Intervention Service	Approximate Amount of Federal IDEA Part C Funds to be spent on Each Direct Service	Speech-Language Services	\$225,756	Occupational Therapy Services	\$179,636	Physical Therapy Services	\$82,111	Special Instruction Services (SpEd and Teacher)	\$138,720	Subtotal of amount under C	\$626,223	
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	<p>data system dollars is a one-time investment that does not need to be sustained. The only item that would need to be sustained is the BDI-3 On-line training. However, the number of subscriptions could be reduced in the future.</p> <p>Urosevich stated that we talk about the need to increase funding for providers. We should document the positive changes to programs in service delivery, recruiting and retaining, and whatever else the one-time 5% funds support. the increase to providers from the ARP monies and use it to champion Early Intervention to legislative to increase general funds.</p> <p>Robles stated, we did another rate and salary study as well as the number of hours for direct service delivery. What is the max amount how do we balance in terms of productivity and reimburse our providers? However, due to COVID we were not able to ask for more dollars last year. When Rep. Kobayashi was with HEICC he gave us good advice. He asked us what our proactive plan is and not to wait until providers are struggling. This made us look at indirect costs for programs and we needed to figure that out.</p> <p>We also talk with Sharon Thomas; she works with us on our Medicaid MOA. She helps us look at where we can enhance and what are the services we don't have in our MOA that we need to add. She is always looking at how we can improve our reimbursements.</p> <p>b. Budget Robles reported General fund budget remains the same.</p> <p>General funds fund 64.00 permanent and 0.50 temporary positions. Personnel cost is \$3,906,433 and operating cost is \$16,095,579 for a total of \$20,002,012. No funds spent on equipment.</p> <p>EIS Special funds fund 2.00 permanent and 2.00 temporary positions. Personnel cost is \$184,707 and no funds used towards operating costs. No funds spent on equipment.</p> <p>Part C (ARPA not included) funds 23.00 permanent and 3.50 temporary positions. Personnel cost is \$1,622,135, operating cost is \$1,007,243 and Equipment cost is \$14,000 for a total of \$2,643,378.</p>	

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	<p><i>c. Vacant Positions – Statewide</i></p> <p>Robles reported DOH EIS Admin staff vacancy for 4th quarter was at 5%, CC assigned to POS vacancies was at 11%, 9% vacancies at DOH State Programs and 24% at POS Contract programs. DOH numbers may seem lower but there have been positions abolished which in turn reflects the lower percent of vacancies.</p> <p>EIS vacancies, 2 Federal funded positions: Contract Supervisor and General Professional IV – Hearing Specialist positions are in recruitment.</p> <p>Robles stated all State general fund positions were under a hiring freeze. Recently just got word that the freeze has been lifted and now EI can recruit for the vacant positions.</p> <p>Urosevich, the 24% vacancy seems like a glaring issue for program and service delivery. Are we making any progress through the SSIP on recruitment and retention? I appreciate that we are in the midst of a pandemic that is impacting all programs and services!</p> <p>Robles responded: EI has implemented telepractice statewide. Our intent of doing telepractice was when we can't find providers on the island then contractors including EI when trying to support our programs could potentially develop telepractice relationships.</p> <p>Mersberg responded: Our ability to recruit has been reasonable. We have been able to do better with recruiting efforts. The bigger challenge is retention. Normally challenged with retaining staff. More candidates became available because of recent graduations.</p> <p>Moniz-Tadeo responded: Influx of staff looking for work when the pandemic first started. However, with the pandemic going longer they have had retention issues as well. When unemployment ended, that increased the number of prospects again.</p> <p><i>d. State Systemic Improvement Plan (SSIP) Update</i></p>	

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	<p><u>Professional Development & Technical Assistance:</u> Working to identify social emotional trainings to support providers and continue coaching fidelity process</p> <p><u>Fiscal: Staffing:</u> Collecting data to address the team structure for the PSP Approach to Teaming and Coaching and accessing behavior support services.</p> <p><u>Fiscal: Telepractice:</u> Revising procedural guidelines, training modules, and family handout. Developing a troubleshooting cheat sheet and finalizing a resource reference document.</p> <p><u>Monitoring & Accountability:</u> No new updates. Continue to pilot the Child Outcomes Summary (COS) fidelity process and develop a training module on using the developmental milestones in the COS process.</p> <p><i>e. Initiatives and Activities</i></p> <p><u>Data System update-</u> Continuing to build the new data system and anticipating roll out by the end of this year.</p> <p><u>Working on items listed in the American Rescue Plan (ARP) budget for implementation.</u></p> <p><u>Stakeholder Engagement-</u> Working on stakeholder engagement, OSEP Stakeholder Requirements is that state 1) provide details on number and different groups of members participating in setting targets, analyzing data, developing improvement strategies, and evaluating progress; 2) describe activities to increase stakeholder engagement including timelines; and 3) sharing results from stakeholder engagement activities.</p> <ul style="list-style-type: none"> - EIS has contacted Leadership in Disabilities and Achievement of Hawaii (LDAH) and Family Hui Hawaii for support with family engagement, <p>Robles stated that LDAH does great work in regard to family engagement. They are also the Parent Training Institute with the contract that supports the</p>	

