Steve Sisolak



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Director's Office

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Richard Whitley, MS Director

MEETING MINUTES

Name of Organization: Nevada Early Intervention Interagency Coordinating Council (ICC), Child Find

Subcommittee

Date of Meeting: January 21, 2021

Meeting was held via teleconference at the following location:

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I. Call to Order and Roll Call

Sherry Waugh called the meeting to order at 11:08 AM with a quorum of members present.

Members Present: Marty Elquist, Karen Frisk, Patrice Gardner, Kate Green, Sarah Horsman-Ploeger, Robin Kincaid, Marnie Lancz, Janice Lee, Yvonne Moore, Keana Sullivan, Debra Vigil, Sherry Waugh

Part C Staff Present: Dan Dinnell, Jalin McSwyne, Shari Fyfe

II. Public Comment:

No public comment was made.

III. Review and Approve Minutes from the November 12, 2020 Meeting (For Possible Action)

Ms. Waugh asked the members to review the minutes from November 12, 2020 and asked for any edits.

MOTION: Approve minutes from the November 12, 2020 meeting as presented

BY: Marty Elquist
SECOND: Dr. Debra Vigil
VOTE: PASSED

IV. ICC Child Find Strategic Plan

a. Annual Performance Report (APR) Indicators Five (5) and Six (6)

Ms. Fyfe mentioned that this is what we report to the Office of Special Education Programs (OSEP) as a part of the Annual Performance Review (APR). Birth to one (1) is indicator five (5) and birth to three (3) is indicator six (6). The target for state fiscal year 2021 (SFY21) is 1.08. Part C had to add something about stakeholder input and also addressed how COVID-19 affected Early Intervention

(EI). The population for Nevada for birth to one (1) is 35,701 babies. Of that number we have 387 babies in EI, which puts our percentage for Child Find from birth to one (1) at 1.08 which is on target for the year. Ms. Fyfe presented a spreadsheet that compares the last four (4) years of where we have been.

Mr. McSwyne mentioned that we need to make a note that Marnie Lancz email is wrong in the directory.

Ms. Fyfe presented the section that shows birth to one (1) where we can see for the last four (4) federal fiscal years (FFY) we have continued to go down while still meeting the target. We also fell in our ranking throughout the United States from 18th to 32nd. Ms. Fyfe shared the states that Nevada falls between, which looks like Mississippi increased in population and Connecticut is a couple of states below Arkansas now for population for the age range. Nevada, Mississippi, and Arkansas have similar populations, Nevada at 1.08%, substantially exceeded the required number of children receiving services than Mississippi at 0.73%, and Arkansas 0.72%. SMs. Fyfe stated that we are going down in percentage, but we are still doing well and we will continue to work on it. The number of children receiving services is declining, but Ms. Fyfe did not have the percentage. Aging and Disability Services Division (ADSD) does have that information.

Robin Kincaid had a question on whether OSEP wants us to meet the number 1.37 or the 1.08. Ms. Fyfe answered that 1.08 is OSEP's target for birth to one (1). Ms. Fyfe presented the spreadsheet that goes back to 2014, and that Nevada was above the target in 2015. OSEP increased the target for this year. The last five (5) years the target looks to be 1.00%, which we exceeded all years except the last. Child Find activities were down this year because of the pandemic.

Ms. Kincaid asked if we have the opportunity to hold targets to where they were and is there an exception because it is really driven by population. Ms. Fyfe answered that we don't set these targets, OSEP does. Ms. Kincaid replied that the target is OSEP's, but do we establish our own target? Ms. Fyfe responded not for Child Find. Ms. Kincaid mentioned that we need to still figure out ways to do activities whether it be virtual or in person. Ms. Fyfe asked if there are any other questions about indicator five (5) for birth to one-year-olds? Dr. Vigil asked if there are less phone calls or referrals? Ms. Fyfe answered that she believes there are less phone calls coming in because families want face to face visits, and since EI is only providing telehealth, it has affected people's willingness to receive services or enter a program. Ms. Kincaid mentioned that families have less interactions with pediatricians, which attributes to a drop-in referrals. Ms. Fyfe answered that we are looking at active IFSP's for this population and for this indicator, so it will only be for children who have agreed to receive services this way. Ms. Elquist mentioned that this information is from the December 1 count of 2019, but do we have any preliminary information from the December 1 count of 2020? Ms. Fyfe replied that she does not. Ms. Elquist wanted to know if there was slippage in the numbers of active children from programs compared to the previous year. Ms. Fyfe mentioned that she can ask Melissa Slayden to get the December 1 count for 2019 because the fiscal years are dated a year behind. Ms. Elquist mentioned that in response to Dr. Vigil, families are having telehealth visits with doctors, so they might not have those observations for children's development, and some the families are not going to their doctors for follow up visits which is concerning as well.

b. Discussion, Assignments and Review Information (For Possible Action)

Ms. Fyfe presented indicator six (6) which includes all of the children in EI. The target has been 2.00% for the last five years. This year the target went to 2.46%. Ms. Fyfe showed that the stakeholder input is the same as what was shown in indicator five (5). Ms. Fyfe showed a specific

section on the spreadsheet which shows Nevada highlighted in yellow and the population is 108,839. Our target was 2.46%, and our percentage was 3.19%, so we did much better. From birth to three (3) we served 3,470 children, which puts Nevada between Arkansas, and Mississippi. Mississippi has 108,721 population in this age range, and Arkansas has 110,993. With Nevada's 3.19% we far exceeded Arkansas at 0.96% and Mississippi at 1.98%, however if you averaged all of the United States and territories their average is 3.96%. We are below that, but we met the target and we continue to do well. Nevada did go down in our percentage last year which was 2.95%, and two (2) years prior was 2.98%. We are still significantly above our counterparts with the same populations. Ms. Fyfe asked if anyone has questions about Indicator six (6)? Ms. Fyfe mentioned that a lot of community hospitals are doing presentations, and when we gather our Child Find reports we can see if they have been doing that more recently. Ms. Kincaid asked about when the census numbers are going to be reported? Ms. Fyfe answered that she did not know, but she does know that OSEP uses the census numbers to figure out the presented form.

