VIRGINIA INTERAGENCY COORDINATING COUNCIL

Information for New Members





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WELCOME MESSAGE

Hello!

Thank you for your interest in the Virginia Interagency Coordinating Council! This brochure has been developed in conjunction with The Arc of Virginia to provide an overview of the Council, its' structure and function. It answers the Who, What, Why, and How so that others may be informed and perhaps inspired to serve!

We strive for a membership that is diverse and reflects the many faces of Early Intervention including State Agency members, Local System Managers, Members of Academia, Providers and Parents. We also welcome those around the Commonwealth who provide support services either directly to families or to those working for Part C. Part C is the provision of IDEA, Individuals with Disabilities Education Act, which regulates services to infants and toddlers, birth to three years of age. In Virginia, the Part C program is housed in the Department of Behavioral Health and Developmental Services. Our Federal mandate comes from the Office of Special Education Programs at the US Dept. of Education. We also work closely with the Virginia Department of Education which runs our sister program, Part B of IDEA.

Our goal is to provide a forum where anyone who has an interest in supporting infants and their families has a voice. Whether you simply have a topic to share during Public Comment or wish to serve as a member, we welcome your participation and appreciate your time!

Warm Regards,

Kelly Walsh Hill, PT VICC Chair



What is the Virginia Interagency Coordinating Council?

The Virginia Interagency Coordinating Council (VICC) is a state council that fulfills a requirement of the *Code of Virginia, Section 2.2-2664 and the Individuals with Disabilities Education Improvement Act (IDEA) 2004. The duties of the VICC shall include advising and assisting the lead agency in the following:*

- 1. Performing its responsibilities for the early intervention system;
- 2. Identifying sources of fiscal and other support for early intervention services, recommending financial responsibility arrangements among agencies, and promoting interagency agreements;
- 3. Developing strategies to encourage full participation, coordination, and cooperation of all appropriate agencies;
- 4. Collaborating with the State Educational Agency regarding the transition of toddlers with disabilities to preschool and other appropriate services;
- 5. Resolving interagency disputes;
- 6. Gathering information about problems that impede timely and effective service delivery and taking steps to ensure that any identified policy problems are resolved;
- 7. Preparing federal grant applications; and
- 8. Certifying an annual report to the Governor and the U.S. Secretary of Education on the status of early intervention services within the Commonwealth, in accordance with an Office of Management and Budget directive.

MISSION

"To advise and assist the state early intervention system in performing its responsibilities and fiscal management while promoting interagency cooperation and coordination in order to facilitate timely and effective supports and services."

VISION

"All infants and toddlers with developmental delays or disabilities and their families receive timely and necessary supports and services in order to reach their maximum potential."

When does the VICC meet?

Meetings take place 9:30 am – 3:00 pm, on the 2nd Wednesday of March, June, September, and December at The Arc of Virginia offices located at 2147 Staples Mill Road in Richmond, Virginia.

What agencies are represented in the VICC?

Virginia State Legislature

State Agencies

- Virginia Department of Education
- o Department for the Blind and Vision Impaired
- Department of Medical Assistance Services
- Virginia Department of Health
- o Department of the Deaf and Hard of Hearing
- Virginia Department of Social Services
- Department of Behavioral Health and Developmental Services
- o Project HOPE
- Bureau of Insurance, State Corporation Commission

Providers (Public and Private)

- o Early Childhood Mental Health Virginia
- Head Start
- o Family Preservation, Inc.
- The Loop Center for Social and Emotional Development
- o Blue Ridge Care Connection for Children
- Infant & Toddler Connection of Williamsburg, James City, York, Poquoson

Local Systems Manager

o Infant & Toddler Connection of Fairfax-Falls Church

Parent Representatives

- o Central Virginia
- o Northern Virginia
- o Southwest Virginia
- Tidewater Region



BYLAWS

State Interagency Coordinating Council

Article I - Name

The name of this body is the Virginia Interagency Coordinating Council for Early Intervention Services, hereinafter to be referred to as the VICC.

Article II - Legal Base

Section 1: Legal Base

The *Individuals with Disabilities Education Improvement Act (IDEA)*, Part C Individuals with Disabilities Education Act Amendments of 2004, provides the legal base for the composition and duties of the VICC.

Section 2: Purpose

As noted in the *Code of Virginia, Section 2.2-2664 and the Individuals with Disabilities Education Improvement Act (IDEA)* 2004 the duties of the VICC shall include advising and assisting the lead agency in the following:

- 1. Performing its responsibilities for the early intervention system;
- 2. Identifying sources of fiscal and other support for early intervention services, recommending financial responsibility arrangements among agencies, and promoting interagency agreements;
- 3. Developing strategies to encourage full participation, coordination, and cooperation of all appropriate agencies;
- 4. Collaborating with the State Educational Agency regarding the transition of toddlers with disabilities to preschool and other appropriate services;
- 5. Resolving interagency disputes;
- 6. Gathering information about problems that impede timely and effective service delivery and taking steps to ensure that any identified policy problems are resolved;
- 7. Preparing federal grant applications; and
- 8. Certifying an annual report to the Governor and the U.S. Secretary of Education on the status of early intervention services within the Commonwealth, in accordance with an Office of Management and Budget directive.

