**First Steps Interagency Coordinating Council (ICC) Minutes**  
**November 14, 2018**

Barbara Blain, Joshua Bougie, Karen Carradine, Edward Clere, Brooklyn Dugdale (proxy for Brittnee Smith), Thomas Fisher, Mariann Frigo, Dorene Hoops, Deepali Jani, Jennifer Owens, Shirley Payne, Jake Stein, Claire Szpara, Jessica Tomasino, Stacey Williams

**Welcome and Introductions: Jake Stein, Chairperson, ICC**  
Both ICC and audience introduced selves.

**Approval of August 8, 2017 Minutes: Jake Stein, Chairperson, ICC**  
Thomas Fisher moves to approve and Mariann Frigo seconded, council approved minutes as corrected.

**Review Governor's report: Jake Stein**  
--Jake thanked Stacy Williams and Megan Smith, for their involvement in writing and production. He pointed out message from chair. Next year the conversation will start earlier and in this room with this council so that it can be delivered to FSSA prior to November 1st. He apologized for being rushed this year. In writing this year they focused on impactful data to catch governor’s eye, making the report impactful and succinct so governor will read and get the information needed.  
--Jake went over the report briefly.  
--Shirley Payne complimented both the visual and content, especially the key findings with good readability.  
--Jake stated that next year the report may spend more time on return on investment (pursuant to Shirley’s comment). In 2019 the conversation will start in the summer.

**Annual Performance Report: Janet Ballard, Early Childhood Center (ECC)**  
--Janet reviewed the PowerPoint which is attached to the end of this report. See the power point for specific data.  
--Janet addressed question about how target was established. First Steps was asked to increase their previous target by OSEP, which is how the current target was reached.  
--Thomas Fisher asked for clarification on the number of children with IFSPs. Our target was to serve 3.85% of the birth population which is a target set out by the feds.  
--Jennifer Owens commented on the 30 day start data which is not only impacted by increased referrals, but also by lack of providers. Janet responded that that will be part of the narrative of the APR when it is written. Jennifer further clarified that children all receive services but they may not get the specific services or amount of services initially recommended. Let the audience know that we may need to connect families with a specialty provider with a resource outside of the First Steps system in order to accomplish this.  
Shirley Payne: do we break this down by ethnicity or poverty level? We do that for family and child outcomes. Christina Commons commented that we capture that in our State Systemic Improvement Plan.  
--Janet: The ICC may either: (1) prepare and submit its own annual report to the Department and the Governor, or (2) Provide the State lead agency’s Annual Performance Report (APR)  
--Jake: Who sees the APR?  
--Janet: Christina Commons sees it and signs off on it.
The Pyramid Model and Professional Development: Michael Conn-Powers (ECC) & Connie Young, First Steps

