The UPDATE

News and Information for Massachusetts EI Providers December 2014



On behalf of all the staff at the Department of Public Health's Early Intervention Program we thank you for all of your hard work, advocacy and commitment to improving child and family outcomes. We wish you all Happy Holidays and a joyous and peaceful New Year.

Important Dates...Mark your Calendar!

December 16, 2014: Deadline for EI Program Applications to become Trauma Informed Agencies.

December 23, 2014: EI Monthly Webinar has been cancelled. We will resume our schedule of the 4th Tuesday of the month on January 27, 2015

January 8, 2015: ICC Meeting, Best Western Royal Plaza Hotel, Marlboro, MA—Continuing the theme of Trauma Informed Early Childhood System

March 25, 2015: Save the Date - DPH EI Program Director Session (Additional information regarding the content and agenda will be forthcoming)



Smoke Free Families—Update

Ken Mayer is the new Tobacco Education and Treatment Specialist at IHR, in the position formerly held by Lauren Hakala. IHR has been directly funded by the MA Tobacco Cessation and Prevention (MTCP) Program since 2008 for 2 initiatives. First, as the Smoke Free Families Initiative, which trained home visiting staff in statewide programs such as Early Intervention to address and reduce secondhand smoke exposure among families seen in these services. In FY 2015, this program has become the Behavioral Health and Human Services Settings Smoking Cessation Capacity Building and Technical Assistance Project. With a primary focus on assessing client cessation needs and building environmental supports and capacity for addressing and treating tobacco use disorders in behavioral health settings. This new focus reflects MTCP's commitment to addressing health disparities caused by tobacco use, in this case among people with mental health disorders who use tobacco at 3-4 times the rate of the general population, and suffer disability and death at younger ages.

Work with Early Intervention will continue in the following ways: IHR can offer limited training for agencies regarding the impact of second and third hand smoke on children and families in the EI population. An "on-line training" will be available by Jan. 15, 2015. The training addresses EI concerns with both data and resources, and suggested ways to approach smokers that increase the likelihood that they will reduce the negative effects of second hand smoke. Consultation and technical assistance can be designed to meet both the training concerns and available staff time and will assist organizations in meeting new EI Operational standards, which include the following:

Training for staff in the health risks for children who are exposed to second hand smoke.

Provision of free second hand smoke information and quit-smoking resources to families.

During the first face-to-face meeting, asking all families about children's exposure to secondhand smoke and about parent/caregiver tobacco use status

Recommended strategies for staff on addressing secondhand smoke exposure with families.

Ken Mayer can be reached at (617) 661-3991, ext.120 or at kennethmayer@healthrecovery.org.

EITC Updates



UMASS BDI-2 study:

As you know UMASS Boston has received a grant to complete a research study on the use of the BDI-2 in our EI system. We are partnering with them to provide technical support to the project, however we will NOT be viewing or coding video and we will NOT be receiving feedback on individual videos or programs. We will be receiving aggregate data analysis and summary reports to help to inform our training and technical assistance efforts through the EI Training Center.

We are encouraging each EI program in the state to submit 1 video to the project to allow for a comprehensive representation of programs' use of the BDI-2.

Consent forms and additional information was sent out to the field on 12/2/14.

Please contact either Noah Feldman <u>noah.feldman@state.ma.us</u> or Angi Stone-MacDonald at 617.287.7316 with questions about this project.

SAFE SLEEP Initiative:

Program Directors should be expecting to hear from their assigned Safe Sleep facilitators before the end of the calendar year. Please work to schedule with them. When possible, program staff meeting schedules were matched with the facilitator schedule. ALL EI programs must complete the face to face training by 6/20/15.

Contact Noah Feldman at noah.feldman@state.ma.us or 617.624.5532 with any questions.

Family Centered Service Coordination Workshop:

January 6 2015 in West Boylston, snow date is January 7th

Fetal Alcohol Spectrum Disorders: Diagnosis, Support and Intervention Workshop

The Early Intervention Training Center is pleased to offer a workshop on Fetal Alcohol Spectrum Disorders entitled Fetal Alcohol Spectrum Disorders: Diagnosis, Support and Intervention

The workshop is designed for early intervention providers, other early childhood providers and parents, and will provide them with a definition of Fetal Alcohol Spectrum Disorders (FASD). The facilitators will distinguish FASD from other diagnoses such as Neonatal Abstinence Syndrome (NAS). They will also review the causes and manifestations of FASD, and identify associated red flags as well as more subtle developmental challenges associated with the diagnosis. Strategies for seeking an appropriate diagnosis and for discussing the condition with colleagues and parents will be provided.

