# **The UPDATE** News and Information for MA EI providers! November 2013



**Reminders from Patti:** 



**Important Dates:** 

### November 8, 2013

Deadline for corrections to the Preliminary Transition reports. The two Transition Reports [A1 and A2] are based on EIIS data received as of October 10, 2013. If you have any questions regarding corrections or clarifications please contact Jean Shimer or your Regional Specialist.

# Thursday November 14, 2013: ICC Meeting, presentation on Let's Participate!

An Assistive Technology Pilot Program that is underway through the Boston Regional Consultation Program.

### Tuesday, November 26, 2013: DPH Webinar

TOPIC: Early Intervention Training Center: Updates on Face-to-Face Workshops, On-line Trainings and other initiatives.

### December 1, 2013

Corrections to the Personnel data-base should be submitted to Susan Breen, MA Department of Public Health, 250 Washington Street-5th Floor, Boston, MA 02108. Any questions may also be addressed to Susan at 617-624-5419 or Susan.Breen@state.ma.us

# Announcements:

The Department of Public Health will be ordering additional **BDI-2 scoring booklets** for the remainder of FY14. The same data source utilized last year, the number of initial and annual evaluations by program will be used to determine the amount of scoring booklets per program. The Department is currently encumbering the money to purchase the booklets. Once the funds have been encumbered we will immediately place an order with Riverside publishing who ship the booklets directly to programs. We will keep you informed of an approximate date of the purchase as soon as it is available.

# Reminder:

If the Michigan is used as the initial eligibility tool for a child who has been re-referred or transferred from another program and the eligibility timeline has expired, then the program should re-evaluate using the BDI-2. All eligibility evaluations should now be completed utilizing the BDI-2.

### **Important Information - TB Test**

The Massachusetts Department of Public Health has been made aware of a current national shortage of TUBERSOL<sup>®</sup>, one of two purified-protein derivative (PPD) tuberculin products licensed by the U.S. Food and Drug Administration (FDA) for detecting TB infection. Limited availability of this reagent was announced recently by its manufacturer and this may last for an undetermined period of time. Based on the current situation, **EI programs will have one year from today to have all newly-hired staff tested for TB**. However if they are considered **high risk or have tested positive in the past**, they would need to show evidence of a clear chest x-ray.

If you have any questions or need further clarification please contact your regional specialist.

# EITC UPDATE



**Important Reminder:** As of December 31, 2013, The EITC will <u>only</u> accept CEIS portfolios in the <u>2012</u> 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.

**POLICY CHANGE**: There has been an alteration in the policy regarding calculation of the due date of a CEIS portfolio. **SEE MEMO** attached to the Update email and add it to you Policy and Procedure binder.

**BDI-2** Roundtables: The EITC would like to offer up to four regional roundtables to support the on-going administration and interpretation of the BDI-2 in the MA EI assessment/evaluation process. These roundtables will be facilitated by two of the BDI-2 mentors or EITC staff. Please consider volunteering to host a roundtable that would be open to other staff in your region. Please contact Noah Feldman at <u>nfeldman@state.ma.us</u> with your interest or any questions.

# The Pediatric Palliative Care Network Serving children with life-limiting illnesses and their families FAQ

#### What is palliative care?

The goal of the Pediatric Palliative Care Network is to support and improve the quality of life of the entire family through its support and services while they are caring for a medically fragile child. The Pediatric Palliative Care Network serves the unmet physical, emotional, social and spiritual needs of children in Massachusetts with life-limiting illnesses.

#### What services are provided?

Palliative care services include but are not limited to: nursing; assessment and case management; spiritual care; social services; sibling support; volunteer support; respite care; 24/7 nurse on call; and complementary therapies such as music, art, massage and others. All of these services are provided in the home.

### Who is part of the care network?

The Pediatric Palliative Care Network is made up of ten licensed providers throughout the state — all skilled in pediatric palliative care. These unique programs are located within hospice organizations because these professionals are experienced in enhancing quality of life and managing symptoms. The difference between hospice and palliative care is that hospice is only for end of life; while palliative care services are provide comfort support all along the course of the illness or disease. Everyone in the Pediatric Palliative Care Network plays an important role, including the child, family, physicians, nurses, social workers, counselors and volunteers. The Network is funded and supported by the Massachusetts Department of Public Health.

### How can my child be referred to the network?

Referrals to contracted palliative care hospices in the network may be made by a variety of people in the child's care network -- the doctor or nurse and/or other health care professionals. Referrals may also be made by family members themselves.

### Is my child eligible?

In order for a child to receive palliative care, he/she must reside in Massachusetts, be pre-natal to the 19<sup>th</sup> birthday, and their physician must confirm that the child has a life-limiting diagnosis. A physician must state that the child has been diagnosed with an illness that could limit normal life expectancy such as advanced or progressive cancer, major organ failures, HIV, cystic fibrosis, progressive genetic, neurological or metabolic disorders, renal failure or severe cerebral palsy.

### How much will care cost?

The services of the Pediatric Palliative Care Network are provided at no cost to eligible children and their families if these services are not already covered by the child's health care plan.

# Will our regular doctor be involved in my child's care?

Yes. Your regular doctor and other members of your health care team will still care for your child.

To learn more about The Pediatric Palliative Care Network, you may contact any of the following:

- Jennifer Kenyon Bates, M.Ed., Director, 508-984-0617
- The Massachusetts Department of Public Health's Community Support Line at 1-800-882-1435. Interpreter services are available.
- Any of the participating providers of the Pediatric Palliative Care Network listed. www.mass.gov/ppcn
- pediatric.palliative.care@state.ma.us