PowerPoint is attached to the end of the minutes
--Connie Young: Last summer we were presented with some technical assistance to bring this to the state.
--Michael Conn-Powers: For the last few years we have focused on the social emotional growth of young children. We have focused on family engagement because we know that with engaged families, children make more gains. In looking at how we provide professional development, we have developed leadership teams to support growth in each of the agencies with which we work, so that we have a long term impact. We are implementing ongoing coaching.
--Connie Young: Providers need support. We are currently looking at the home visiting series, and are starting small and now trying to figure out how to roll this out state-wide. We are asking for a subcommittee to help us figure out how to do that.
--Michael Conn-Powers: Would the council be willing to look at this model and the Pyramid model and make some suggestions and provide guidance?
--Mariann Frigo: How does the development of the assessment run along with the AEPS (Assessment, Evaluation and Programming System)? How would we use it?
--Michael Conn-Powers: The AEPS is weak in assessing the social emotional skills
--Mariann Frigo: We are doing this because it’s part of the SSIP, not because it’s a weak area of the AEPS?
--Jake Stein: What’s the financial impact to a SPOE or fiscal agency to implement or develop this?
--Mariann Frigo: Coaching works. In addition, there are fewer family cancellations so there is a direct impact on the revenue stream.
--Barb Blain: Retention is key so that we need to make our workforce more content to stay with us.
--Karen Carradine: Volunteered to be on the committee. Is this a social emotional curriculum? Or approach? Or content? Because it can morph.
--Michael Conn-Powers: Parents Interactions With Infants (PIWI) through the Pyramid is a model we are looking at.
--Shirley Payne: Does Steve Vehwig’s and Angie Tomlin’s book address this at all?
--Michael Conn-Powers: their model looks at some of the harder interactions.
--Christina Commons: These are not specific courses but more trainings in the nuances of First steps…policies and paperwork. This is more a philosophy than a set of courses. Compliments how we are writing outcomes, how we are looking at family engagement. We are asking if the PIWI is a good fit for Indiana. Massachusetts has already investigated, we have states we can look at and ask questions from. We chose not to use the Pyramid team intensively…chose to use them strategically with all we have had going on. We’d like to make sure it is a good fit before we go deeper.
--Jake Stein: What will this look like? How many people, how often, who?
--Michael Conn-Powers: We’d like a mix of ICC and audience participation, a diverse group. We hope not to take too much time. Maybe meet either before or after the regular ICC meeting or through distance conferencing.
--Jake Stein asked for volunteers.
--The following volunteered: Karen Carradine, Jessica Tomasino, Shirley Payne, Mariann, Jennifer Owens, and Megan Drewiecki (NOTE: This group was included in the discussion on moving forward with priorities later in the meeting and is not the Professional Development small group. For the last version of this group, see later notes.)
State Update: Director First Steps
See attached PowerPoint for details
Additional comments:
--Christina Commons: Public comment was overwhelmingly in support of the rate time study. Nothing of the report changed based on the comments.

--Christina Commons: Revenue analysis was a deep dive in the way we recover revenue in our fun recovery system.

--Christina Commons: Referral partners are doing a better job of referring children and families. We receive a list monthly of children and families from DCS with substantiated abuse cases. We make every effort to contact them and offer them a screen.
--Shirley Payne: are these all kids whether or not there is a developmental delay
--Christina Commons: If the family would rather just go on to an evaluation instead of a screen we can definitely do that. Sometimes the first family with whom the child has been placed is no longer where the child resides, so we sometimes have trouble tracking them down

--Christina Commons: The online direct service provider training is still live. We feel it is valuable to have a real person listening and answering questions.
--Thomas Fisher: is it a barrier to need to comply with the trainings of the live trainings?
--Christina Commons: Not really. It provides consistency. We will be accommodating some of the timing issues by providing training in evenings every-other months
--Thomas Fisher: Online training is the way of the future. It is not unusual to wait for an answer.
--Christina Commons: It has also been condensed. 15-40 providers per month on the training.
--Audience: The fact that we could have chat engagement was valuable.
--Jake Stein asked for feedback.
--Audience: teachers have found the evenings helpful
--Mariann Frigo: online mentoring is very valuable

--Christina Commons: We are willing to provide information to any colleges, institutions, organizations that can help recruit individuals. Please reach out to Connie. (constance.young@fssa.in.gov) Invited all to contact with Connie Young or herself with ideas about recruitment and retention.

--Request For Proposal (RFP): A Request for Proposal went out on 11/14 for the Central Reimbursement Office (CRO).
--Jake Stein: is there any need for help from the ICC in this process?
--Christina Commons: Anyone is welcome to read and comment. The current contract goes through June 2020 but have to run a concurrent contract
--The following is a table of pertinent dates.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
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<tbody>
<tr>
<td>Issue of RFP</td>
<td>November 13, 2018</td>
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<tr>
<td>Pre-Proposal Conference</td>
<td>November 29, 2018</td>
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Deadline to Submit Written Questions | December 5, 2018
Deadline to Submit Intent to Respond (optional) | December 5, 2018
Response to Written Questions/RFP Amendments | December 18, 2018
Submission of Proposals | February 12, 2019

--Jake asked for questions. None were offered.
--Jake commented on how busy 2018 was, and thanked Christina and her team.

