

HAWAII EARLY INTERVENTION COORDINATING COUNCIL  
Executive Committee Meeting  
December 9<sup>th</sup>, 2022

O'ahu	Zoom Meeting
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**MINUTES**

**Members Present:** Kerie Urosevich (Chair), Bonyen Colunga, Catherine Abellera

**Members Absent:** Doug Mersberg, Sharon Thomas

**Ex-Officio:** Stacy Kong

**Guests:** N/A

**Staff:** Jeffrey Lee

TOPIC	DISCUSSION	DECISION/FOLLOW-UP
<b>I. Call to Order (1:00)</b>	Chair, Urosevich, called the meeting to order at 1:00 p.m.  <i>a. Welcome/Introductions</i> Completed  <i>b. Review Agenda</i> Completed  <i>c. Review Minutes from August 2, 2022 Executive Committee Meeting</i> Completed and approved  <i>d. Review Minutes from August 31, 2022 HEICC Quarterly Meeting</i> Completed	Executive meeting minutes approved at 1:09 PM  8/31/2022 Quarterly meeting minutes; change Part C update section e header, to reflect “stakeholder meetings”
<b>II. Early Intervention Section Update (1:20-2:30)</b>	<i>a. Part C Update</i> Kong reported: <ul style="list-style-type: none"> <li>• State Performance Plan (SPP)/Annual Performance Report (APR) due February 1, 2023               <ul style="list-style-type: none"> <li>✓ Stakeholder Meetings held August – November 2022. <a href="https://health.hawaii.gov/eis/stakeholder-engagement/">https://health.hawaii.gov/eis/stakeholder-engagement/</a></li> </ul> </li> </ul>	

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	<ul style="list-style-type: none"> <li>✓ No changes to targets established last year based on stakeholder input which was accepted by OSEP.</li> <li>✓ Currently drafting report.</li> <li>• Part C Grant application due May 2023.</li> </ul> <p><b>b. Budget</b>                      Kong reported:</p> <ul style="list-style-type: none"> <li>• ARPA Funds: 1.19 million                         <ul style="list-style-type: none"> <li>○ In timing period and funds must be expended by 09.2023.</li> <li>○ Encumbered \$530K (indirect costs for POS programs)</li> <li>○ Remaining funds will be used for various items:                                 <ul style="list-style-type: none"> <li>▪ Telepractice equipment for all programs</li> <li>▪ BDI-3 (evaluation training, kits, and protocols) for all programs</li> <li>▪ Professional Development Activities</li> </ul> </li> </ul> </li> </ul> <p><b>c. Vacant Positions – Statewide</b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-left: 20px;"> <thead> <tr> <th style="width: 30%;">Category</th> <th style="width: 15%;">Total Positions</th> <th style="width: 15%;">Total Vacant</th> <th style="width: 40%;">Notes</th> </tr> </thead> <tbody> <tr> <td>DOH EIS Admin Office</td> <td style="text-align: center;">37</td> <td style="text-align: center;">9</td> <td>24% vacancy, Q4 vacancy was at 26%</td> </tr> <tr> <td>DOH CC Assigned to POS</td> <td style="text-align: center;">14</td> <td style="text-align: center;">1</td> <td>7% vacancy, Q4 vacancy was at 25%</td> </tr> <tr> <td>DOH State EI Programs (3 Programs)</td> <td style="text-align: center;">32</td> <td style="text-align: center;">9</td> <td>28% vacancy, Q4 vacancy was at 29%</td> </tr> <tr> <td>POS Contract EI Programs (15 Programs)</td> <td style="text-align: center;">165</td> <td style="text-align: center;">38</td> <td>23% vacancy; Q4 vacancy was at 24%</td> </tr> </tbody> </table>	Category	Total Positions	Total Vacant	Notes	DOH EIS Admin Office	37	9	24% vacancy, Q4 vacancy was at 26%	DOH CC Assigned to POS	14	1	7% vacancy, Q4 vacancy was at 25%	DOH State EI Programs (3 Programs)	32	9	28% vacancy, Q4 vacancy was at 29%	POS Contract EI Programs (15 Programs)	165	38	23% vacancy; Q4 vacancy was at 24%	
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	<p><i>d. State Systemic Improvement Plan (SSIP) Update</i></p> <p>El Section and all SSIP workgroups welcome HEICC members to join any SSIP workgroup.</p> <p><u>Professional Development &amp; Technical Assistance</u></p> <ol style="list-style-type: none"> <li>1. Finalizing Coaching Fidelity Criteria Updates for Natural Learning environment Practices (NLEP) &amp; Resource Based Practices (RBP). Once that is done, will also complete Mentor in Training (MIT) coaching fidelity criteria.</li> <li>2. Excel Coaching Fidelity Summary Workbooks – finalizing fidelity workbooks for NLEP &amp; RBP with our National TAs. In process of drafting data roll-up sheets.</li> <li>3. Gearing up for Coaching Fidelity Scale Up in 2023 with next cohort of EI programs –       <ol style="list-style-type: none"> <li>a. Ask – Need dedicated mentor positions/staff to support and maintain coaching fidelity practices - how can HEICC help to get us positions and or funding to support mentor positions (refer to Fiscal-Staffing workgroup for draft of Mentor Capacity worksheet for role of mentor, time, activities, etc.)</li> </ol> </li> <li>4. SE Competencies – Finalizing training schedule and cost to conduct SE competencies training through AIMHI w/ EI providers and supervisors.       <ol style="list-style-type: none"> <li>a. Ask – need funding support to continue collaboration w/ AIMHI in training and implementation of SE competencies and Reflective Supervision after use of ARPA funds</li> </ol> </li> </ol> <p>Urosevich asked if the asks from the professional development and technical assistance groups of needing dedicated mentor positions as well as needing funds to continue collaboration with AIMHI is a request that the Department of Health is making to the legislature. Kong responded that she is unsure, but will look into it and if they are then she</p>	