Article III - Membership

Section 1: VICC Composition

In accordance with the *Individuals with Disabilities Education Improvement Act Amendments of 2004,* Part C, Section 641, the VICC must be composed as follows:

- 1. At least 20 percent of the members must be parents, including minority parents, of infants or toddlers with disabilities or children with disabilities aged 12 or younger, who represent the broad geographic cultural diversity of the Commonwealth, with knowledge of, or experience with, programs for infants and toddlers with disabilities;
- 2. At least one member must be a parent of an infant or toddler with a disability or a child with a disability aged six or younger;
- 3. At least 20 percent of the members must be public or private providers of early intervention services, who represent the broad geographic cultural diversity of the Commonwealth, (with at least one being a local council coordinator);
- 4. At least one member must be from the Virginia legislature;
- 5. At least one member must be involved in personnel preparation;
- 6. At least one member must be from a Head Start Agency or program in the Commonwealth; and
- 7. At least one member must -

Be from each of the State agencies involved in the provision of, or payment for, early intervention services to infants and toddlers with disabilities and their families and who shall have sufficient authority to engage in policy planning and implementation on behalf of such agencies including:

- Bureau of Insurance of the State Corporation Commission
- Virginia Office for Protection and Advocacy
- Virginia Department for the Deaf and Hard of Hearing
- Virginia Department for the Blind and Vision Impaired
- Virginia Department of Education (would have one representative knowledgeable to address the area of Preschool and one representative knowledgeable to address Education Of Homeless Children And Youth)
- Virginia Department of Health
- Virginia Department of Medical Assistance Services
- Virginia Department of Behavioral Health and Developmental Services
- Virginia Department of Social Services (would have at least one representative knowledgeable to address the areas of Child Care and State Foster Care

Additional appointments may be made, as appropriate.

Section 2: Terms of Office

The Governor shall appoint non-state agency members of the VICC for three-year terms. Non-state agency members may be reappointed for one additional three-year term. State agency members are designated by their agency heads.

If a non-state agency VICC member resigns, a replacement will be appointed by the Governor to complete that term. The replacement may subsequently be reappointed for two three-year terms.

If a non-state agency member's three-year term expires and a replacement has not been appointed by the Governor, that member may continue to serve until a replacement is appointed by the Governor. Such extension shall not exceed 12 months.

Section 3: Attendance and Participation

Members are expected to attend VICC meetings and participate actively on standing and special committees. If there is a pattern of non attendance the VICC chair will make telephone contact to the member.

Article IV - Organization

Section 1: Officers

The Governor shall require the VICC to so designate a member of the VICC to serve as the Chair. Any member of the VICC who is a representative of the Lead agency may not serve as the Chair of the VICC. Officers of the VICC shall consist of Chair, Vice-Chair, and Secretary.

Section 2: Terms of Office

The Chair, Vice-Chair, and Secretary shall be elected. Elected officers shall have a two-year term of office and may serve any number of consecutive terms.

Section 3: Election

Nominations for the positions of Chair, Vice-Chair and Secretary shall be presented to the VICC in writing one month prior to the last meeting of the Federal Fiscal Year (October 1 - September 30) on an odd year cycle for election at that meeting. An affirmative vote of a majority of the VICC shall be required for election of officers. Officers begin their term at the beginning of October, following their election. Vacancies occurring in unexpired terms of elected officers shall be filled through a by-election process for the remainder of that term.

Section 4: Duties of Officers

Chair. The Chair shall preside at all meetings of the VICC and shall be an ex-officio member of all committees. The Chair shall be the official representative of the VICC, but may delegate this responsibility when appropriate and necessary. The Chair shall work closely with Lead Agency staff and shall perform all other duties incident to the Office of the Chair.

Vice-Chair. In the absence of the Chair, the Vice-Chair shall perform the duties of the Chair, and when so acting shall have all the powers of and be subject to all restrictions upon the Chair.

Secretary. In the absence of the Chair and the Vice-Chair, the Secretary shall perform the duties of the Chair, and when so acting shall have all the powers of and be subject to all restrictions upon the Chair. During a meeting of the VICC, the work of the Secretary is to function as the Parliamentarian, limited to giving advice to the Chair and, when requested, to any other member. It is also the duty of the Secretary to call the attention of the Chair to any error in the proceedings that may affect the substantive rights of any member or may otherwise do harm. After the Secretary has expressed an opinion on a point, the Chair has the duty to make the final ruling.

Section 5: Steering Committee

- **A. Composition:** The Steering Committee shall consist of the VICC Chair, VICC Vice-Chair, VICC Secretary, Parent Representative, Chairs of each Standing and/or Special Committee, EIIMT Representative, and Part C Staff Representative.
- **B. Duties:** The Steering Committee shall conduct all business matters pertaining to the purposes and administration of the VICC and shall keep the VICC fully informed of such matters. The Steering Committee shall set the agenda for all VICC meetings. The Steering Committee shall also write letters and position statements on behalf of the VICC.
- **C. Meetings and Quorum:** The Chair shall present to the VICC a schedule of at least quarterly Steering Committee meetings. The steering committee shall meet prior to all VICC meetings for the purpose of setting the agenda as outlined above. Other meetings may be called by the Chair for emergency matters. Any four (4) members of the Steering Committee may petition for a meeting to the Chair. Minutes of the Steering Committee meetings will be kept. The quorum required for a Steering Committee meeting shall be 40% of its voting members

Article V - Conduct of the VICC Meetings

Section 1: Meetings

Regular meetings of the VICC will be held at least quarterly. The Chair, in consultation with the Steering Committee, may call additional and/or special meetings. All meetings will be open to the public and will be announced in the *Virginia Register*.

Section 2: Quorum

In order to establish a quorum for VICC meetings, 40% of the voting members must be present.

