



MEETING MINUTES

Nevada Early Intervention Interagency Coordinating Council (ICC)

Wednesday, September 11, 2024

Meeting Location: 7150 Pollock Dr, Lincoln Room 27
Las Vegas, NV 89119

Microsoft Teams Meeting

MINUTES

I. Call to Order, Welcome, and Announcements

Chair, Jenna Weglarz-Ward, welcomed all in the room and on the call. A quorum of members was present, and the meeting was called to order at 8:38 a.m.

Members Present: Julie Dame, Cate Guzy, Amy Hendrickson, Sarah Horsman, Robin Kincaid, Rhonda Lawrence, Janice Lee, Catherine Nielsen, Rique Robb, Jenna Weglarz-Ward

Members Absent: Assemblywoman Tracy Brown-May, David Cassetty

Public Attendees: Janet Alexander, Capability Health and Human Services (CHHS); Christa Allan, Therapy Management Group (TMG); Dana Aronson, Theraplay Solutions; Derek Barber, Health Management Associates (HMA); Marina Barrett, ADSD; Christie Bringman, ADSD; Abbie Chalupnik, Aging and Disability Services Division (ADSD); Karen Frisk, ADSD; Sheila Garner, ADSD; Randi Humes, ADSD; Shannon Ivy, ADSD; Amy Kowalski, Theraplay Solutions; Jennifer Loiacano, TMG; Brenda Morales-Solorzano, ADSD; Cassie Morgan, ADSD; Steven Pawlowski, HMA; Danielle Race, ADSD; Jessica Roew, ADSD; Heike Ruedenauer-Plummer, ADSD; Debra Stewart, MDDA, Fatima Taylor, ADSD; Lindsey Wood-Lopez, ADSD

Part C Office: Jennifer Kellogg, Lori Ann Malina-Lovell, Iandia Morgan, Maya Raimondi, Lauren Roscoe; Pamela Silva, Melissa Slayden

II. Public Comment

Catherine Nielsen, ICC member, shared that the Governor's Council on Developmental Disabilities will be conducting three (3) town halls. The town halls were held in Pahrump, Mesquite, and Las Vegas, to assist in completing the councils five (5) year strategic plan.

III. Approval of the minutes from December 6, 2023, and January 29, 2024, Meetings (For Possible Action)

Mary Garrison shared that the meeting minutes will now be available at [2024 ICC Meetings \(nv.gov\)](https://www.nv.gov/dhhs/2024-ICC-Meetings), within the minutes section for each meeting, once they are approved by the council. Ms. Garrison also explained that

meeting minutes will now include an overview of what was discussed, and decisions made by the council, versus verbatim.

The council was unable to approve the April 30, 2024, meeting minutes due to an error on the agenda. The April 30, 2024, meeting minutes will be reviewed for approval during the next meeting.

Motion: Approve December 6, 2023, meeting minutes

First: Catherine Nielson

Second: Julie Dame

APPROVED

IV. Aging and Disability Services Division (ADSD) Updates (Information Only)

a. Nevada Early Intervention Data System (NEIDS) (Information Only)

Sarah Horsman shared that the NEIDS project has continued, with the core team meeting regularly. Programs continue to utilize the new system, and many of the billing issues have been mitigated. ADSD has been meeting with the community partners monthly to address concerns and data cleanup and share updates.

b. Nevada Early Intervention System Analysis Results Presentation

Stephen Pawlowski from Health Management Associates (HMA) shared the results from the Nevada Early Intervention System Analysis. HMA conducted the analysis. Stephen explained that Nevada's Part C Coordinator was interviewed, as well as other states. HMA shared findings with the ICC in January 2024. Some adjustments were made to the report based on findings and additional data since January 2024. The final report was issued June 7, 2024.

Stephen explained, the report introduction provides an overview of the services that are required to be delivered under IDEA Part C. The introduction provides some demographic data that we extract from the American Community Survey, which is published by the Census Bureau, and this is data specific to Nevada. For example, we discussed the total population and the population of children under three (3) to quantify the potential service population of those with disabilities that may be eligible for services. We provide an overview of the regional service delivery system in Nevada.

We discussed some of the challenges that Nevada faces in its geography. Nevada is primarily a rural and frontier state, with most counties being in an outlying area or harder to reach area, and then highly centralized urbanized areas in Las Vegas and the northwestern part of the state. We conclude the introduction with an overview of our evaluation goals and some of the data sources we used.

The goals were to document the governance, administrative structure of NEIS, and effectiveness of these structures in supporting service, access, and quality. HMA also evaluated differences in service costs between NEIS programs and community partners. HMA measured benchmarks on policies and system performance indicators compared to national data and other policies to provide context for how NEIS performs or how it looks against other systems across the country. The final section assesses other access related indicators across the early intervention lifecycle, from the time of referral through the time of transition out of the system.

