

**VIRGINIA INTERAGENCY COORDINATING COUNCIL  
MEETING MINUTES  
Chesterfield County Government Center  
September 12, 2007**

The Virginia Interagency Coordinating Council (VICC) Chair, Brenda Laws, called the meeting to order. She introduced and welcomed Delegate Shannon Valentine as a new member of the VICC. Karen Durst then called the roll. Thirteen (13) VICC members were present. (Please see the attendance sheet following the minutes).

Bonnie Grifa and Mary Anne White, Part C Monitoring Consultants, presented information on Public Reporting and the Determinations Process. The following was shared:

- States have been required by the Office of Special Education Programs (OSEP) to submit a 6-year State Performance Plan (SPP) and then report on the progress annually through the Annual Performance Report (APR).
  - The VICC assisted with setting the targets for the SPP indicators. Eight of the indicators will be reported on for this year.
- Public reporting of state and local data is being required by OSEP. Public reporting of local data is based on how the local system's data compares to the state target in the indicator areas of timely initiation of services; primary service setting; child find, including birth to one and birth to three; 45-day timeline; and transition, including steps and services, notification of local lead agency (LEA) and the transition conference.
- Local information will include the name of the local system; the area served; December 01 child count; name of the local lead agency; and performance on the individual indicators.
- A written summary of the local systems' Corrective Action Plan/Service Enhancement Plan (CAP/SEP) will be included in order to provide information on why the systems performed as they did.
- Public reporting must be broadly disseminated and understandable. The Infant & Toddler Connection of Virginia website, [www.infantva.org](http://www.infantva.org), will be used for public reporting, as a minimum.
- Links will be included with public reporting to the Annual Performance Report (APR) and State Performance Report (SPP) including a description of the indicators.
- A teleconference was held in February to inform the field of the OSEP requirement regarding public reporting.
  
- The Office of Special Education Programs (OSEP) has also assigned a determination status to each state based on specific factors that include content of the APR, financial information, dispute resolutions, etc. The determination ratings include "meets requirements", "needs assistance", or "needs intervention".
  - Virginia was assigned a determination of "needs assistance". This was viewed positively.

- No states were given the status of “needs substantial intervention” for this first year. OSEP will be developing a plan as to how to address those states with this status in the future.
- The process of assigning determinations is also being required at the local level. A stakeholder group worked with Part C staff on developing the determinations process. Sharon Walsh, a national consultant from the National Center for Special Education Accountability and Monitoring (NCSEAM) has assisted in facilitating the stakeholder meetings.
  - Factors included in assigning a status were the OSEP compliance and performance indicators; correction of ongoing non-compliance; timely, reliable and valid data; and dispute resolutions.
    - OSEP viewed compliance as ranging from 95-100%, therefore, Virginia used this same range
    - It was recommended by the stakeholder group that a numbers system be assigned to local systems based on the identified factors. The Part C Office was asked to determine the actual point ranges. The following system is being used:
      - Those systems with a total of 1-4 points with no indicator < 85% will receive a determination of “meets requirements.”
        - Follow-up for those systems will be completed through the locality’s Corrective Action Plan/Service Enhancement Plan (CAP/SEP).
      - Those systems with 5-9 points or 1-4 points with one or more indicators < 85% will receive a determination of “needs assistance”.
      - Follow-up for those systems will involve the locality’s CAP/SEP and technical assistance through calls or visits.
      - Those systems with a total of 10-17 points will receive a determination of “needs intervention”.
      - Follow-up for those systems will involve enhancement of the locality’s CAP/SEP; monthly contacts; onsite visits to include the local system manager, local system manager’s supervisor, technical assistance consultant and monitor; scheduled data reviews; and the possibility of “focused visits”.
      - No systems were given a determination of “needs substantial intervention” for this first year.
        - A plan will be developed for follow-up for those localities receiving a status of “needs substantial intervention” in the future.
- The above criteria for determinations are being used this year but may be revised in following years.
  - Timely submission of data for 2005 was not used as criteria since not all data was available for that time period. The data is one year old and more current data will be used in the future.