Section 3: Voting

Each of the members of the VICC shall have one (1) vote. An affirmative vote of a majority of the VICC members present is required for the VICC to take any official action.

Section 4: Conflict of Interest

"No member of the VICC shall cast a vote on any matter which would provide direct financial benefit to that member or otherwise give the appearance of a conflict of interest under State law." (*Individuals with Disabilities Education Improvement Act Amendments of 2004, Section* 641). "No member of the VICC may submit a funding request to the VICC or otherwise participate in a transaction before the VICC in violation of the State and Local Government Conflict of Interest Act (*Code of Virginia*, Section 2.2-3100 et.seq.)."

Section 5: Reimbursement of Expenses

All reimbursement shall be paid out of funds under Part C of the *Individuals with Disabilities Education Improvement Act Amendments of 2004*. All such reimbursement shall be subject to the limitations of funds available to the VICC and shall be governed by the Virginia State Travel Regulations.

Article VI - Reports

The VICC shall certify an annual performance report to the Governor and the U.S. Secretary of Education on the status of early intervention services within the Commonwealth, in accordance with an Office of Management and Budget directive, including agreement or disagreement with the State Annual Performance Report, and appended additional comments if desired.

Article VII - Committees

Section 1: Committees of the VICC

A committee is a body of three or more persons, appointed by the Chair (except where otherwise specified), to give more careful consideration to a task or matter before the VICC than is possible by the VICC as a whole. A committee has the responsibility of recommending that a specific action be taken by the full VICC relative to the tasks or matters referred to Committee.

The VICC has established three types of committees: the Steering Committee, Standing, and Special Committees. The responsibilities and membership of the Steering Committee are described in Article IV; Section 5. The responsibilities of the Standing and Special Committees are described in Sections 2 and 3.

Standing and Special Committee membership must include at least one member of the VICC but is not limited to members of the VICC and may include other interested citizens. Membership should be as broad as possible. At the last meeting of each Federal Fiscal Year the VICC will review the current standing and special committee structure and scope of work and will either reaffirm the committee, dissolve the committee or establish a new committee as needed.

Section 2: Standing Committees

The terms of the Chairs of the Standing Committees shall be one year; the Chairs may serve consecutive terms. Members of standing committees annually elect the Chairs of their respective committee. Standing Committees of the VICC shall be proposed by the officers and established by a vote of the full VICC.

Section 3: Special Committees

The VICC Chair, with the Steering Committee or full VICC approval, may establish special committees as deemed appropriate and necessary.

Article VIII - Amendments

These bylaws, with the exception of requirements established under federal or state law, may be amended, repealed, or restructured during any regular or special VICC meeting by a minimum of a quorum providing that written notice of proposed amendments has been distributed to all VICC members ten (10) days prior to the VICC meeting.

Article IX

The Rules contained in the current edition of *Robert's Rules of Order Newly Revised* shall govern the VICC in all cases to which they are applicable and in which they are not inconsistent with these bylaws and any special rules of order that the VICC may adopt.



03:00 PM Adjourn

SAMPLE AGENDA

State Interagency Coordinating Council

09:30 AM Call to Order and Roll Call Kelly Hill/Karen Durst 09:35 AM Approval of VICC Minutes Kelly Hill 09:40 AM Membership **Agency Reports** The Arc of Virginia, New Path Program (Jamie Liban) Department for the Blind and Vision Impaired (Lisa Auwarter) Department for the Deaf & Hard of Hearing (Leslie Hutcheson Prince) Department of Behavioral Health & Developmental Services (Heather Norton) Department of Education (Dr. Dawn Hendrick) Department of Education-Project HOPE-Virginia (Dr. Patricia Popp) Department of Health (Dr. Bethany Geldmaker) Department of Medical Assistance Services (Joanne Boise/Ashley Harrell) Department of Social Services (Aleta Lawson) Early Childhood Mental Health Virginia (Bonnie Grifa) State Corporation Commission, Bureau of Insurance (James Young) 10:20 AM Part C Update Catherine Hancock 10:30 AM Presentation 11:00 AM Public Comment & VICC Discussion of Public Comment 11:10 AM Presentation 11:20 AM Professional Development Deana Buck/Cori Hill 11:50 AM Committee Updates 12:15 PM Lunch 01:00 PM VICC Members' Open Forum Members 01:45 PM VICC Business Kelly Hill Mentoring New Members New Member Packet Vacancies Other Business 02:30 PM Action Items Kelly Hill 02:45 PM Planning for June Meeting Agenda Kelly Hill

Kelly Hill



Membership and Committees

Composition of the VICC:

The composition of the VICC is outlined in the By-Laws (see page 7). A roster for the VICC is available at http://infantva.org/documents/wkg-viccMembershipList.pdf and for your convenience, is also listed below.