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	<p>work we do. Family Hui does a lot of family work and they can help get the word out.</p> <p>Robles asked what if any ideas suggestions they have tried in relation to stakeholder’s engagement?</p> <p>Urosevich added it would be helpful to hear from the parents/family members in the meeting about ways they would want to provide feedback or ways they want to be involved recognizing that 3-hour meetings are hard. What are ways you want to share your own stories, strategies and ideas back with early intervention?</p> <p>Colunga responded, submitting our thoughts through a brief survey or brief email. The simpler the better. She later followed up on this and stated that it would be good if in the survey we would be able to state how many questions and an average amount of time it may take to complete.</p> <p>J Rivera added she agreed with Colunga. She felt comfortable in a one-to-one meeting. Being in long meetings is hard. Agrees that an email or survey would be best.</p> <p>Bartoldus added that for DD council getting their Facebook and web page more user friendly helped them get more family engagement.</p> <p>King asked: What is a good time for parents to engage or meet?</p> <p>Colunga responded: during lunch hours and break it up instead of having long meetings.</p> <p>J Rivera responded: Hard to determine when she will be available. Best times is when her son is in school. Surveys are feasible. Feels comfortable in the one-to-one meetings. Networks on Instagram/social media.</p> <p>Terrado After office hours and/or weekends, at LDAH we have Parent Talk Cafe every Friday.</p> <p>King discussed LDAH’s Parent Talk Café. Only requirement to be a part of it is that they are a parent. Provides resources weekly. Every Friday they go live on</p>	

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	<p>zoom which links to their private Facebook page. This platform was very effective during the pandemic. Gave them stability on connecting with parents and found it was useful for parents because it was also recorded, and they could watch it on their own time if they were unable to attend the live Parent Talk Café.</p> <p>Parent Talk Café FB Group https://www.facebook.com/groups/2659334410969387 https://ldahawaii.org/events/parent-talk-cafe-smart-ieps/ Parents and Providers are welcome to contact us; 808-696-5367/ https://ldahawaii.org/</p> <p>Urosevich asked: How can we partner better with LDAH? Does EIS and all POS providers advertise for the Parent Cafes?</p> <p>Moniz-Tadeo responded: Imua Family Services has shared this information out to our staff and families.</p> <p><i>f. Program Measures Dashboard with Complaint Summary</i> <i>[Refer to the HEICC Program Measures Dashboard]</i></p> <p>Measure #1- Robles shared when compared to FY 2019 we were down 12%. Compared to FY 2018 we were down 15%. It doesn't mean we are losing families, it just means less families have been calling us. Feels families may not be reaching out to us because during COVID there has been a big enhancement out in the community around different resources that are available.</p> <p>Measure #2- She shared that 96% of the calls were referrals to the EI program. Measure #3- She shared that we are not hitting the FY 2019 mark but have increased over FY 2020. We are down 8% compared to FY 2019 and down 9% compared to FY 2018.</p> <p>Measure #4- She shared the great news is that we have done a lot of partnering and pediatricians have done a lot of work to work with us on trying to get the word out on well checks and primary care services. Our referrals from primary care providers are currently at 62% the highest it has ever been.</p>	

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	<p>Measure # 5a, 5b, 5c- She shared we have completed evaluations using DAYC-2. Data only represents 4th quarter April through June. Late due to family reasons data may not be clean because family may not be the cause of the lateness it could be COVID related and not really the family. The biggest celebration we should be focusing on is that we are truly doing these multi developmental evaluations to determine eligibility. Prior to April we were not administering a tool to get developmental scores of our children. A lot of the information was based on interviews and reported information</p> <p>Measure #6, 6a, & 6b- She shared data is not clean due to COVID, so we are unable to report out anything substantial. We just recently got the DAYC-2 tool to implement prior to April.</p> <p>Measure #7- She shared that for FY 2021 81% of children fell into the developmentally delayed category, 5% in the developmentally delayed/biological risk category, 3% in the biological risk category, and 11% were not eligible.</p> <p>Measure #8- She shared that in the 4th quarter there were 617 total eligible children. Q4 numbers are higher because programs were pushing out the DAYC-2 to catch up since there was no tool until April.</p> <p>Measure #9- She shared average of FY 2021 was 2,252 children with IFSP's. For Q4 there were 1,783 children with IFSP's.</p> <p>Measure #10- She shared that for FY 2021 average 25 were re-evaluated, no longer eligible (prior to reaching max age for Part C, 88 became Part B eligible (reached max age for Part C), 10 not eligible for Part B, exit with referrals to other programs, 11 not eligible for Part B, exit with no referrals to other programs, 68 Part B eligibility not determined, 26 moved out of state, 61 withdrawal by parent/guardian and 27 attempts to contact was unsuccessful.</p> <p>Robles also reported that there were no complaints for the 4th quarter.</p>	
<p>III. Council Business (10:15-11:45)</p>	<p><i>a. Legislative Update</i> Robles reported no legislative updates to report on.</p>	