**Moving Forward with Priorities: Jake Stein**

--The list of priorities is attached at the end of the minutes
--Jake Stein: How can we advise and how can we assist?
--#1 This is our overarching goal. The filter through which our activities run.
--#2 Is this something that we can have an impact on? Is it something we want to focus on and how would this look?
--Mariann Frigo: this is folded into the revenue stream because of the coding and billing which impacts how we are defined.
--Christina Commons: The service delivery model shouldn’t change but maybe the billing should.

--Jake Stein: Maybe this falls into a bigger category of revenue recovery.
--Mariann Frigo: Prior authorizations might start at intake.
--Christina Commons: focus of the group might take the recommendations and put it into a format that could inform what we do
--Jake Stein: Sounds like we have a fiscal committee
--Representative Clere: Wat would a fiscal committee do?

Jake Stein: Provide advocacy around things like provider reimbursement rates?

Is there anything we could do to make an increase in funding happen?
--Representative Clere: Some group needs to identify that funding is an issue and that comes from advocacy from the various groups around the room
--Jake Stein: There has been a lot of work done that could be used for advocacy
--Mariann Frigo: Is there any reason you would stop third party billing?
--Christina Commons: There is value added from this group. How to add practices & procedures to improve the revenue recovery…enhance or alleviate the difficulty we are having accessing 3rd party liability issues we are having.
--Representative Clere: Ultimately you need to have policies and procedures in place to bill.
--Christina Commons: Some do third party billing at their places of business. That would be informative to us. Parents have provided feedback that has promoted change.
--Barb Blain: We need a core body of information to figure out how to approach this, the wealth of knowledge in the stakeholders is valuable.

1. --Jennifer Owens: I took #2 (from priorities list: Transition from medical model (First Steps) to educational model. (Christina reminded the council that First Steps is a developmental model which uses home-based, routines-based intervention) to mean professional development on the philosophical models
--Thomas Fisher: My interpretation was that it was trying to help the smooth the transition from First Steps to public schools

--Jake Stein reviewed the top four topics:
1. revenue recovery
2. professional development
3. advocacy
4. transition

--Christina Commons: There is already a group of early childhood professionals from state organizations that are developing guiding principles for transition. Maybe we should wait until things get worked out on a state level then bring them to you for help on how to implement.
--Karen Carradine: Transition fits into so many areas.
--Christina Commons: It might be better to wait for conclusions from the state groups.
--Stacey Williams: Seems like this is not the biggest priority since another state-level group is dealing with it.
--Stacey Williams: Advocacy seems to be a huge priority.
--Representative Clere: you need to be in regular contact with your legislators about First Steps.
--Barb Blain: do we need to be to attending to the needs of the RFP?

Advocacy small group
Brittnee Smith
Stacy Williams
Thomas Fisher
ARC Kim Dodson
INARF Katy Stafford-Cunningham
Ed Clere

Comments from group
1. Suggested ride-alongs to get legislators out there
2. Leverage the folks in your organization
3. Stacy Williams will distribute a website
4. Thomas Fisher displayed a list of legislators printed by the Chamber of Commerce

Revenue Recovery small group
Barb Blain
Joshua Bougie
Mariann Frigo
Brittnee Smith
Jason Berty

Professional Development small group
Karen Carradine,
Jessica Tomasino,
Shirley Payne,
Mariann Frigo,
Jennifer Owens,
Megan Drewiecki
Connie Young

Later additions
Katherine Hargreaves
Katie Herron
2019 Meeting Dates
It was decided at our May meeting that the ICC would meet six times in the next calendar year on the second Wednesday of the month. Meeting dates for 2019 are: January 9, March 13, May 8, July 10, September 11, and November 13.

Public Comment
No comments were offered.

Adjourn
The meeting was adjourned at 2:10.

Attachments:
Priority topics in order of most to least important as rated by the group

1. Advise the First Steps coordinator in a way that leads to change
2. Transition from medical model (First Steps) to educational model. (Christina reminded the council that First Steps is a developmental model which uses home-based, routines-based intervention)
3. Be proactive-knowledge of need & plan to address
4. Review policies around practices such as service delivery, frequency of appointments
5. Improve family commitment to First Steps
6. Foster broad community engagement
7. Awareness campaign
8. Lack of providers
9. Funding