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	<p>will bring it to HEICC to get support.</p> <p><u>Fiscal: Staffing</u></p> <ol style="list-style-type: none"> <li>1. PBS Guidelines have been created and distributed</li> <li>2. Drafted a Geographic Teams Guidance. The purpose of the geographic team guidance is to provide EI programs guidance on how to establish assigned geographic service area boundaries when a program splits into 2 or more teams.           <p>Abellera asked Kong to expand on the Geographic Teams Guidance. Kong stated that it focuses around the efficient use of staffs time and not needing to travel as far by dividing programs into geographic based teams.</p> </li> <li>3. Drafted Mentor Capacity Worksheet. Purpose for the worksheet is to help determine the number of mentees a mentor can take on as well as help in determining how many mentors are needed across the state.</li> <li>4. Drafted Program Staffing Guidance The purpose of the Program Staffing guidance is to provide the programs with a breakdown of the staffing needs care coordinators and service providers based on the average enrollments.           <ol style="list-style-type: none"> <li>a. (Geo team, Mentor capacity, and program staffing all are being reviewed based off of feedback from the SSIP leadership team. Documents to be revised to add suggestions and edits.)</li> </ol> </li> <li>5. Comprehensive System of Personnel Development (CSPD) Recruitment and Retention Survey Completed. SSIP group</li> </ol>	