The speakers will be:

Barbara Morse, Ph.D., Founding Member, Massachusetts FASD Task Force, and former director of the Fetal Alcohol Education Program at Boston University School of Medicine

Colleen Ciccarello is a Licensed Marriage and Family Therapist and Certified Early Intervention Specialist who has supported families in mental health as well as EI settings. She is a member of the Massachusetts FASD Task Force

The workshop will be held Wednesday, January 14th at Criterion Valley EI Program 375 Fortune Boulevard Milford, Massachusetts 01757. Coffee and registration is at 9AM the workshop will run 9:30 AM to 12:30 PM

To register, please visit the Early Intervention Training Center web site at www.eitrainingcenter.org and click Calendar/Registration

Data Manager Updates

Child Outcome Report

DPH has developed a program and child-level Child Outcome report that is currently being reviewed by several program people from the ECO Stakeholders group. Their feedback will be incorporated into the final report prior to distribution to EI programs. DPH will be creating both fiscal year 2013 and 2014 Child Outcome reports for programs.

EI Programs Wanted - SASID Project

The purpose of the Early Intervention/SASID project is to issue a state assigned student identifier (SASID) to children participating in early intervention programs with the long-term goal of tracking and evaluating educational and developmental outcomes for these children, improving delivery of services and determining cost savings.

The Department of Public Health, the Executive Office of Education and the Department of Elementary and Secondary Education have been working collaboratively over the past year to develop the SASID Assignment Pilot project, design and develop a system for collecting and reporting consent data to DESE for SASID assignment and provide training to pilot sites. Participation of a family in this pilot program is contingent upon parental authorization to release data to DESE that identifies the parent's child as an EI participant.

The Department of Public Health is interested in expanding the SASID project to include an additional 15 programs in January with the objective that all programs participate by the end of fiscal year 2016. If your program is interested in participating in this very exciting project then please contact Patti Fougere at (617) 624-5975 or patti.fougere@state.ma.us.

Specialty Services Update

"If You Think Your Child has Both a Vision and Hearing Loss" Brochure Update

The "If you think your child has both a vision and hearing loss" brochure has been updated by the Specialty Services Committee of the ICC. This brochure is intended as a resource for both families and staff in the EI system. Visit www.eiplp.org/documents/visionhearing2014.pdf to view and print copies!

What is Early Intervention?

Early Intervention is a program sponsored by the Massachusetts Department of Public Health (MDPH) which helps parents of children birth to three to recognize and understand their child's particular developmental needs, and teaches them ways to help their child grow.

The Early Intervention team works with the family. Together they determine what type of help would be most beneficial, and put together an Individualized Family Service Plan (IFSP). The IFSP specifies all the education, training and support services a family will receive to best help their child

Specialized services for a child who is deafblind or has a combination of vision and hearing loss can be part of your IFSP.

Who are Specialty Providers?

Specialty providers are people with training in deafblindness, vision loss, hearing loss, and infant/toddler development who will work with your family and early intervention program They can provide:

- Information about deafblindness, communication development, and various educational approaches
- Activities for language and communication development
- Support from other families with children who have a vision and hearing
- Help in planning for the transition to preschool

Otolaryngologists (ORL) are physicians who specialize in ear, nose and throat (ENT) conditions, provide clearance for hearing aid fittings, treat children with persistent middle ear problems, and provide medical or surgical interventions.

Audiologists are trained to diagnose hearing loss, evaluate hearing levels and abilities and recommend hearing aids and listening devices.

Teachers of the Deaf are trained to teach children who are deaf or hard of hearing using one or more specialized educational approaches.

Deathind Specialists are trained in the field of deathlindness and multiple disabilities with emphasis on communication development and the impact of vision and hearing loss on learning and program development.

Speech/Language Pathologists are trained to evaluate and promote speech and language development. Some have specialized training and experience in working with children who are deaf, hard of hearing, and deafblind.

Auditory Verbal Therapists are trained to develop spoken language primarily through the use of amplified residual hearing or cochlear implants.

Ophthalmologists provide medical assessment, monitor eye health, measure visual acuity and prescribe corrective lenses as appropriate. They are medical doctors who can prescribe medication and perform surgical procedures.

Teachers of the Visually Impaired

provide instruction in the use of vision within such daily routines as play, feeding, communication, motor and learning tasks. They develop activities and adaptations to help your child use his/her vision as efficiently as possible. They can teach compensatory skills (like the use of touch) and can help you understand how the vision loss may affect your child's development. They may consult with other service providers such as doctors or therapists.

Optometrists measure visual acuity and provide general eye exams for vision skills, low vision assessments and prescriptions for low vision aids.

Certified Orientation and Mobility
Specialists assess the effects of visual impairments on a child's motor and movement skills. They help children develop the skills they need to move independently and safely within their daily environment.