There are three parts to the report:

1. Overview of Nevada Early Intervention Services
2. Workforce recruitment and retention
3. Service outcomes along the early intervention life cycle, from referral through transition

Overview of Nevada Early Intervention Services:

Early intervention is a federal requirement under the Individuals with Disabilities Education Act (IDEA) grant. The report outlines the various roles and governing responsibilities of early intervention and the IDEA Part C office. Research was conducted on other systems across the country, seven (7) in particular.

- HMA also tried to get interviews with other states Part C Coordinators, to get a better understanding of how their systems are structured.
- One of HMA's key findings was that although the federal regulations are there to govern what is done in the EI system, they provide broad latitude on how systems are designed and structured.
- The report includes descriptions of other States, how they administer the EI system, and how they structure their system.
- Report includes recommendations on how Nevada can restructure.
- Includes description of EI programs in Nevada, how they operate, the different regions they serve, and differences between state and community programs.
- Includes discussion on how NEIS is funded and how other states fund their EI system. This includes various funding sources, and like all other states, NEIS is funded primarily by state general funds.
- Discussed opportunities to potentially do more to leverage Medicaid funds and other revenue sources such as the adoption of a family cost participation policy, which not all other states do, but some states do that as a means of generating additional revenue for reasons that may become clearer later.
- There has been an increase in service demands over the years, particularly the last year, which a record referral volume. This was state fiscal year 2023 (SFY23).
- Projections show the trend pointing upward on service demands and Nevada.

HMA provided an overview of key findings, and the recommendations related to each of those key findings. Each of the findings are predicated on criteria. HMA looked at federal regulations primarily. In part one (1), recommendation is to clarify the roles and responsibilities of the Department of Health and Human Services, the IDEA Part C office, and Aging and Disability Services. Through observations it was determined there are overlapping responsibilities between the IDEA Part C office and ADSD, which may cause confusion. Particularly, with community partners, they might receive conflicting information from two different offices. HMA also recommends exploring option to increase Medicaid funding, as service demands will continue to grow.

Workforce recruitment and retention:

In Part 2, HMA discusses Nevada's workforce in the context of four (4) key disciplines, special instruction delivered by development specialists, therapies delivered by speech language pathologists, therapies delivered by occupational therapists, and therapies delivered by physical therapists.

- 90% of the Individualized Family Service Plan time authorized in July 2023 was delivered by these four (4) specialties.
- Developmental Specialists deliver special instruction, and the report includes a description of their major responsibilities.
- Report draws a comparison of the Development Specialist qualification requirements in Nevada to other states across the country.
- The states that were interviewed or attempted to be interviewed were Arizona, California, Colorado, Georgia, New Mexico, Oregon and Utah.

- HMA discussed professional requirements in the states that were interviewed to generate ideas about what Nevada could consider if you were to make changes to your personnel qualification requirements.
- Findings related to Development Specialists were that Nevada’s requirements, including its endorsement requirement, tended to be a higher threshold to reach than comparative states. The report also found that the Part C manual could be clarified or even updated to provide a clearer pathway for paraprofessionals.
- The report acknowledges that there are some statutes in the state that may limit the ability to shift over to a paraprofessional service delivery system.
- Report describes key differences in wage levels between services that are delivered by ADSD and services that are delivered by community partners.
- The average wage level for state facilitated Developmental Specialists was about \$30.54 per hour compared to community partners who paid their Developmental Specialists an average of \$22.97 per hour.
- The rate was recently updated, so there might be changes to the rates.
- The structural discrepancies in pay and caseloads for Development Specialists makes for a discrepant system.
- One of the recommendations was to monitor these differences across the ADSD facilitated services and community partner services so that discrepancies and disparities like this do not persist.
- A similar set of analysis was done for the three (3) major therapists.
State wages are fairly competitive and comparable to what we would pull from the Bureau of Labor Statistics.
- State therapist wages are much higher than community partners therapist wages.
- The final component of this section discusses the Comprehensive System of Personnel Development.
- Comprehensive System of Personnel Development (CSPD) is a framework that is required of all states. The Early Childhood Technical Assistance Center points to the CSPD as the primary mechanism by which states ensure EI services are provided by knowledgeable, skilled, and competent individuals.
- HMA recognized the retention efforts that have been done to date, including the alternative path to endorsement for Developmental Specialists.
- Report recommends including strategies related to professional development and retention in strategic planning.
- HMA recommends continually reassessing workforce related challenges and look to fellow states for possible solutions.
- Arizona has a comprehensive written plan that includes tools and resources, like interview questions that might be used within programs when interviewing practitioners. Other resources include opportunities to obtain scholarships for practitioners that are unable to continue after an associate’s degree.

