

Infant Toddler Coordinating Council Meeting Minutes
November 1, 2019

9:00 - 3:00 pm MST
PTC Building, 450 West State Street
Boise, Idaho 83720

ATTENDEES: Erin Bennett, Cindy Brock, Christy Cronheim, Charlene Davis, Hillary Haro, Kelsey Hofacer, Mary Gauthier, Carrie Hull, Sherry Iverson, Angela Lindig, Paula Mason, Bryan Murray, Omair Shamim, Mechelle Wilson,

VIA WebEx: Dr. Bryan Gee, Sara Matthews, Ellen Neff, Emily Peterson

EXCUSED/ABSENT: David Allen, Shannon Dunstan, Jeanne-Marie Kopecky, Senator Fred Martin, Kathy McGill, Ericka Rupp, Suzanne Peck

STAFF PRESENT: Brande Gonzalez, Sue Harpold, Melaine Shepard, Margaret Odedo (recorder)

GUEST: Dr. Kristina Blaiser, Dr. Evan Papa, Aubrie Hunt, Sandra Cummings

Facilitator	Tasks/Topic	Discussion	Action Item
Carrie Hull	Welcome	Carrie Hull welcomed all members and lead an icebreaker that honored Sue Harpold's contributions to the Infant Toddler Program and her endeavors over the years.	
Carrie Hull	Panel Discussion	<p>Carrie began by introducing Dr. Bryan Gee, OT program at ISU in Pocatello, Dr. Kristina Blaiser, SLP program at ISU in Meridian, and Dr. Evan Papa, PT program at ISU in Meridian.</p> <ul style="list-style-type: none"> • Dr. Gee reported that they accept 18 new students annually, they are accredited for 14 graduates, and it is a three-year program. During 2nd and 3rd year, all students must complete 4 clinical rotations to prepare as a generalist; 40% are in pediatrics. Additionally, they must complete 13 credit hours in psycho-social aspects of occupational therapy and 5 credit hours that focus on pediatrics. It is very easy for students to start private practice in Idaho as it is very lucrative; earning \$75,000 and up. 	

		<ul style="list-style-type: none"> • ISU Pocatello is advocating for an OT cohort in Meridian with 16-18 students, but it must first be Board approved and accredited by Fall 2020. Dr. Gee stated that 75% of students stay in Idaho because they live here. Students seek employment via the College's Handshake department, however, clinical rotations often result in a job offer. Telehealth is an accreditation standard, however, clinical rotations in homes is a concern due to adequate supervision. • Follow Up: Christy to contact Kimberly Lloyd, Clinical Education Coordinator, ISU Pocatello campus. • Dr. Papa from the PT program explained that they received 450 applications this year, however only 200 qualified. They offer a 3-year program, with an initial clinical rotation in the 1st year. Most students find work in the last 2-8 weeks of the last semester. They have 24 students in Meridian and 24 students in Pocatello. 40-60% stay in Idaho after graduation with 10% working in pediatrics, and others work in schools, hospitals and, clinics. Dr. Papa then stated that they need clinical sites. Dr. Papa is also open and interested in a telehealth curriculum. 	
Carrie Hull	Strategic Planning	<p>Carrie recapped themes heard from Dr. Gee, Dr. Blaiser, and Dr. Papa and indicated that all expressed interest to increase programs and collaborate. However, lack of supervision, limited ability to increase students and limited exposure to 0-3 population were overall issues identified. Carrie asked everyone to break into groups to identify some action steps that the Committee could engage in. After further discussion the group identified the following:</p> <ol style="list-style-type: none"> 1. Schedule educational opportunities with all 3 programs <ul style="list-style-type: none"> • Video of a child + home visits Panel 	

		<ul style="list-style-type: none"> • Be very intentional of content; provide tangible resource <ol style="list-style-type: none"> 2. Ask instructor for modality & time <ul style="list-style-type: none"> • Bring a parent & ITP staff member 3. Provide students with educational PR material that includes early intervention/evidence-based practices plus their discipline's perspective <ul style="list-style-type: none"> • Identify on-boarding information for students 4. Could be expanded to DHW Dept. wide services/information <ul style="list-style-type: none"> • (evidence-based for medical field) 5. Connect with clinical education coordinator at ISU <ul style="list-style-type: none"> • Carrie to write letter 6. Identify SLP/OT/PT staff that might be willing to participate - ask SLP/OT/PT staff to consider families to participate <ul style="list-style-type: none"> • Christy will report at November Executive Committee 	
Carrie Hull	Strategic Planning continuation	<p>Carrie asked the ITCC Committee to pick the top three action steps for the strategic plan.</p> <ol style="list-style-type: none"> 1. Direct Education <ul style="list-style-type: none"> • Strong on clinical skills, need more relationship skills – soft skills • Tell our stories 2. Incentive for clinical supervision from already contracted OT 3. Connect with clinic Education Coordinator <ul style="list-style-type: none"> • Educator-inclusion in curriculum <p>Carrie then asked if there are any other action steps to continue working on before the January 1st meeting and suggested they could be completed via a task force. Christy would like to bring Chad Cardwell into the conversation, as a coordinated effort with some staff from the East Hub (ISU Pocatello) and the West Hub (Meridian). FOLLOW UP: Christy to work with Chad.</p>	
Carrie Hull	Fostering Idaho	<p>Carrie Hull began by providing the history of Fostering Idaho, which began in 1993 under the name Idaho Children's Resource Center. Carrie indicated that Fostering Idaho provides support services, offers comprehensive training and education, recruits and develops resource for families and caregivers, and supports permanency planning for children. Prior to obtaining a license to</p>	