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	<p>Urosevich reported no updates. Stated for November it would be helpful to know if EIS wants HEIC to advocate at the legislature for anything related to our keiki birth to three with special needs. We should know more about our policy agenda by November</p> <p>Bartoldus reported Vision and hearing bill will be something that will be going through next session. It is something they will be looking at and that we support it.</p> <p>b. Early Learning Board Update Urosevich reported that the Early Learning board has been in the process of selecting the next Office of Early Learning director. Early Learning board narrowed choices to 3 finalists. Executive meeting was held on 8/24 and the board voted on their recommendation. Recommendation will go to the superintendent to approve and an offer will be made. Conservative time frame will have director in place by the end of the year/early next year.</p> <p>Urosevich reported from the legislative session there was a position created for the Early Learning board to help coordinate Act 46, rapid expansion of access to care and early learning programs for 3- and 4-year-olds. Goal by 2032 to have 100% of 3- and 4-year-olds to have access to early care learning programs. No one has been hired yet.</p> <p>c. HEICC Priorities Update & Discussion Urosevich stated before we can convene the ad-hoc committees we need to check with our Attorney General that is attached to HEICC to make sure we are in bounds with the Sunshine Law. The committees are important for 2 reasons. 1. To make sure we are doing our job in advising Early Intervention Services and it is hard to advise when we only meet quarterly. 2. Our members have a hard time understanding EIS in an intimate way. One of the best ways to understand how EIS works is serving on committees and going more in depth on different issues.</p> <p>Priorities and possible members of each committee.</p> <p>1. <u>Family Participation and Stakeholder Engagement-</u> Kerrie, Kehau, Bonny, Bobbie-Jo, Jennifer?</p>	<p>Urosevich to follow up with AG to make sure we are in line with Sunshine Law in regard to community partners being involved with HEICC in committees.</p>

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	<p>2. <u>Recruitment, Onboarding and Succession Process</u>- Bobbie-Jo, Kerrie, Charlene, Jeff?</p> <p>3. <u>EIS Outreach</u>- Reinalyn and Family Hui?</p> <p>4. <u>EIS Policy, Data and Budget Support</u>- Insurance Rep, Legislator Rep, others?</p> <p>5. <u>Data collection and Sharing</u>- No one identified yet. Still trying to figure out what data sets would be needed.</p> <p>Urosevich stated committees will be ad-hoc and time bound so that it will not be on-going.</p> <p>Terrado asked: May I know who's from Family Hui?</p> <p>Urosevich responded: she needs more clarification from AG who can be a part of the work group.</p> <p>Robles added: We have to be clear what the committees can do because committees are not the deciding body. The body is the HEICC members.</p> <p>Urosevich stated that the committees would bring it back to the board to make any decisions.</p> <p><i>d. HEICC/Exec Committee Appointments and Vacancies</i> Vacant positions Parent w/child age 6 or younger- Possibly Veronica Davilla, State Legislator- Vacant: Request submitted by EIS, State Agency responsible for the regulation of health insurance Vacant: Colin Hayashida has been sending representatives, but we need to see if he has a permanent person, Other members of interest selected by the governor- 1 Vacant position. Pending hire of Executive Office on Early Learning Director.</p> <p>Bonyen Colunga, Doug Mersberg, Leah Muccio, Sharon Thomas, Dayna Luka and Kerrie Urosevich all need to reapply.</p>	<p>→ EIS to follow up with Insurance Commission to identify and process a permanent representative.</p> <p>→ EIS to follow up on Senate position</p>
<p>IV. Public Comment (11:45-11:55)</p>	<p>Jackson stated Head Start/Early Head Start has reopened as of august for the new school year. However, they are still recruiting to fill their slots. Currently modified but by Jan 2022 all services must be in person. August to December</p>	

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	<p>is the ramping up period for all comprehensive services to be provided in person come January 2022. Online applications available.</p> <p>Robles and Urosevich asked Jackson to send a link to applications so EI can get it out to programs.</p>	<p>→ Jackson to send link to Robles and Urosevich for link to applications.</p>
<p>V. Announcements (11:55)</p>	<p>Urosevich reported their all-network meeting is happening tomorrow 8/26/2021 from 9am-12pm for Early Childhood Action Strategies.</p>	<p>→ Amy R/Lee to send out flyer to HEICC Members</p>
<p>VI. Future Meeting(s) TBC</p>	<p>The next Quarterly Meeting will be on November 17th, 2021 9:00am-12:00pm</p> <p>The next Executive Meeting will be on November 2nd, 2021 10:00am-12:00pm</p>	
<p>VII. Adjourn (12:00)</p>	<p>Chair, Moniz-Tadeo adjourned the meeting at 11:00am</p>	

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