Membership Category: Personnel Prep

 Kelly Hill
 Phone:
 (540) 272-6306

 Physical Therapist
 Fax:
 (540) 351-0386

Kelly Walsh-Hill, PT E-Mail: Kellyh63@comcast.net

7444 Ashley Drive

Warrenton, Virginia 20187

Catherine CookPhone:(540) 568-7051Early Childhood Education CoordinatorFax:(540) 568-6726Virginia Department of Education, T/TACE-Mail:cookch@jmu.edu

1250 Chatham Road

Waynesboro, Virginia 22980

Membership Category: Legislator

Delegate Daun Hester Phone: (757) 619-7736

330 West Brambleton Avenue, #1111 Fax:

Norfolk, Virginia 23510 E-Mail: <u>Daunhester89@gmail.com</u>

Membership Category: Providers

Ms. Bonnie Grifa Phone: (757) 410-2738

State Early Childhood Mental Health Coordinator Fax:

458 Supplejack Court E-Mail: bgrifa@vcu.edu

Chesapeake, Virginia 23320

Wyvonnie Harsley Phone: (703) 861-8917

Head Start Fax:

9101 Stone Garden Drive E-Mail: wharsley@gmail.com

Lorton, Virginia 22079

Dr. Kristen Jamison

The Loop Center for Social and Emotional **Phone:** (434) 282-4088

Development Fax:

4543 Garth Road E-Mail: Kristen@theloopcenter.com

Charlottesville, Virginia

Jeannie OdachowskiPhone(276) 732-2883Program DirectorFax:(276) 632-0923

Family Preservation, Inc. E-Mail: jodachowski@fpscorp.com

1 Starling Avenue

Martinsville, VA 24112

Lynn WolfePhone(757) 566-3300Infant and Toddler Connection of WilliamsburgFax:(757) 566-8977150 Point O Woods Rd.E-Mail:lynnw@cdr.org

Norge, VA 23127

 Ms. Sandra Woodward
 Phone:
 (434) 924-0222

 Program Director
 Fax:
 (434) 924-0390

Blue Ridge Care Connection for Children E-Mail: spw5w@hscmail.mcc.virginia.edu

PO Box 800421

Charlottesville, Virginia 22901

Membership Category: Local System Manager

Allan Phillips Phone: (703) 246-7170 Infant & Toddler Connection of Fax: (703) 246-7307

Fairfax-Falls Church E-Mail: allan.phillips@fairfaxcounty.gov

3750 Old Lee Highway Fairfax, Virginia 22030

Membership Category: Parent

Ms. Catherine Rey Phone: (804) 514-6317

E-Mail: cgrierey@gmail.com

Kathleen (Kate) Mary McCauley Work Phone: (804) 864-4807

Work Fax: (804) 421-6251

E-Mail: kmccauley@mrcpclaw.com

Ms. Kerry White Phone: (703) 200-6731

E-Mail: kerrywhitemim@gmail.com

Kristine Caalim Phone: (757) 372-1027

E-Mail: kriscaalim85@gmail.com

Joy Spencer Phone: (757) 596-1459

E-Mail: joyspencer@cox.net

Membership Category: Special Appointee

Angela Leonard Phone: (540) 293-0990

Executive Director Fax:

Blue Ridge Autism and Achievement Center E-Mail: <u>Angie.Leonard@SVHServices.org</u>

404 Longwood Lane

Blue Ridge, Virginia 24064

Membership Category: Agency Representative

Ms. Lisa Autwarter Phone: (540) 332-7716

Education Coordinator

Dept. for the Blind & Vision Impaired Fax: (540) 332-7733

1076 Jefferson Highway E-Mail: <u>Lisa.Autwater@DBVI.virginia.gov</u>

Staunton, VA 24401

(Caren Phipps) <u>Caren.Phipps@DBVI.virginia.gov</u>

Dr. Bethany Geldmaker

109 Governor's Street E-Mail: bethany.geldmaker@vdh.virginia.gov

Richmond, VA 23219

Ms. Adrienne Fegans Phone: (804) 786-4112

Dept. of Medical Assistance Services **E-Mail:** adrienne.fegans@dmas.virginia.gov

600 East Broad Street Richmond, VA 23219

Dr. Dawn Hendricks Phone: (804) 225-2675

VA Dept. of Education E-Mail: dawn.hendricks@doe.virginia.gov

101 North 14th Street-James Monroe Building

Richmond, VA 23219

Ms. Leslie Hutcheson Prince Phone: (804) 662-9703

Dept. for the Deaf & Hard of Hearing Fax: (804) 662-9718

1602 Rolling Hills Dr., Suite 203 E-Mail: leslie.prince@vddhh.virginia.gov

Richmond, VA 23229-5012

 Ms. Aleta Lawson
 Phone:
 (804) 726-7468

 VA Dept. of Social Services
 Fax:
 (804) 726-7655

801 East Main Street E-Mail: aleta.lawson@dss.virginia.gov

Richmond, VA 23219

Ms. Heather Norton Phone: (804) 786-5850

DBHDS Fax:

1220 Bank Street, 9th Floor E-Mail: <u>heather.norton@dbhds.virginia.gov</u>

Richmond, VA 23219

Dr. Patricia PoppPhone:(757) 221-7776VA Dept. of EducationFax:(757) 221-5300Project HOPE-VirginiaE-Mail:pxpopp@wm.edu

The College of William and Mary

P.O. Box 8795

Williamsburg, Virginia 23187

Mr. James Young Phone: (804) 371-9612

Bureau of Insurance Fax:

State Corporation Commission E-Mail: james.young@scc.virginia.gov

1300 East Main Street Richmond, VA 23219

Part C Family Representative

Jamie LibanPhone:(804) 649-8481New Path Program, The Arc of VirginiaFax:(804) 649-3585