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	<p>working on analyzing the data. Feedback for clarification was received during the SSIP stakeholder meeting. Next step is to discuss with the workgroup.</p> <p><u>Fiscal: Telepractice</u></p> <ol style="list-style-type: none"> <li>1. Workgroup Finalized Telepractice (TP) Troubleshooting Guide for Families and Troubleshooting Cheat Sheet finalized and submitted for EIS Core Team review. Finalized, ready to distribute to programs for use (in progress)</li> <li>2. Workgroup provided feedback and recommendations to Pacific Basin Telehealth Resource Center on Annual TP survey for families and providers. Discussed focus of survey-telepractice accessibility vs. quality of services, will most likely table survey focusing on accessibility due to other means of gathering data and will discuss with PD workgroup regarding quality of services survey.</li> </ol> <p><u>Monitoring &amp; Accountability</u></p> <ol style="list-style-type: none"> <li>1. Selected to be in the first national cohort of implementing the COS-Knowledge Check. Implementation will begin in January 2023.</li> <li>2. Updated the COS Fidelity Tool with national TA support and will be implemented as part of the COS-KC process.</li> <li>3. Added three additional questions to the Annual Family Outcomes Survey to gather information from families on their understanding of the COS process.</li> </ol> <p><b><i>e. Initiatives and Activities</i></b></p> <ol style="list-style-type: none"> <li>1) Data System Update –       <ul style="list-style-type: none"> <li>• Continuing to work on the development of the database.</li> </ul> </li> <li>2) E-Signature: Still working on converting all forms to be e-</li> </ol>	

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	<p>signature friendly.</p> <p>3) Training for IMH competencies and Reflective Supervision:            Will be contracting with Association for Infant Mental Health.</p> <p><b>f. Program Measures Dashboard with Complaint Summary</b>  <i>[Refer to HEICC Program Measures at A Glance Dashboard and Early Intervention Section handouts]</i></p> <p><i>Kong reported out on the data dashboard,</i>            Measure #1: EI Referral Line Information &amp; Referral (I&amp;R) Contacts: Lee to work on adjusting the data to present at the quarterly meeting. Graph needs to reflect current quarter to last year at the same quarter to compare quarter over quarter comparison.</p> <p>Measure #2: Status of EI Referral Line I&amp;R Contacts: 98% of calls to the referral line has been for early intervention services during FY 23 quarter 1.</p> <p>Measure #3: EI Program Referrals: during FY 23 Quarter 1 there has been 909 program referrals. This was an increase from FY 22 Quarter 1 which was 892 program referrals.</p> <p>Measure #4: Referral Agents: during FY 23 quarter 1, Primary care providers are the highest referral source at 63% and parents are second at 24%.</p> <p>Measure #5: Timely Multi-Disciplinary Evaluation(MDE):            81% of MDE's were completed timely in FY 23 Quarter 1. This was an increase from FY 22 Quarter 1 which was at 78%</p> <p>Measure #5a: Family Reasons for Late MDE:            The top 3 family reasons MDE's were late were, cancelled appointments 20%, calls not returned in a timely manner and schedule conflict.</p>	

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	<p>Measure #5b: Program Reasons for Late MDE:            The top 2 program reasons MDE's were late were, blanks(no reason given) 75%, other 10%</p> <p>Measure #6: Timely IFSP:            39% of IFSP's were completed timely in FY 23 Quarter 1. This was a decrease from FY 22 Quarter 1 which was at 44%</p> <p>Measure #6a: Family Reasons for Late IFSP:            Schedule conflict 33% and cancelled appointments were the top 2 family reasons as to why IFSP's were late.</p> <p>Measure #6b: Program Reasons for Late IFSP:            Vacancy 46% and full schedules of providers 20% were the top 2 program reasons for late IFSP's.</p> <p>Measure #7: Eligibility by Category:            During FY 23 Quarter 1 children were found eligible by the following, 63% Developmental delay only, 7% Developmental delay and Biological risk, and 4% Biological risk only. 20% were not eligible.</p> <p>Measure #8: Status of New Referrals to EI Programs Prior to IFSP:            497 children were eligible for services during FY 23 Quarter 1.</p> <p>Measure #9: Children with IFSP's:            There were a total of 1937 children with an IFSP during FY 23 quarter 1.</p> <p>Measure #10: Children Exiting from EI Services            There were a total of 419 children who exited early intervention services during FY 23 quarter 1.</p> <p><b>Annual Performance Indicators:</b>            Indicator #1 Timely Services: Timely services is only reported annually.</p>	