What are the costs?

Early Intervention is supported by the Department of Public Health and health insurance companies.

Case management services through the Massachusetts Commission for the Blind and Massachusetts Commission for the Deaf and Hard of Hearing are provided at no cost to families, as are technical assistance and consultation from the New England Center Deafblind Project.

2014
Massachusetts Department of Public Health
Specialty Service Committee

If you think your child has both a vision and hearing loss



Remember!
Much of a child's
most important learning
takes place in the first
three years. If you have
questions about your
child's vision and hearing,
get help now!

Transportation Update—Webinar FAQ

Transportation for MassHealth Members Attending Early Intervention Programs FAQ - 2014

1. If a child on MassHealth goes off and then goes back on to MassHealth, would the program need to submit a new PT-1 form?

No, as long as the child continues to be on a MassHealth product with a transportation benefit. Those products include MH Standard, Care Plus and CommonHealth. Claims submitted to MassHealth during a time that the child was not on a MassHealth product would be denied and submitted to DPH.

2. What if MassHealth is a child's secondary insurance not their primary- then what happens?

As long as the child is covered by a MassHealth Product with the transportation benefit regardless if it is a primary or secondary insurance, the program should complete the PT-1 form for the claim to be covered by MassHealth.

3. What does non emergency transportation mean?

Any ambulatory transportation such as livery, chair cars, taxis, vans, etc. are considered non emergency transportation.

4. Which MassHealth products have a transportation benefit?

Any child on Mass Health Standard, Care Plus or CommonHealth would be eligible for non emergency transportation as part of their benefit package. For additional information regarding MassHealth eligibility categories and associated services, the provider regulations can be found at the following link – http://www.mass.gov/eohhs/docs/masshealth/regs-provider/regs-allprovider.pdf

Specifically, pages 1-6 through 1-16 describes the different MassHealth eligibility categories.

5. How does staff get approved by CMS to authorize transportation?

MassHealth will be outreaching provider types approved by CMS to "order/refer/prescribe" to have them enroll as provders that can order/refer/prescribe medical services including transportation.

6. Would a child on MassHealth attending an EI community child group with a PT-1 form is in place, need another PT-1 form completed if a service is added to the IFSP that requires transportation, i.e. a center based individual?

A new PT-1 would not need to be completed. The current PT-1 form would need to be updated indicating the additional service requiring transportation.

7. Will physicians be informed and by whom, of this new requirement and process for authorizing EI transportation?

Informing Physicians and other approved provider types will be informed by MassHealth as they do outreach and raise awareness of this new process. In addition, EI programs should start informing families and pediatricians as the process continues to roll out.

8. How will we know if a child PT-1 has been approved?

The RTA will know if there is an approved PT-1 in the system in order to pay the claim. If there is not PT-1 in place, the claim will come to the Department.

9. Will there be any training for EI program staff regarding this new requirement?

The Department of Public Health will continue to provide updates through the monthly newsletter and webinars for program staff.

Please continue to submit your questions to the Department to be addressed in upcoming communication opportunities.

Survey of Postpartum Depression Screening Practices

Rebecca Lassell, MOT, OTR an occupational therapy fellow from the Indiana—LEND Program is working with Fegyi Kuo, DHS, OTR, CPRP, Stephen Koch, PhD, HSPP and the Riley Child Development Center, Department of Pediatrics at the Indiana University School of Medicine collecting survey responses regarding current EI provider screening practices surrounding postpartum depression. This survey is targeted towards EI providers of all disciplines who work with mothers of infants from 0—12 months in age. Please feel free to share this survey with your EI network of friends and colleagues. The survey takes about 10 minutes to complete and can be accessed via Survey Monkey at www.surveymonkey.com/s/63WW6PD. Please respond to the survey by December 14, 2014. Thank you in advance.



Department of Developmental Services

Eligibility Update

The department is pleased to announce that under a newly enacted law, it will begin to serve adults with Autism Spectrum Disorder, Prader-Willi and Smith-Magenis Syndromes (and who do not have an intellectual disability) beginning this year. The Department is in the process of developing regulations to implement the law, and will post a notice of intent to conduct public hearings on those regulations in this space. New eligibility applications will be available soon and will also be posted on this website (as well as available through the DDS Regional Eligibility Teams. The Department expects to begin to provide Community Developmental Disability Supports for these individuals this year, and will continue to develop an array of services to meet the unique needs of this population as we gather information and learn more about service needs. More information? Check out www.mass.gov/eohhs/gov/departments/dds/

Questions, comments or feedback?

Please contact Patti Fougere patti.fougere@state.ma.us 617.624.5975