2147 Staples Mill Road E-Mail: jliban@thearcofva.org

Richmond, VA 23230

Part C Staff

Name	Title	Email	Phone
Anne Brager	Part C Monitoring Consultant	anne.brager@dbhds.virginia.gov	(434) 549-9500
Richard Corbett	Part C Monitoring Consultant	richard.corbett@dbhds.virginia.gov	(804) 786-9682
Karen Durst	Part C Technical Assistance Consultant	karen.durst@dbhds.virginia.gov	(804) 786-9844
Catherine Hancock	Part C Administrator	catherine.hancock@dbhds.virginia.gov	(804) 371-6592
Cori Hill	Part C Training Consultant	cfhill@vcu.edu	(540) 943-6776
David Mills	Part C Data Manager	david.mills@dbhds.virginia.gov	(804) 371-6593
Sarah Moore	Part C Monitoring Consultant	s.moore@dbhds.virginia.gov	(804) 371-5208
Kyla Patterson	Consultant	k.patterson@dbhds.virginia.gov	(860) 430-1160
Irene Scott	Administrative & Office Specialist III	irene.scott@dbhds.virginia.gov	(804) 786-4868
Terri Strange-Boston	Part C Technical Assistance Consultant	terri.strange-boston@dbhds.virginia.gov	(804) 786-0992
Beth Tolley	Part C Monitoring Team Leader	beth.tolley@dbhds.virginia.gov	(804) 371-6595
LaKeisha White	Office Services Specialist	keisha.white@dbhds.virginia.gov	(804) 786-3710
Telisha Woodfin	Part C Monitoring Consultant	telisha.woodfin@dbhds.virginia.gov	(804) 786-1522

Current Committees of the VICC

There are currently two standing committees of the VICC, the Steering Committee and the Nominating Committee. The Chair may choose to appoint Ad Hoc Committees to tackle specific issues, such as insurance or data.

Steering Committee:

VICC Chair
VICC Vice-Chair
VICC Secretary
Parent Representative
Chairs of each Standing and/or Special Committee
Part C Staff Representative

Nominating Committee: Allan Philips, Jeannie Odachowski, and Angela Leonard



MEMBER AGENCY DESCRIPTIONS

Virginia State Legislature

The Virginia General Assembly has two chambers—the Senate, composed of 40 members who serve 4-year terms, and the House, composed of 100 members who serve 2-year terms. There are many administrative agencies and commissions that support the legislative process whose members can include appointed citizens who serve alongside legislators. Those that support early childhood issues can include:

- The Joint Legislative Audit and Review Commission (JLARC)
- The Commission on Youth
- The Disability Commission
- The Joint Commission on Health Care

State Agencies

Virginia Department of Education – Office of Special Education Instructional Services

The mission of Virginia's public education system is to educate students in the fundamental knowledge and academic subjects that they need to become capable, responsible, and self-reliant citizens. Therefore, the mission of the Virginia Board of Education and the superintendent of public instruction, in cooperation with local school boards, is to increase student learning and academic achievement.

Department for the Blind and Vision Impaired

The mission of the Department for the Blind and Vision Impaired (DBVI) is to provide services and resources which empower individuals who are blind, vision impaired or deaf/blind to achieve their desired levels of employment, education, and personal independence. DBVI envisions a world in which blind, vision impaired and deaf/blind people can access all that society has to offer and can, in turn, contribute to the greater community. We believe this is achievable.

Department of Medical Assistance Services

DMAS is the agency that administers Medicaid and the State Children's Health Insurance Program (CHIP) in Virginia. The CHIP program in Virginia is called Family Access to Medical Insurance Security (FAMIS). The mission at DMAS is to provide a system of high quality and cost effective health care services to qualifying Virginians and their families.

Virginia Department of Health

The Mission of the Virginia Department of Health is to promote and protect the health of all Virginians. The agency's vision statement is "Healthy People in Healthy Communities." Programs of The Virginia Department of Health cover a wide scope of public health issues including: Drought Monitoring, Source Water Assessment and Protection, Emergency Preparedness, Environmental Health, Epidemiological surveillance and investigation, Immunization, Disease prevention, Child and Family Health, and Community Nutrition.

Department of the Deaf and Hard of Hearing

The Virginia Department for the Deaf and Hard of Hearing (VDDHH) works to reduce the communication barriers between persons who are deaf or hard of hearing and those who are hearing, including family members, service providers, and the general public.

Virginia Department of Social Services

The Virginia Department of Social Services (VDSS) is a state supervised and locally administered social services system. Providing oversight and guidance to 120 local offices across the state, VDSS delivers a wide variety of services and benefits to over 1.6 million Virginians each year. VDSS' programs are designed to help Virginia's most vulnerable citizens find permanent solutions to life's many challenges. The Department is responsible for administering a variety of programs, including Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Medicaid, Adoption, Child Care Assistance, Refugee Resettlement Services, and Child and Adult Protective Services. Our goal is to promote the well-being of our citizens through the delivery of essential services and benefits to ensure families are strengthened, and individuals achieve their highest level of self-sufficiency.

<u>Department of Behavioral Health and Developmental Services</u>

Virginia's public <u>mental health</u>, <u>intellectual disability</u> and <u>substance abuse services</u> system is comprised of 16 <u>state</u> <u>facilities</u> and 40 locally-run <u>community services boards</u>. The CSBs and facilities serve children and adults who have or who are at risk of mental illness, serious emotional disturbance, intellectual disabilities, or substance abuse disorders.