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	<p>Will not be able to provide quarterly data until the new data system is up and running.</p> <p><b>Child Outcomes:</b>            Indicator #3A: Social Emotional Skills:            Summary statement 1: "Substantially increased rate of growth" was 50% for FY 23 quarter 1. This was an increase from FY 22 quarter 1 which was at 42.86%.</p> <p>Summary Statement 2: "Functioning with in age expectation at exit" was 66.67% for FY 23 quarter 1. This was a decrease FY 22 quarter 1 which was at 74.32%</p> <p>Indicator# 3B: Acquiring &amp; Using Knowledge and Skills            Summary statement 1: "Substantially increased rate of growth" was 65.02% for FY 23 quarter 1. This was an increase from FY 22 quarter 1 which was at 62.75%.</p> <p>Summary Statement 2: "Functioning with in age expectation at exit" was 47.19% for FY 23 quarter 1. This was a decrease FY 22 quarter 1 which was at 62.16%</p> <p>Indicator #3C: Taking Appropriate Action to Meet Needs            Summary statement 1: "Substantially increased rate of growth" was 54% for FY 23 quarter 1. This was a decrease from FY 22 quarter 1 which was at 71.79%.</p> <p>Summary Statement 2: "Functioning with in age expectation at exit" was 66.34% for FY 23 quarter 1. This was a decrease FY 22 quarter 1 which was at 77.03%</p> <p><b>Family Outcomes:</b>            Indicator 4A: Family Knows Their Rights: Currently only reported on</p>	



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	<p>annually. FY 22 was 86.19%. This was an increase from FY 21 which was at 83.30%.</p> <p>Indicator 4B: Family Communicates Child's Needs: Currently only reported on annually. FY 22 was 87.94%. This was a decrease from FY 21 which was at 88.01%.</p> <p>Indicator #4C: Family Helped Their Child Learn and Grow: Currently only reported on annually. FY 22 was 84.21%. This was a decrease from FY 21 which was at 85.08%.</p> <p><b>Transition</b></p> <p>Indicator #8A: Transition Plan            FY 23 quarter 1 was 83.79%. This was a decrease from FY 22 quarter 1 which was at 85%</p> <p>Indicator #8B: Part B Notification            FY 23 quarter 1 was 89.44%. This was a decrease from FY 22 quarter 1 which was at 94%</p> <p>Indicator #8C: Transition Conference            FY 23 quarter 1 was 78.15%. This was a decrease from FY 22 quarter 1 which was at 83%</p> <p>Kong stated that she would like to increase member participation during the quarterly meeting and suggested that the members be broken up and put into breakout rooms so that they can begin to build rapport with each other in the hopes that they will slowly begin to feel comfortable to speak up during the larger group. Urosevich and Abellera agreed.</p>	

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<b>III. Council Business (2:30-2:55)</b>	<p><i>a. Legislative Update</i> No update Urosevich asked if early intervention is asking for any increase of funding for the upcoming legislative session. Kong stated we do not have anything at this time. Urosevich stated that HEICC should focus on this during spring.</p> <p><i>b. Early Learning Board (ELB) Update</i> Act 46 implementation roadmap was submitted.</p> <p><i>c. HEICC Priorities Update &amp; Discussion</i> Urosevich asked if we should use the priority document as a breakout room activity during the quarterly meeting to have them discuss HEICC priorities and rank them in the order of importance.</p> <p><i>d. Updates on HEICC/Exec Committee Appointments and Vacancies</i> <i>Did not get to go over due to time constraints, but will be reported out on at the December 15<sup>th</sup> quarterly meeting.</i></p>	<p>Urosevich asked Kong to send her the list of titles around the APR work groups so that she can put together a skeleton template to present at quarterly on the groups that we would like HEICC members to join</p>
<b>IV. Discussion to set Agenda for December 16, 2022 HEICC Quarterly Meeting (2:55-3:05)</b>	<p>Add breakout room activity to be added for the HEICC priorities and discussion section.</p>	
<b>V. Public Comment (3:05)</b>	<p>No public comments</p>	
<b>VI. Adjourn (3:05)</b>	<p>Chair Urosevich adjourned the meeting at 3:05 pm.</p>	