- Local systems were notified of their determination status by August 30, 2007. Information was also sent to executive directors and supervisors.
- Information on the determinations will be posted on the Infant & Toddler Connection of Virginia website at [www.infantva.org](http://www.infantva.org).
- Virginia was recognized as a leader among states related to the determinations process and was asked to share information at a national conference in Baltimore.
- The stakeholders' group and local systems were thanked for their contributions to the development of the determinations process.
- OSEP will be adding fiscal verification visits in the future. The fiscal verification visit will not be a fiscal audit. OSEP will be looking at how states deal with fiscal assurances such as payor of last resort, non-supplanting and maintenance of effort.

VICC business was then conducted. The election of officers was the first item on the agenda. Mary Lou Hutton spoke on the work of the Nominating Committee. She shared that the following slate of officers was being presented for consideration:

- Rick Beaman-Chair;
- Phyllis Mondak-Vice Chair; and
- Sheri Osborne-Secretary.

There were no additional nominations. Mary Lou Hutton made a motion that the slate of officers be accepted as the new officers. Ginny Heuple seconded the motion. The motion carried. A special thank you was given to the outgoing officers for their commitment over the years to the VICC.

Tammy Whitlock from the Department of Medical Assistance Services (DMAS) then provided information on the work with DMAS related to Part C. She reported the following:

- Conference calls are continuing on at least a monthly basis with DMAS, Part C and the Managed Care Organizations' (MCO) units.
- DMAS is looking at including developmental therapy (special instruction) into the Medicaid State Plan.
  - This would be considered in next year's budget since data is not currently available. A request will be sent to the local system managers asking for data on how many children this would effect.
- DMAS is also looking at possibly increasing the rates for Part C services that could include costs for providing services in the natural environment.
- DMAS is looking at the average rate for fee for services in order to share that information with MCOs whereby indicating that their rate is currently below the average.
- A pilot is being planned in Northern Virginia that would include information being shared between Part C and the MCOs. The purpose is to bridge the gaps and provide each entity with an understanding of the other's system.
- Beth Tolley continues to share Part C related issues with DMAS in order to address and resolve problems.

- A special thank you was expressed to Tammy Whitlock for her collaboration with Part C.

Delly Greenberg presented information on behalf of the VICC Retreat Planning Committee. Rick Beaman, Eva Thorpe, Ginny Heuple and Delly Greenberg are members of that committee. She presented the following as planning issues that need to have decisions made:

- Where and when will the retreat be held?
- There is a need to define the issue of personnel shortages throughout Virginia. The questions include who is serving Part C, where are the shortages and are the shortages connected to the number of providers or salaries.

Discussion included:

- Interest had been expressed by several Universities that serve as local lead agencies in getting together, along with Part C, to discuss the issue of personnel shortages. Should these universities be asked to attend the retreat?
- Can the National Early Childhood Technical Assistance Center (NECTAC) assist with information on how other states are addressing the problem?
- Can NECTAC or another entity facilitate the retreat as well as facilitate the planning process?
- Information gathering is needed in looking at the bigger issues related to personnel shortages. This could include sharing of information by the Part C monitors regarding issues identified through monitoring related to personnel shortages.
- The issue of workforce development needs to be explored with earlier exposure related to early intervention occurring. This could be addressed at the high school level or younger.
- The role of DMAS and the designation of “developmental therapies” must also be considered.
- The regular December 12, 2007 VICC meeting could be used for the retreat. The meeting is scheduled at the Hanover Department of Social Services (DSS) Office. Another date or conference call could be identified for the regular VICC meeting.

Next steps include:

- Mary Ann Discenza to follow-up regarding a time for the universities that serve as local lead agencies to meet related to Part C personnel shortages. She will report back to the Retreat Planning Committee regarding whether the university personnel would be interested in attending the retreat.
- Mary Ann Discenza and Sue Mackey Andrews will be meeting with the Partnership related to training.
- Part C monitors will share information on issues identified through monitoring related to personnel shortages.
- Other related information will be gathered.
- Mary Ann Discenza will explore the possibility of NECTAC facilitating the retreat and providing assistance and information related to personnel shortages.
- The retreat will be held at the Hanover DSS Office in place of the regular December 12, 2007 VICC meeting.