Project HOPE

Project Hope-Virginia is Virginia's Program for the Education of Homeless Children and Youth. The College of William and Mary administers the program for the Virginia Department of Education. Project HOPE - Virginia ensures the enrollment, attendance, and the success of homeless children and youth in school through public awareness efforts across the commonwealth and subgrants to local school divisions. Local Education Agencies (LEA) develop customized programs to meet the needs of homeless children and youth in their area. Project HOPE - Virginia funds activities throughout the school year, including early childhood education, mentoring, tutoring, parent education, summer enrichment programs, and domestic violence prevention programs. In addition, emergency services, referrals for health services, transportation, school supplies, and costs related to obtaining school records may be provided through the local Homeless Education Program.

Bureau of Insurance, State Corporation Commission

Our regulatory mission is to ensure that citizens of the Commonwealth are provided with access to adequate and reliable insurance protection; that the insurance companies selling policies are financially sound to support payment of claims; that the agents selling company policies are qualified and conduct their business according to statutory and regulatory requirements, as well as acceptable standards of conduct; and that the insurance policies of high quality, are understandable and are fairly priced.

Providers (Public and Private)

Early Childhood Mental Health

The vision for Early Childhood Mental Health Virginia is to develop a comprehensive system of care for infant and child mental health serving children birth through age eight and their families/caregivers, which: engages parents as partners; provides high quality supports and services to families; Is grounded in developmental knowledge; includes family and child centered practices and policy & cultural and linguistic competence; is infused into natural settings and services & relationship based; utilizes evidence-based practices; Is linked to the substance abuse, domestic violence and court systems; and assures comprehensive mental health services for infants and toddlers in foster care and to the highest risk/most vulnerable infants and young children & their families in Virginia.

Head Start

Head Start is a federally-funded program that works directly with localities. The Virginia Head Start State Collaboration Project oversees the program and represents its interests on the state level. The Head Start Collaboration Grant was

created as a partnership at the state level to support the development of multi-agency and public private partnerships. These partnerships help build early childhood systems, enhance access to comprehensive services for low income children and involve Head Start in state policies affecting low-income families.

The Loop Center for Social and Emotional Development

The Loop Center for Social & Emotional Development, LLC is a place for caregivers, teachers, and parents to connect, support, and learn developmentally appropriate strategies to help children lead emotionally intelligent lives.

Family Preservation, Inc.

Family Preservation Services, Inc. (FPS) mission is to ensure the provision of accessible, effective, high quality community-based counseling and social services as an alternative to traditional institutional care. FPS is dedicated to ensuring that all clients have access to professional community-based care, proven treatment methods and comprehensive service planning. FPS offers a wide variety of programs across the country, and all share a primary commitment to provide care that builds upon clients' strengths and responds to their concerns.

Blue Ridge Care Connection for Children

Care Connection for Children is a statewide network of centers of excellence for children with special health care needs (CSHCN) that provide leadership in the enhancement of specialty medical services; care coordination; medical insurance benefits evaluation and coordination; management of the CSHCN Pool of Funds; information and referral to CSHCN resources; family-to-family support; and training and consultation with community providers on CSHCN issues.

Infant & Toddler Connection of Virginia

The Infant & Toddler Connection of Virginia provides early intervention supports and services to infants and toddlers from birth through age two who are not developing as expected or who have a medical condition that can delay normal development. Early intervention supports and services focus on increasing the child's participation in family and community activities that are important to the family. In addition, supports and services focus on helping parents and other caregivers know how to find ways to help the child learn during everyday activities. These supports and services are available for all eligible children and their families regardless of the family's ability to pay.

Part C Family Support

New Path, a program of The Arc of Virginia

When parents first discover their child is developing differently than expected, it can be overwhelming. Parents need information and support. That's what we're here to provide. New Path will help parents understand the jargon, connect you with other parents, make sure you know what your rights are, and point you to programs and resources.



CURRENT ACTIVITIES

and recent accomplishments

Private Insurance and Tricare Survey, FY 2014

In 2012, after learning that Local Systems were experiencing difficulty in billing (and receiving reimbursement from) private insurance plans, Part C Staff made it a training priority to help local systems to get registered with private insurance networks, medical billing/coding/documentation, and developing/tracking budgets. A follow up survey was sent in April of 2014 to determine effectiveness and future needs, with follow ups being sent in July. The goal of the survey is to gather information that can help clarify the obvious barriers to fiscal accountability and further training needs.

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Page 1 Page 2

State Systemic Improvement Plan (SSIP)

The VICC participated in the development of Virginia's State Systemic Improvement Plan (SSIP) for early intervention and is now involved in its implementation. All states are required by the U.S. Department of Education to develop and implement an SSIP in order to improve results for children and families. Based on a review of Virginia's child and family outcome data, the state-identified measurable result Virginia will improve through the SSIP is increasing the percent of infants and toddlers with IFSPs (exiting early intervention at age level) who demonstrate improved use of appropriate behaviors to meet their needs.

With input from the VICC and other stakeholders, five broad improvement strategies were selected in order to meet our state-identified measurable result:

- 1. Use <u>implementation science</u> in identifying, developing, and implementing professional development and technical assistance;
- Identify and/or develop and implement the professional development resources and mechanisms for ongoing support necessary to ensure early intervention service providers, including service coordinators, consistently conduct initial and outgoing <u>functional assessment</u> that leads to consistent and accurate determination of entry/exit ratings in the area of children using appropriate behaviors to meet their needs;
- 3. Identify and/or develop and implement the professional development resources and mechanisms for ongoing support necessary to ensure early intervention service providers, including service coordinators, consistently use coaching and natural learning environment practices when planning and delivering early intervention systems;
- 4. Increase <u>local system capacity</u> to determine the extent and fidelity of provider use of evidence-based practices, including the ability to identify and address fiscal and other local system issues that support or hinder full implementation of these practices and the ability to assess the impact of evidence-based practices on results for children and families; and
- 5. Enhance the capacity of the statewide early intervention data system (ITOTS) to efficiently collect and report comprehensive data on child indicator results that helps in evaluation and improvement planning at the state and local levels.