		<p>become a foster/kinship/pre-adopt parent, applicants are required to participate in a 27 hours pre-licensing training called PRIDE. Additionally, they encourage partnership, collaboration, and integration of services. Other pieces of the program include:</p> <ul style="list-style-type: none"> • Boise Angels deliver a box once a month for a foster family that may contain three meals, gift certificate for babysitter, etc. • Carrie Hull currently mentors 43 parents and speaks to them at least once a month to see how they are doing. • Academy training is still available • Foster children are automatically eligible for Head Start <p>After further discussion, Christy suggest using Developmental Milestones and thought a road map/flow chart with age of child could be developed. It was also suggested that a Fostering Idaho train the trainer could take place next summer.</p>	
Carrie Hull	Executive Reports	<ul style="list-style-type: none"> • Christy Cronheim – Appointments: Christy informed the Committee that our Division Administrator has spoken with her leadership about our need for appointments for Council members. She learned that documents regarding Boards and Commissions under the previous administration were archived and the current Governor’s staff are working to resolve the challenges. • FOLLOW UP: If members do not receive the appointment letter in the next few weeks, Christy Cronheim will let our administrator know. • Christy Cronheim – SPP/APR target recommendations; Christy explained that these are due on Feb 1, 2020. The Executive Committee reviewed and approved the recommended targets at the October meeting, and Christy reviewed and explained the targets and the rationale behind them with the Council. For more information see Appendix 1: State Performance Plan FFY Proposed Targets. 	

		<ul style="list-style-type: none"> • Carrie Hull – Executive Committee Members at Large: Carrie reported that the Executive Committee discussed terms for members at large during the last meeting, with a recommendation of a 3-year term. The Council concurred with the Executive Committee recommendation. • Additionally, during the January 2020 meeting, the Executive Committee will accept Vice-Chair nominations. Information regarding this will be emailed prior to the meeting 	
Carrie Hull	Collaboration Updates	Each Member shared relevant information on their program activities and initiatives.	
Carrie Hull	Closing	Being no other business, the meeting adjourned at 3:05 p.m. Next meeting date is scheduled for January 31, 2020.	

Appendix 1: State Performance Plan FYY Proposed Targets

Specific information for each indicator can be found below:

- Indicator 1 (compliance indicator) Timely Services – percentage of children that receive their EI services in a timely manner -FYY 18 target 86.5%
- Indicator 2 (performance indicator) Natural Environments -percentage of infants/toddlers who primarily receive EI services in their home- FYY 19 proposed target 96.5%
- Indicator 3A - (performance indicator) percentage of infants/toddlers who demonstrate improved positive social-emotional skills (including social relationships) FYY 19 proposed targets - Summary Statement 1: 62.5% and Summary statement 2: 57.5%
- Indicator 3B -(performance indicator) percentage of infants/toddlers who demonstrate improved acquisition and use of knowledge and skills (including early language/communication) FYY 19 proposed targets –Summary Statement 1: 66% and Summary Statement 2: 52%
- Indicator 3C - (performance indicator) percentage of infants/toddlers who demonstrate improved use of appropriate behaviors to meet their needs - FYY 19 proposed targets: Summary statement 1: 71.8% and Summary Statement 2: 59.8%
- Indicator 4A - (performance indicator) percentage of families participating in Part C who report that early intervention services have helped the family know their rights. FYY 19 proposed target – 95%
- Indicator 4B -(performance indicator) percentage of families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs- FYY 19 proposed target – 94.5%
- Indicator 4C (performance indicator) percentage of families participating in Part C who report that early intervention services have helped the family effectively help their children develop and learn. FYY 19 proposed target – 94%

- Indicator 5 -(performance indicator) percentage of infants and toddlers birth to 1 with IFSPs compared to national data FYY 19 proposed target – 1.76%
- Indicator 6 (performance indicator) percentage of infants and toddlers birth to 3 with IFSPs compared to national data FYY 19 proposed target – 2.95%
- Indicator 7 (compliance indicator) percentage of infants and toddlers with IFSPs for whom an initial evaluation, assessment, and IFSP meeting were conducted within 45 days- waiting for additional data to set target
- Indicator 8A (Compliance indicator) percentage of infants and toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months prior to the toddler’s third birthday- FYY 19 proposed target TBD
- Indicator 8B (Compliance indicator) percentage of infants and toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has notified the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services FYY 19 proposed target TBD
- Indicator 8C (Compliance indicator) percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, no later than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services. FYY 19 proposed target TBD