The UPDATE

News and Information for MA EI providers! September 2013



Reminders from Patti:

Mark your Calendars:

FY14 Annual Report due date –The deadline for completing and submitting this file to your EI Regional Specialist via SecureMail is **Friday, September 20, 2013.**

El Program Directors Meeting

The Department will be holding an EI Program Director Training on Thursday, October 10 from 10am – 3pm at the Wachusett Inn in Westminster, MA.

The training agenda will provide an overview of the Massachusetts Early Intervention General Supervision/Monitoring Process and the Federal Results Driven Accountability - State Systems Improvement Plan (Indicator 11). States will be required to create a dynamic plan to guide *improvement as a system* and not by discrete indicator. The State's 2015 SPP/APR submission must include a multi-year State Systemic Improvement Plan that focuses on improving results for infants and toddlers with disabilities and their families.

Participants will have an opportunity to provide input into the state's identifying and analyzing key data to determine the areas of improvement.

Registration is limited to Massachusetts Early Intervention Program Directors and Administrative staff. Programs are welcome to register staff members such as Team Leaders or Supervisors to participate in the training.

Each program will be allowed to register two individuals to attend the training.

Please review the overview of the training and register on the Early Intervention Training Calendar at www.eitrainingcenter.org.



Information from the EI Data Manager... Jean Shimer



FY14 TSS Update:

The new version of the Transition Survey System is ready and has been sent to about two-thirds of the EI programs. The following provides information regarding the new TSS system:

- Programs will NOT be out-of-compliance for the DESE Notification due to transmission delays to
 DPH because of the delay in installing the new TSS. However, once you have received your new
 TSS it is expected that all LEA Referrals that occurred on or after 7/1/13 be entered within TWO
 weeks from the date of your receipt of the new TSS. Any record entered during this two week
 period will not be out of compliance for the DESE Notification.
- All of your Fiscal Year 2013 TSS records have been or will be migrated into the new
 TSS. Therefore, if you have not entered the TPC information for children referred to an LEA in
 fiscal year 2013 you will be able to do so using the new TSS.
- If you have not been upgraded to the new TSS:
 - OPH will need to know which operating system (go to Control Panel and double click System) and office package (select Start, Programs, Microsoft Office-Microsoft Office Access will show 2003, 2007 or 2010) is on the PC where the TSS will be installed (send Linda Mosesso this information as soon as possible):
 - Windows XP with Microsoft Office 2003 OR
 - Windows 7 with Microsoft Office 2007, 2010 or 2013
 - You will need to have administrative rights on the PC where the TSS will be installed. The
 installation needs to be done at the program by someone who knows Windows Explorer
 (not Internet Explorer) and knows how to manage files and folders within Windows
 Explorer.
 - Linda Mosesso at DPH will contact you for implementation and will walk you though the installation process. If you would like to receive the new TSS immediately you may contact Linda Mosesso at (617) 624-5521 at any time.

TSS FAQ's

1. What should be entered into the TSS if a family initially consents to a school referral, then later in the process decides not to continue with the Part B transition process and the convening of a TPC with the schools?



The program should go back into the TSS record for this child and select the Opt Out option. The TSS will automatically delete all LEA referral data from the TSS database. However, since an LEA referral did occur both the local LEA and DESE will have a record of referral for this child.

2. If we receive a late referral, do not develop an IFSP, but recommend a school referral and the parent chooses to contact school system directly is that considered an LEA referral? Do we need to enter this information into the TSS Application?

The Federal definition of a late referral is a child whose IFSP is signed at 33 months or later. For a child whose IFSP is signed at 32 months or sooner federal timeline requirements still need to be met (9 months – 90 days for LEA referral and SEA notification by 90 days).

Yes, the program should enter the recommended referral into the TSS if parental consent is obtained. The TSS does allow and we do expect providers to input late referrals referred to an LEA even if the child does not have an IFSP. So, yes, they should enter it into the TSS. This is considered an LEA referral because the program did recommend the referral to the parent. Who makes the referral is not a consideration. The program should enter the date according to what the family tells the program regarding when they will make that phone call.

3. If we have a family that no shows the TPC meeting because we recently lost touch with them but have not discharged the in EIIS, should we complete the TSS TPC form right away or should we wait? If we do not locate the family and no TPC occurs, should we complete the TSS TPC form saying we were unable to locate family when we do the EIIS discharge form?

The program should follow their normal protocol in trying to locate families documenting their efforts in the child's record, and complete the TSS TPC form stating they were unable to locate the family when they do the EIIS discharge. There is no time constraint in getting the completed TPC question to DPH, completing it at the time of discharge is fine.

4. If an initial IFSP is developed with a family of a child who is 32 months, but the first service does not occur until the child is 33 months of age; the program meets the Service Timeliness compliancy timeframe because services occur within 30 days of the IFSP signature but does not meet the LEA Referral or TPC compliancy because the discussion of the LEA referral occurs at the first home visit after the IFSP meeting. Please advise.

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Programs should not let data requirements supersede appropriate clinical practice. For children referred at 30 months or older, and are presumed to be "potentially eligible" for Part B services, programs should

DPH EI NEWSLETTER: September 2013 Page 3 of 6

have the discussion with family regarding the LEA referral as soon as possible. This may be at intake/first visit; at the time of the evaluation/assessment once eligibility is determined; or at the IFSP signature/meeting if clinically appropriate. Once provided with the information the family may choose to wait until a later time before making the referral to the LEA, in this case, the program should document "family choice" as the reason for the late LEA notification or TPC.