To review Virginia's SSIP and find other background information, see the SSIP section of the Infant & Toddler Connection of Virginia website at http://www.infantva.org/Sup-SSIP.htm.



ACRONYM GLOSSARY

AAIDD American Association on Intellectual and Developmental Disabilities

ABA Applied Behavioral Analysis
ADA Americans with Disabilities Act
ASD Autism Spectrum Disorders
ASL American Sign Language
AT Assistive Technology

BCABA Board Certified Assistant Behavior Analyst

BCBA Board Certified Behavior Analyst
BIP Behavior Intervention Plan

BOI Bureau of Insurance

CEC Council for Exceptional Children
CIM Community Integration Manager

CM Case Manager

CMS Centers for Medicare and Medicaid Services

CPS Child Protective Services

CRC Community Resources Consultant

CSA Children's Services Act (formerly Comprehensive Services Act)

CSB Community Services Board

DBHDS Department of Behavioral Health and Developmental Services

DD Developmental Disability

DEC Division of Early Childhood (of the CEC)

DMAS Virginia Department of Medical Assistance Services

DOE Department of Education
DOJ U.S. Department of Justice
DSP Direct Support Professional
ECSE Early Childhood Special Education

EDCD Elderly and Disabled with Consumer Direction (Waiver)

EI Early Intervention

EIIMT Early Intervention Interagency Management Team
EPSDT Early Periodic Screening and Diagnosis and Treatment

FAPE Free Appropriate Public EducationFBA Functional Behavior AssessmentHCBS Home and Community-Based Services

HIPAA Health Insurance Portability and Accountability Act

HMO Health Maintenance OrganizationHSRI Human Services Research Institute

ID Intellectual Disability

IDEA Individuals with Disabilities Education Act

IEP Individualized Education Program

IFSP Individual Family Service Plan (EI) or Individual and Family Support Program (DBHDS)

ISP Individual Service Plan

LICC Local Interagency Coordinating Council

LLA Local Lead Agency

LRE Least Restrictive Environment
LSM Local System Manager (EI)
NICU Neonatal Intensive Care Unit

OSEP Office of Special Education Programs (in OSERS)

OSERS Office of Special Education and Rehabilitative Services (ED)

OT Occupational Therapy or Occupational Therapist

Part C (of IDEA) Early Intervention for Infants and Toddlers

PCP Person-Centered Plan(ning)
PICU Pediatric Intensive Care Unit
PMM Post Move Monitoring

PT Physical Therapy or Physical Therapist
QIC Quality Improvement Center (Head Start)

REACH Regional Education Assessment Crisis Services Habilitation

RFP Request for proposals
RST Regional Support Team

SEAC Special Education Advisory Committee

SIS Supports Intensity Scale
SLP Speech-language pathologist

SPED or SE Special Education

SSA Social Security Administration

SSDI Social Security Disability Insurance program
SSEAC State Special Education Advisory Committee

SSI Supplemental Security Income
SSIP State Systemic Improvement Plan

T/TAC Training and Technical Assistance Center (education)

TA Technical Assistance

TACIDD The Advisory Consortium on Intellectual and Developmental Disabilities

TANF Temporary Assistance to Needy Families (DHHS)
TRICARE Military Health Care System (formerly CHAMPUS)

VICC Virginia Interagency Coordinating Council
WDAC Waiver Design Advisory Committee
WIOA Workforce Innovation Opportunity Act
WSAC Waiver Slot Allocation Committee



Mission Statement and 7 Key Principles

Infant & Toddler Connection of Virginia

Mission:

Part C early intervention builds upon and provides supports and resources to assist family members and caregivers to enhance children's learning and development through everyday learning opportunities.

Purpose:

- 1. To enable young children to be active and successful participants during the early childhood years and in the future in a variety of settings –in their homes with their families; in child care, preschool or school programs; and in the community.
- 2. To enable families to provide care for their child and have the resources they need to participate in their own desired family and community activities.

Key Principles:

- 1. Infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts.
- 2. All families, with the necessary supports and resources, can enhance their children's learning and development.
- 3. The primary role of a service provider in early intervention is to work with and support family members and caregivers in children's lives.
- 4. The early intervention process, from initial contacts through transition, must be dynamic and individualized to reflect the child's and family members' preferences, learning styles and cultural beliefs.
- 5. IFSP outcomes must be functional and based on children's and families' needs and family-identified priorities.
- 6. The family's priorities, needs and interests are addressed most appropriately by a primary provider who represents and receives team and community support.
- 7. Interventions with young children and family members must be based on explicit principles, validated practices, best available research, and relevant laws and regulations.



Eligibility and Referral

Infant & Toddler Connection of Virginia

Making A Referral – Who & How?

The Infant & Toddler Connection of Virginia assists families of infants and toddlers birth to three with developmental delays and/or disabilities help their children learn and develop through everyday activities and routines so that they can participate fully in family and community activities. In order to take advantage of the services and supports available, families need to know about the system and how to access these resources! Please help to inform families of their options by becoming familiar with this guide.



Who is eligible for the Infant & Toddler Connection of Virginia?