Service outcomes along the early intervention life cycle, from referral through transition:

- The third and final section of the report consists of data.
- Includes analysis of how service outcomes look at the regional level and a comparison between ADSD facilitated and Community Partner facilitated services.
- Includes analysis of how service outcomes look based on different demographic factors like race and ethnicity and the language of the family of the child.

Recommendations:

- Update IDEA Part C Manual, policies, and other guidelines, to include more information about processes.
- Continue to leverage data and utilize new data from Nevada Early Intervention Data System (NEIDS).
- Develop strategies for monitoring and resolving any access disparities.

Jenna Weglarz-Ward suggested council members review the report in the coming months and the information can be utilized in future meetings to assist the council with strategic planning.

c. Update on Policy 27.2 Nevada Early Intervention Services (NEIS) Intake and Eligibility (For Possible Action)

Fatima Taylor provided updates on Policy 27.2 Nevada Early Intervention Services (NEIS) Intake and Eligibility. This agenda item was not for action.

Fatima recognized Jalin McSwyne for his impeccable suit.

- Any comments or suggestions were to be submitted to Fatima Taylor by September 30, 2024.
- Final approved document will be published October 1, 2024.
- Updates drafted by workgroup of representatives from all regions.
- Goal is to create consistency and quality of service delivery statewide.
- Final step is public input presentation and solicitation of stakeholder feedback.
- Reference to Lytech and TRAC IV was removed from all sections of the policy. Designated electronic system of record is now listed.
- Revised the policy to provide clarity and streamline state processes and tools for screening programs.
- Updated and streamlined the process for the Child Abuse Prevention and Treatment Act (CAPTA).
- CAPTA, screening and monitoring program, Child Find opportunities, and the senior physician's collaboration of the Neonatal Intensive Care Unit (NICU) screening process were updated.

d. Early Intervention In-Person and Telehealth Report (Information Only)

The Early Intervention In-Person and Telehealth Report was provided to the council.

e. Early Intervention Program Updates and Highlights (Information Only)

The Early Intervention Program Updates and Highlights were provided to the council.

V. ICC Interest Survey Results and Updates for ICC Subcommittees (Information Only)

- a. Child Find Subcommittee**
- b. Family Support Resource Subcommittee**
- c. Equity Subcommittee**
- d. New Membership Subcommittee**
- e. Ad hoc By-Law Subcommittee**

Jenna Weglarz-Ward informed the council that the survey that was distributed to gather interest for appointments to the council subcommittees. Ms. Weglarz-Ward asked members and stakeholders to contact her and Mary Garrison if they would like to participate in any of the subcommittees. Mary Garrison shared the results from the survey. A new survey will be sent as the council moves into strategic planning.

VI. IDEA Part C Information and Reports (Information Only)

a. Project Assist Updated Log (Information Only)

Mary Garrison shared the updated Project Assist log. The new Project Assist log was implemented on May 1, 2024. Ms. Garrison explained that the information collected on the new log will assist in ensuring outreach and resources are available in areas that may be underserved since the Part C office is now collecting caller region and purpose of call.

b. Complaint Log (Information Only)

Lori Ann Malina-Lovell, IDEA Part C Coordinator, shared complaints received for the system which started on July 1, 2024. One (1) formal complaint was received for a program in Southern Nevada. The families' concerns are related to their services. Jennifer Kellogg, Part C Clinical Program Planner I, is the Part C liaison for the program where the family is receiving services. Ms. Kellogg explained that the Part C office is currently conducting interviews regarding the complaint. The complaint report is scheduled to be complete mid-October.

c. The Center for IDEA Early Childhood Data Systems (DaSy) and Early Childhood Technical Assistance (ECTA) Part C and 619 Target Setting Guide (Information Only)

Melissa Slayden, Part C Data Manager, shared information from The Center for IDEA Early Childhood Data Systems (DaSy) and Early Childhood Technical Assistance (ECTA) Part C and 619 Target Setting Guide. The toolkit and information available through these centers, will be used to set targets for the Annual Performance Review.

Jenna Weglarz-Ward suggested resources be shared in future meetings as well.

d. Nevada Early Intervention Professional Development Center Upcoming Trainings for Families and Professionals (Information Only)

Lori Ann Malina-Lovell thanked all the volunteers that have assisted with the NV Early Intervention Professional Development Center. These volunteers have assisted as workgroup members, instructors, and guest speakers. Maya Raimondi, NV Early Intervention Professional Development Center Director, was introduced. Lori Ann shared that 40 learners have graduated, with 20 additional learners scheduled to graduate in April 2025. Another cohort of 20 learners will graduate in Fall 2025. Graduates can fulfill their position requirements and maintain their positions, which ultimately improves results for families because of the continuity of services for these families. The professional development work group will be traveling to the Division for Early Childhood (DEC) International Conference in New Orleans, LA, to present on Nevada's "Grow Your Own" initiative during a poster session and an in-person presentation session.