- Arrangements for a special VICC meeting to discuss approval of the APR will be planned via email communication.
- The Retreat Planning Committee will continue to work via conference calls and email communication.

The Advocacy Committee then reported on their activities. Debra Holloway shared that the committee held a conference call September 05, 2007. The following issues were discussed during the call:

- Ensuring families attend and are involved with the Creating Connections EI Conference.
  - Planning for the availability of some funds from the Family Involvement Project for families attending the conference.
  - Ensuring a family-friendly environment with the possibility of a flier being developed for families.
  - Looking at what other states are doing.
- The development of a letter to legislators providing information about the VICC and Part C and their purposes. Discussion occurred with the following points being made.
  - The letter must be short and efficient.
  - Meaningful information must be provided.

A motion was made by Sheri Osborne that the Advocacy Committee draft a letter to the legislators on behalf of the VICC. Rick Beaman seconded the motion. The motion was approved. The Committee will draft a letter and send it to the VICC Steering Committee for approval.

Public comment was then received.

Carol Granger, the System Manager for the Infant & Toddler Connection of Chesterfield, spoke on behalf of the Steering Committee of the Virginia Council Coordinator's Association, (CoCoA). The following italicized information is verbatim from the written report provided:

*Good Morning. My name is Carol Granger. I am the System Manager in Chesterfield and the Chair of CoCoA. I am speaking to you today on behalf of the CoCoA Steering Committee. We welcome back Sue Mackey Andrews with Solutions and look forward to the work we will accomplish together.*

*We thank the Part C office for sharing the Public Awareness plan with the field. We would like to see the outcomes of the plan and know how the targets for local child find were formulated. We would also like to encourage more participation from the field on the Public Awareness work to develop a state and locally integrated public awareness campaign.*

*We are looking forward to the Local System Manager's training in October and appreciate the work of the Part C office and the Integrated Training Collaborative to facilitate this. Thank you.*

Allan Phillips, the System Manager for the Infant & Toddler Connection of Fairfax then presented public comment. The following italicized information is verbatim from the written report provided:

*Hi I am Allan Phillips, system manager from Fairfax-Falls Church. I applaud the Part C office and the Department for going forward with the recommendations of the Solutions report. These changes are long over due and seriously needed to help localities resolve compliance issues and develop State- wide consistency for services.*

*I remember about 8 years ago - here at the VICC meeting a number of families gave comment about waiting for an evaluation and services. After that there was a frantic survey to find out how pervasive the problem was- there was no data system to track it. We as a total system have made progress but not nearly enough.*

*I truly believe we have the opportunity to make significant changes in our processes and provide the necessary tools to put systems of accountability in place. We really owe it to the infants and toddlers, their families and the people who provide services to them. Thank you.*

Cori Hill reported on the work of the Integrated Training Collaborative related to the 2008 Creating Connections Conference. She stated the following:

- Various locations are being explored for holding the conference, including a site in Williamsburg.
- The Williamsburg location is able to accommodate 300 attendees and does have breakout rooms for sessions.
- Various dates are still available including March or April.
- Cori is awaiting feedback from the Part C Office.

The topic of "Input to the VICC Steering Committee" was tabled on a request from Mary Ann Discenza.

David Mills provided an update on the Family Survey. He reported that results were available from last year's survey. Old Dominion University's Social Science Research Center had administered the survey using a two-tiered mailing approach. A higher than average response was received. Based on this return rate, NECTAC had asked Virginia to present at the national conference in Baltimore. The full report is available on the website at [www.infantva.org](http://www.infantva.org). The administration of this year's survey is currently underway.

Debra Holloway, Manager of the Family Involvement Project, presented the Family Report. The following italicized information is verbatim from the written report submitted.