Ms. Waugh mentioned that the first thing to do is to look at community partners such as Children's Cabinet, Child Haven, Children's Cottage and hospitals to have opportunities to collaborate at conferences for early childhood and early childhood education professionals. Future conferences are going to be online, so these opportunities are still there, but they just look different. Given that we still need to identify these kids and make sure that families know about our Child Find activities, we need to figure out how to engage our audience in online conferences. She also mentioned that she heard from Jenna Weglarz-Ward that the University of Nevada, Las Vegas (UNLV) is incorporating pyramid model information in their classes. Ms. Elquist mentioned that TMG is doing a presentation in Jenna's class at UNLV for their providers about EI, and similarly we are doing this at other colleges. The classes will be held in Las Vegas, mostly for UNLV and Nevada State College. Dr. Vigil asked what class is this? Ms. Elquist responded that Nevada State College has a bachelor's program in early childhood, and UNLV has a master's program for Early Childhood Special Education. Usually they invite all of the programs in the south to come in and do a presentation and answer questions, and we have a relationship for Occupational Therapy and Physical Therapy programs, so they have us come in to present about early intervention as well.

Equity and Referrals to El From Medical Professionals and Hospitals Throughout the State

Ms. Fyfe stated that we are going to reach out to EI providers to find points of contact to share with medical professionals, and we were going to review the quarterly Child Find reports to see who will be involved in that. As of January 2019, we were looking to see who was in the hospitals on the Child Find reports, but we are in January 2021 and still need to know that information. We can still look at the Child Find reports, however the report is due this Friday.

Outreach to Under Served Areas

Ms. Fyfe mentioned that we have documents that show how many children were served in each region, as well as each county in the Part C office. That may be something that we can look at, but if you look at Ely the population is significantly different than Hawthorne. The cumulative report from last year would have all the Child Find info from last year and would have what happened, whether it was a doctor's office or a presentation at a different location like a childcare center. We can see what happened throughout the state to see where our holes are. Dr. Vigil mentioned that she would like to see that in the next meeting.

Public Service Announcement (PSA)

Ms. Fyfe mentioned that we were going to look at brochures, PSA's, and posters for consistency. Ms. Green mentioned that something just came up with the payment for the PSA with PBS and she does not know if it was renewed. Ms. Fyfe mentioned that in a previous meeting involving ADSD and the

Part C office on declining referrals, someone mentioned this and that maybe they can provide funding to make sure we get the single point of entry numbers. Ms. Fyfe also mentioned that she can reach out to Shannon Sprout and Rique Robb. Ms. Fyfe stated that the Child Find committee should have some funds and that she can reach out to see if we use that to reach these underserved areas and children. Ms. Green mentioned this while talking with Rique and Shannon about other ways to reach people. With COVID-19, people are not seeing the materials they used to, like paper brochures at WIC or doctors' offices. We have a relationship with Ms. Waugh and Head Start, and we are looking outside the box from our traditional outreach like brochures that families are not seeing since they are not going out. Dr. Vigil asked if there was a reason why there is such a focus on PSA through PBS, or if it can be on other visible channels? Absolutely, and we had someone who worked with some of the news stations that was passionate about children's issues, but we believe we lost that contact. Dr. Vigil stated that she can reach out to someone at UNR who might know someone who can make commercials. Ms. Fyfe said that it would probably fall to her and Ms. Waugh since she is the chair.

Develop A More Specific Tracking System for El Referrals

Ms. Fyfe mentioned that this topic goes back to the data system that we were intending on expanding the referral sheet to have that on there. At this point there is no new update on a new data system, it is being pushed aside for now due to COVID-19 because the state is in a challenging fiscal situation. Ms. Fyfe asked if there are any suggestions? Ms. Kincaid answered that she has a meeting at the end of the month for single point of entry and that she will mention this to the team to get ideas.

V. Child Find Self-Assessment Workgroup Update

Ms. Fyfe mentioned that there was a Child Find Self-Assessment meeting in December and that she will reach out to the team members that were present to schedule a meeting in the first few weeks in February. OSEP is asking to look at every area of Child Find to see if there are any holes and that should help the Child Find system. We are in section one (1), which is regulatory requirements specific to Child Find and after that it goes to best practices and resources, then OSEP's policy letters and guidance. Ms. Fyfe presented the areas that we are currently working on, and the people who were helping us were invited and they wanted more information. If anyone wants to help with the Child Find Self-Assessment just send an email to Ms. Fyfe.

Due to loss of quorum, meeting was ended

- VI. Update on IDEA Part C Differentiated Monitoring Services and Supports (DMS)
- VII. IDEA Part C Office Reports/Updates
- VIII. Consider Agenda Items for the Next Meeting
 - IX. Schedule Future Meetings
 - X. Public Comment

 No public comment was made.
 - XI. Adjournment