Lori Ann shared that the trainings offered through the Professional Development Center have expanded to therapists, supervisors, early intervention providers, stakeholders, and the ICC. There will also be training opportunities for families. A feeding training has been scheduled, as well as a collaboration with Autism Treatment and Prevention (ATAP).

Maya Raimondi addressed the council. Maya shared that it has been an honor and rewarding to hear the feedback from learners, and to watch as learners present their capstone projects. Maya shared that 70 professionals have registered for the feeding training. Maya thanked Robin Kincaid for her assistance and collaboration with the Professional Development Center. Maya also thanked families who have participated in the 1.2 Partnering with Families in Early Intervention, which has had family participation in every cohort. Maya thanked Sarah Sills from Nevada Early Intervention Services, Reno, the Aging and Disability Services Quality Assurance Team, and all stakeholders who have helped the Professional Development Center a success. A90

e. Medicaid Recoupment in Early Intervention by ICC Request (Information Only)

Rique Robb shared with the council that the Medicaid Recoupment process has been streamlined to be fee per service. Mary Garrison shared that the Division of Health Care Financing and Policy (DHCFP) was contacted but was unable to attend today's meeting. DHCFP will be available to provide information to the council in the future. Lori Ann shared that the question that was submitted by Robin Kincaid was what the council can do to assist with increasing Medicaid funding in Early Intervention.

f. Part C Determination Letter and Response (Information Only)

g. Process for Finding of “Needs Assistance”

Lori Ann Malina-Lovell shared the Annual Performance Report (APR), which was submitted to The Office of Special Education Programs (OSEP). OSEP provided a response of “Needs Assistance” for the APR that was submitted in January 2024. The response was received in June 2024. Lori Ann explained that Nevada continues to meet with OSEP and their technical assistance programs monthly. Technical assistance is provided by The Center for IDEA Fiscal Reporting, The Center for IDEA Early Childhood Data Systems (DaSy) and Early Childhood Technical Assistance (ECTA). The Part C office continues to implement changes based on the recommendations from these centers and OSEP. Additional technical assistance will be provided through the Differentiated Monitoring Services and Supports (DMS), which the state is still waiting for from OSEP. The Part C office continues to collaborate and communicate with Aging and Disability Services and will share the results of that monitoring once received. The report will be provided to the ICC as well. Lori Ann shared a handout regarding State Performance Plans, which are used to address “Needs Assistance” findings.

h. Early Intervention Delayed Services (Information Only)

Lori Ann Malina-Lovell shared that with continued turnover and staff shortages, some families have experienced extended wait time for early intervention services. The guidance the Part C has provided to programs is that the best approach is the continue to provide open and honest communication with families regarding these delays. This can eliminate some stress as families await some services. To ensure equitability, drafted communication and letters have been provided to programs, which can be used when addressing delayed services with families. While attending a conference this year, Part C representatives from Texas discussed delayed services with Nevada. The NV Part C office has since received a request from Texas for the drafted communications that have been shared with our early intervention programs, as they would like to implement a similar plan in their state.

i. 2024 Annual Family Survey (Information Only)

Lori Ann requested that the 2024 Annual Family Survey be discussed in greater length during the December meeting. Melissa Slayden briefly shared that result information from the 2024 Annual Family Survey was provided in the packet but does not include all responses. Response rates did go up but have not yet reached 20%. Melissa suggested the council review the results provided before the December meeting to assist with the councils continued work.

VII. Public Comment

Robin Kincaid asked if there would be opportunities to request future agenda items.

VIII. Schedule Next Quarterly Meeting (For Possible Action)

Jenna requested further the following items be added to future agendas:

- Review in depth and discuss the system report
- Family Outcome Survey
- Questions from the council regarding Medicaid and early intervention
- Data sources
- Standing items: meeting minutes, subcommittee updates, ASD updates, Part C Updates

Robin asked if the council would be receiving the Yellow Bar Report. Melissa Slayden explained that these data will be sent to the council, but it will look different than in the past. Due to remediation and 508 Compliance concerns, the report cannot be provided as it was in the past.

Robin would like to discuss the following items in future meetings:

- Continue discussion on increasing Medicaid dollars in early intervention
- Early and Periodic Screening, Diagnostic, and Treatment

The next council meeting was previously voted and approved by the council, and was scheduled for December 3, 2024, 1:00 pm. The council will have an additional meeting in January 2025 to review the Annual Performance Report for approval.

IX. Adjournment

The meeting was adjourned at 9:57 am.