*Project staff continues to be active participants on the VICC steering Committee, Management Team, Integrative Training Collaborative, Autism Committee, Virginia Integrated Network of Family Organizations (VA-INFO), MR/EI Advisory Group, the Monitoring Workgroup, Hearing Workgroup, Child and Family Services Advisory Group and local and regional council meetings. The Family Involvement Project attended The Early Intervention Creating Connections Conference and assisted with conducting a session, Transition: Families and Providers Working Together!*

*Project staff also displayed program information at the Creating Connections Conference, the Connections Resource Fair and the Access Summit this quarter.*

*The Family Involvement Project continues to bring together all local parent representatives in the commonwealth to set goals and talk about issues. The group met twice this quarter and is working on improving family involvement on the local level. Project staff continues to conduct PTP trainings and provide matches to families when requested and has been attending the Northern VA Care Connections PTP sub-committee meetings to discuss ways the groups can work together to provide to families.*

*Project staff continues to host the ARCFIP list serve with 313 members.*

Information was also presented on the Part C/Part B Transition Trainings. Good feedback was received from the participants. In addition to training information on Part C and Part B requirements, opportunities existed for Part C and Part B to discuss transition processes. A final session will be offered in Richmond in October for those systems that have been unable to participate in previous trainings. Materials from the trainings are available on the website at [www.infantva.org](http://www.infantva.org) under "What's New".

Rick Beaman shared information on the ARC of Prince William's Circle of Support Conference. The conference will be held November 03, 2007 from 8:30-3:30 at Hylton High School in Woodbridge, Virginia.

Sue Mackey Andrews from Solutions, Inc. then presented information on her report and recommendations for the Part C System. She cited the following as the four areas to be addressed:

- The Ability to Pay (ATP) Process-Family Cost Participation;
- ITOTS;
- Medicaid; and
- The Allocation Methodology.

She commented on the increased accountability focus of OSEP and the upcoming addition of fiscal monitoring by OSEP. This fiscal focus will include payor of last resort, non-supplanting and maintenance of effort. Fiscal monitoring will occur within the next

two years. Sue Mackey Andrews also discussed the existing infrastructure of the Part C System in Virginia and the need for increased funding.

The following points were made related to the findings in the Solutions report on ATP/Family Cost Participation:

- Code of Virginia requires Family Cost Participation;
- Differences in how the ATP Process operates across the state is apparent;
- Virginia is the only state with a two-step process for ATP with covered services versus uncovered services;
- The current process is in conflict with the philosophy of the supports and services;
- The Part C program has difficulty responding to the General Assembly and OSEP regarding the dollars in the system;
  - Monitoring and supervision and state and federal reporting are the responsibilities of the local lead agencies and the state lead agency;
- Information is lacking about the amount of family fees collected within the system and how many families may have declined services due to the fee system;
  - Are families aware of and using the appeal process;
- Differences exist in how local systems contract with providers across the forty systems;
- Differences exist in how local systems address associated costs;
- Inequitable reimbursement effects provider availability; and
- ATP cannot be fixed in isolation without addressing the entire system.

Additional information provided from the study included:

- The provider capacity has not grown along with increased enrollment;
  - What does this mean for families related to how services are provided and the quality of services?
- There is a disparity between the annualized count and the December 1 count;
- The average child stays in the Part C system 8-8.5 months;
  - Does the ability for a child to transition at two years of age effect this?
- The average age at which a child enters the Part C system is 18 months;
- Forty-five percent (45%) of the referrals statewide do not go anywhere;
  - They may be lost to the system, decline services or are not eligible;
  - The rate should be 15-20% as a maximum;
- There is a need to increase appropriate referrals;
- Concerns exist over prematurity;
- Families from Child Abuse Prevention and Treatment Act (CAPTA) referrals from DSS do not have to accept services and may be difficult to locate; and
- CAPTA referrals make up a small percentage of referrals.

Related to Medicaid, Sue Mackey Andrews shared the following:

- Part C in Virginia is currently processed through Medicaid as a rehab. medical model which conflicts with how Part C is operated;
- The dollars are influencing what is happening; and
- The dollars don't support the model of supports and services.