EITC UPDATE



Important Reminder: As of December 31, 2013, The EITC will only accept CEIS portfolios in the 2012 format. If you are preparing your portfolio in the CEIS 2002 format, please be sure you are able to submit it to the EITC by the end of 2013. If you are unable to submit by then, you must revise it and submit under the CEIS 2012 format.

Shishmanian Fellowship Funding: NOW available!

The Early Intervention Training Center (EITC) is now accepting applications for 2013-2014 Shishmanian Fellowships. Fellowships of up to \$2,000 for students and senior practitioners are available. **The due date for applications is October 18, 2013.** Applications **must be received** at the Department of Public Health by this date. Any applications received after this date will not be considered.

Senior Practitioner Fellowships provide experienced early interventionists time and resources to enhance their professional development. Senior Practitioner Projects funded in previous years include: Pediatric Yoga Therapy; Hanen training; support for NICU breastfeeding; assisted communication applications; infant massage training; training in the SCERTS model for assisting children with ASD and their families; a music therapy curriculum, and many other topics.

Student Fellowships are available to individuals enrolled in an accredited college program that will lead to a degree in Early Intervention, early childhood development, special education, nursing, speech and language pathology, social work, physical therapy, occupational therapy or psychology. Fellowships are granted for use during the 2013-2014 academic year, and must support a **practicum** at a DPH-certified Early Intervention program.

Application forms are available at:

www.eitrainingcenter.org. Go to the "Professional Development" tab and click on "Shishmanian Fellowships."

Contact Susan Breen at <u>Susan.Breen@state.ma.us</u> for any questions.

The Shishmanian Fellowships are funded by Early Intervention Services, Division for Perinatal, Early Childhood and Special Health Needs at the Massachusetts Department of Public Health.

Specialty Services Updates from Tracy Osbahr

Many children with autism spectrum disorders have difficulty with sleep. An informational booklet is designed to provide parents with strategies to improve sleep in their child affected by ASD. The suggestions in this tool kit are based on both research and the clinical experience of sleep experts: http://www.autismspeaks.org/science/resources-programs/autism-treatment-network/tools-you-can-use/sleep-tool-kit

New England Spina Bifida Conference: Sept. 21st, 2013, Sturbridge.

The Spina Bifida Association of Connecticut and the Spina Bifida Association of Greater New England host this family conference.

Keynote Speakers: Shut Up About Your Perfect Kid! Authors Gina Gallagher and Patricia Konjoian, Authors of Shut up about Your Perfect Kid: a Survival Guide for Ordinary Parents of Special Children and creators of the "Movement of Imperfection".

Kids Camp: For children up to 18 years of age, with or without Spina Bifida; siblings are also integrated into the Kids Camp program.

Conference fee is \$30 per person, with a maximum per family cap of \$120. For more information contact 866-374-6338 or email Debra@sitesolutionsworldwide.com.

To register visit The Spina Bifida Association of New England Event Page.



The Food and Drug Administration is warning consumers that a therapy often marketed for treating autism, cerebral palsy and other conditions is unproven and may "endanger their health." Federal regulators said that contrary to many claims on the Internet, hyperbaric oxygen therapy is not clinically proven to cure or effectively treat the developmental disorders and many other conditions.

Hyperbaric oxygen therapy is FDA approved for thirteen different uses including the treatment of thermal burns, carbon monoxide poisoning and decompression sickness that's sometimes experienced by divers. In issuing the consumer alert, regulators listed more than a dozen conditions ranging from autism and cerebral palsy to cancer, AIDS, Alzheimer's disease and hepatitis for which the therapy is marketed even though the FDA has not approved such uses.

Possible risks of hyperbaric oxygen therapy include sinus pain, ear pressure or joint pain as well as more serious problems like paralysis or air embolism, which can obstruct circulation in the body, the FDA said. This is not the first time a treatment advertised as helping those with autism has been specifically called out by the FDA. In 2010, the agency told eight businesses to stop marketing chelation products to those with autism and other conditions citing serious side effects including death.

NCSEAM FAMILY SURVEY REMINDERS...

October is NCSEAM Family Survey distribution month.



The 2013/2014 shipment of Family Surveys, cover flyers and self-addressed, stamped envelopes have been delivered to programs. Lists of eligible children and families were sent out last week on the secure email delivery system. These are children who have been enrolled in EI for at least **six** months, whose families did not fill out a NCSEAM Survey last March. Families are only expected to complete **one** Survey a year.

Please note that there are enough Surveys for **two** distributions, in **October 2013** and **March 2014**. The number of Surveys received by each program is based on the most current EIIS data through July. We respectfully ask that each program find a safe place to store your Surveys so that you will have them for **both** distributions. We will have some extra Surveys available here at DPH for programs that run short.

Tools to assist Service Coordinators to explain the Survey are available on the Early Intervention Parent Leadership Project website at: www.eiplp.org

Families looking for a visual support can view a You Tube video that walks them through the process of receiving, completing and returning their surveys.

The video is available at: http://youtu.be/Gd5nnKOrkIO

Questions or concerns, contact Suzanne Gottlieb at: 617-624-5979 or suzanne.gottlieb@state.ma.us.