- Infants and toddlers with 25% or greater delay in one or more developmental area(s): cognitive, adaptive, receptive or expressive language, social/emotional, fine motor, gross motor, vision, hearing development
- Infants and toddlers with atypical development as demonstrated by atypical/questionable sensory-motor responses, social-emotional development, or behaviors, or an impairment in social interaction and communication skills along with restricted and repetitive behaviors
- Infants and toddlers with a diagnosed physical or mental condition that has a high
 probability of resulting in developmental delay e.g., cerebral palsy, hearing or vision
 impairment, Down syndrome or other chromosomal abnormalities, central nervous
 system disorders, effects of toxic exposure, failure to thrive, etc.

What prompts a referral?

You or the parent of an infant or toddler has concerns or suspicions about the child's
development. Screening using a standardized developmental screening test (as recommended
by the American Academy of Pediatrics) will help identify children who may be in need
of early intervention services.

A diagnosed physical or mental condition is not required.

How are referrals made?

Contact the Infant & Toddler Connection "central point of entry" for the city or county
in which the family resides or call the state toll free number: 1-800-234-1448, or click on
"Central Directory" at www.infantva.org. You may make the referral for the family, or provide contact information to the family.

Referrals should be made as soon as the concern is identified.

What information should be provided to the early intervention system when referring a child?

- . Child's name, gender, and date of birth
- Name, address, and telephone number of the parent or legal guardian
- · Reason for referral (child has suspected or confirmed developmental delay or disability)
- Health and physical information, including vision and hearing, results of any neurological
 or developmental evaluations and any other information pertinent to the child's physical
 and developmental status and needs
- Your name and telephone number

What should I discuss with the family?

- All children referred receive an eligibility determination, with parent consent. Eligibility
 determination plus any needed developmental screenings and assessments are provided at
 no cost to the family.
- The family is not obligated to accept services
- If the child is found eligible for participation in the system, the family will guide the
 development of an Individualized Family Service Plan (IFSP) that identifies the services
 and supports needed to promote the child's development and support the family in their
 daily activities and routines with their child
- No child or family is denied services and supports identified on the IFSP because of their inability to pay

What else can I do to support the family?

- Volunteer to provide input into the development of each family's IFSP and to monitor its implementation
- Develop and maintain relationships with those providing early intervention services to the child and family

VIRGINIA INTERAGENCY COORDINATING COUNCIL New Member Information



What is Early Intervention?

How to Explain El Services

The Issue:

Local system managers requested a short statement that could be used to concisely and consistently explain to families, physicians and others what early intervention is, what it looks like and why we do it the way we do. Local system managers, early intervention providers, families and physicians provided input during development of the statement.

The Statement:

Early Intervention supports families of infants and toddlers, ages birth to three years, with developmental delays and disabilities. Children learn best with people they know and in the places they spend most of their time. Early Intervention professionals help families build on the things they do every day to support their child's learning and development in order to reach their goals for their child

Video:

In addition to the statement, a video, "What Is Early Intervention in Virginia" {http://youtu.be/y-M_P6HrZdA}, has been developed to help explain early intervention. The video includes wording from each sentence of the statement followed by additional comments, video and photos that further explain the concepts of what early intervention is, what it looks like and why it works. The statement and video have been posted on the VEIPD homepage (http://www.veipd.org/main/index.html) and "Early Intervention: What It Is and Why It Works" page(http://www.veipd.org/main/ei_what_why.html).

Ways to Use the Statement:

Since a short statement can never fully explain early intervention, if used, the statement must be used in the context of other explanatory information and resources.

With families ...

- Incorporate the statement with the other talking points in Chapter 3 of the Practice Manual when sharing basic information after referral
- Revisit the statement when covering the intake topics listed in Chapter 4 of the Practice Manual
- Direct families to the Strengthening Partnerships booklet as a resource that further explains early intervention
- Share the video with families who are newly referred to early intervention
- Use the statement or parts of it when responding to questions that come to the single point of entry and direct the caller to the video for further information
- Include the statement in local public awareness and informational materials

With referral sources ...

• Share the video, http://youtu.be/y-M_P6HrZdA,(for their own knowledge and to share with families, perhaps by running it on the waiting room television)

•	Include the statement	and video	url in a letter	of introduction to	a new physician

Use the statement in a verbal explanation of EI when delivering brochures to the referral source

Other/General...

- Add the statement on the home page of the local system or program website. Include a link to the video.
- Run the video during public awareness and child find events/act

Source: Virginia Early Intervention Professional Development Center (VEIPD), http://www.veipd.org/main/videos.html



Additional Resources

Virginia Early Intervention Professional Development Center http://www.veipd.org

The Virginia Early Intervention Professional Development Center was created as part of Virginia's Comprehensive System of Personnel Development (CSPD) and is maintained by the Integrated Training Collaborative and the Partnership for People with Disabilities. We hope that you will explore the site and find a wealth of great training resources and information to enhance your own professional development!

Infant and Toddler Connection of Virginia http://www.infantva.org

Visit this site for information about VA's Part C early intervention system, including information for providers, families, and referral sources. VA's Practice Manual, Part C forms, and contact info for each local system are among the many resources you will find.

New Path Program of The Arc of Virginia www.thearcofva.org www.thearcofva.org

New Path is a program of The Arc of Virginia that focuses on providing information, support and advocacy resources for families of children eligible for or receiving early intervention services. The Arc of Virginia also can provide early intervention families with information about accessing other critical services, such as Medicaid Waivers, EPSDT, HIPP inclusive preschool and transitions to Part B services.