Plans for changes within the Part C system will occur in two phases. Areas to be addressed in Phase One include:

- Evaluations/Assessments-
  - Eligibility and those not qualifying or lost to the system.
- Family Cost Participation-
  - This is a long-term outcome.
- Private Insurance and Medicaid-
- Interagency Agreement-
  - A revision is underway with a master agreement being developed and the addition of specifics for the participating state agencies;
  - Assistance will be provided at the local level on the development of local agreements; and
  - A question to be addressed is how to encourage keeping local dollars in the system.
- Service Delivery Model-
  - Resurface of supports and services;
  - Looking at the impact of the new Part C regulations;
  - Develop and initiate broad based training linked to Part C credentialing to include
    - Eligibility determination; assessment; IFSP outcomes development; and the primary provider model; and
  - Determining what type of service coordination system is right for Virginia.
- Finance and Data-
  - Update the cost study including an abbreviated rate survey; and
  - Work on the local contract.
- Medicaid-
  - Continue the collaborative and successful work facilitated by Tammy Whitlock;
  - Possible inclusion of associated cost as part of the reimbursement rate;
  - Moving Part C under EPSDT; and
  - Work on strengthening MCO contracts related to Part C requirements.
- Evaluating ITOTS-
  - Developing outcomes; and
  - Establish a timeline of November 30, 2007.

Phase Two will involve the “how” of implementation and will include the following:

- Training in the process needed-
- Training in the service delivery model of service coordination-
- Implement the approved plan of Medicaid-
- Finance and data.

Discussion occurred as to the role that VICC members could play in the process. The following were noted as areas where assistance could be provided:

- Supporters are needed related to changes;
- Addressing provider capacity;

- Leadership related to supports and services;
- Provider qualifications;
- Training; and
- Support for increasing the infrastructure.

It was also noted that VICC members are needed to participate as stakeholders on all existing committees.

The Solutions Report and related committee information can be found on the website at [www.infantva.org](http://www.infantva.org).

The December 12, 2007 VICC meeting will serve as the VICC Retreat. Details of a date for a regular VICC meeting/conference call will be forthcoming.

The following items are to be included on the regular meeting agenda:

- The Annual Performance Report (APR);
- Child Find and Transition Update;
- Joint Commission on Health Care’s Prematurity Report;
- Assuring Better Child Health and Development (ABCD) Academy Update; and
- EI Conference Update.

The meeting was adjourned.

### **Attendance**

#### **VICC Members**

Frederick Beaman  
 Delly Greenberg  
 Virginia Heuple  
 Mary Lou Hutton  
 Rev. Brenda Laws  
 Sheila Nelson  
 Sharon Osbourne  
 Curtis Smith  
 Yolanda Tennyson  
 Dr. Eva Thorpe  
 Delegate Shannon Valentine  
 Tammy Whitlock  
 Sandra Binns Whitaker

#### **Local System Managers**

Nancy Bailey, LENOWISCO  
 Kim Bebeau, Dickenson  
 Lynne Blythe, Rappahannock Rapidan  
 Deana Buck, Richmond  
 Sandra Church, Roanoke Valley

#### **Part C Staff**

Beverly Crouse  
 Mary Ann Discenza  
 Karen Durst  
 Bonnie Grifa  
 Cori Hill  
 David Mills  
 Beth Tolley  
 Mary Ann White

#### **Family Members**

Heidi Faustini  
 Debra Holloway

Carol Cousins, PD 14  
Elizabeth Fletcher, Henrico  
Carol Granger, Chesterfield  
Rhonda Lusk, Highlands  
Kathy Pierson, New River Valley  
Allan Phillips, Fairfax  
Jane Prince, Eastern Shore  
Susan Shaw, Blue Ridge, Region Ten  
Alison Standring, Rappahannock  
Kim Taylor, Mt. Rogers  
Karen Walker, Hanover  
Wanda Walker, Southside  
Sherry Winn, Piedmont  
Lynn Wolfe, Colonial

**Others**

Jim Gillespie, Rappahannock CSB  
Carmen Jefferson, GMU  
Ms. Marcos-Rubio, Fairfax  
Carol Taylor, GMU