

The UPDATE

News and Information for Massachusetts EI Providers February 2018



Important Dates...Mark your Calendar!

February 27, 2018; 10am—11am: Monthly EI Webinar: DPH Updates; Program Outcomes Report; PWN Round Table Discussions—"Take Aways"

March 8, 2018: Interagency Coordinating Council Meeting: Best Western Royal Plaza Hotel & Conference Center, Marlborough, MA

Communities of Practice: Skills for Having Difficult Conversations

(Presented by the Institute for Health & Recovery, to register visit www.eitrainingcenter.org)

February 13, 2018 in Tewksbury

March 20, 2018 in Taunton

April 27, 2018 in Milford

May 23, 2018 in Northampton



DPH Personnel Updates

Bureau of Family Health and Nutrition

Ron Benham, Director of the Bureau of Family Health & Nutrition will be retiring from his position on February 28, 2018. In his role as Part C Coordinator, Ron has provided leadership to the MA Early Intervention system for over 35 years. He was a strong advocate on the national level to support adequate funding and resources for states in the implementation of the Part C Programs. In his role as the Bureau Director, he provided direct oversight for 4 Divisions; WIC, Children and Youth with Special Health Care Needs; Perinatal, Infancy and Early Childhood; and Early Intervention.

Craig Andrade has been appointed as the new Director for the Bureau of Family Health and Nutrition.

Craig, LATC, RN, DrPH, is currently the Director of the Division of Health Access (DOHA) within the Bureau of Community Health and Prevention here at DPH. DOHA Programs include Adolescent Health and Youth Development, School Health Services, School-based Health Centers, the Sexual and Reproductive Health Program, the Office of Oral Health, the State Office of Rural Health and the Primary Care Workforce Center. Craig is also a founding member of the BCHAP Racial Equity Leadership Team (RELT). Previously, Craig was Associate Dean of Health and Wellness and Director of Student Health Services at Wheaton College in Norton, MA. He also served as a critical care and public health nurse at Boston Medical Center; as nurse manager and head athletic trainer at Buckingham Browne & Nichols School in Cambridge, MA; and owner/operator of Active Health, a private health and fitness company. Craig has a doctorate in public health from Boston University and is a registered nurse, athletic trainer, strength and condition specialist, and massage therapist. His research interests include behavioral risk management and resilience-building among children, adolescents and young adults.

Patti Fougere, MBA, CEID has become the Acting Director for MA Early Intervention effective February 4, 2018.

DPH Update, February 2018

EI Parent Leadership Project

We are sad to announce that **Darla Gundler**, Director of the Early Intervention Parent Leadership Project will be leaving the Department after over 20 years of steadfast service. Darla will be taking her many talents, skills and passion for family engagement to the National Technical Assistance Center: The Early Childhood Personnel Center (ECPC) at UCONN through UMass, Institute of Community Inclusion (ICI) where she will become a Senior Research Fellow: Senior Executive Leadership and Systems Manager working on providing resources to state early childhood programs. As part of the Leadership Team at ECPC Darla will provide oversight of leadership institutes for a variety of stakeholder groups including families. Please join us in congratulating Darla and thanking her for her dedication and support to families and the Massachusetts EI system.

The Early Intervention Parent Leadership Project will continue their commitment to support EI programs in their efforts to inform, educate and engage families. We've been around for 25 years and are going strong. We will have a new staff member joining us in March and will be hiring a new Project Director shortly. With questions or for information and support feel free to reach out to any of us.

Liz Cox: Statewide Training & TA Coordinator liz.cox@state.ma.us

Kris Martone-Levine: Media Coordinator kris.levine@state.ma.us

Faith Bombardier: Statewide Onsite Monitoring Coordinator/Regional Specialist faith.bombardier@state.ma.us

Suzanne Gottlieb: Director, Office of Family Initiatives suzanne.gottlieb@state.ma.us



DPH Updates

EI Transportation: PT-1 Tips

EI Programs should always select "Early Intervention" for all request types. The other request type options have different approval criteria which may result in the EI PT-1 being denied. In addition, if another request type is selected, the approved PT-1 may be sent to a different department (e.g., regular medical transportation) of the broker's office which may cause trips to be scheduled inappropriately as well as incorrect billing. Lastly, attached is the [PT-1 Facts Sheet](#) for additional tips on PT-1 submission. Please share with your staff.

EIIS Forms

The Department has received several questions regarding the completion of the EIIS forms. Please share the following with clinical staff gathering the information from families, so they understand the intent of the questions and how the information is being used. If you have further questions related to the intent of the EIIS questions, please contact your DPH Regional Specialist

1. "parent preferred language to receive information": what is the responsibility of the EI program if the parent answers that they prefer a language that we do not have the ability to provide for them?
The program should complete the question according to the parent's response. An accurate response allows DPH (and individual programs) to follow the demographics of families served and provides a data source to respond to trends in linguistic diversity.
2. What is DPH definition of "homeless" in regards to the new question on the referral form?
The definition of "homeless: found in Section IV D. of the EIOS (page 18) is as follows:
An infant and/or toddler and his/her parents will be considered homeless if:
 - a. The family lacks a fixed, regular, and adequate nighttime residence;
 - b. The family is sharing the home of other persons due to loss of housing, economic hardship, or a similar reason;
 - c. The family is living in a motel, hotel, campground, or emergency or transitional shelter, or the infant/toddler is abandoned in a hospital or is awaiting foster care placement;
 - d. The family is living in a public or private place not designed for or ordinarily used as a regular sleeping accommodation including, but not limited to cars, parks, public spaces, substandard housing, bus or train stations; or
 - e. The family is considered to be migratory workers and is living in any of the situations described above.

This definition aligns with the definition of homeless under the McKinney-Vento Act and would not include families who have a secondary residence (rental or purchased) of their choosing (vacation homes, staying with family members for extended periods of their own choosing) and not out of necessity (due to loss of housing; fire, flood, etc.). Staff completing EIIS forms should be aware of the definition in the EIOS.

New Web-based (EIIS/EIFS) System Update

The contracting process has begun with an identified vendor for the new Web-Based (EIIS/EIFS) System. Although the procurement process took longer than expected, we are eager to move forward with this project. We believe that it will provide benefits for our system at all levels. It will eliminate many of the redundancies in data collection and data entry and give local agencies and programs more access to their data.

Once a contract is finalized, we will begin the planning process for the development and implementation. At that point, we will update the timeline for the project, schedule stakeholder (WIP) meetings, and other opportunities for questions. We look forward to talking with you!

If you have any questions please contact Noah Feldman at noah.feldman@state.ma.us or 617-624-5532.

BDI—2 Information

The 2018 BDI-2 order form with the Mass state 10% discount code is now in Dropbox in the [BDI-2 fidelity folder](#). Please note, if you need to order individual manipulatives you will need to contact customer service at Houghton Mifflin Harcourt.

NOTE: the BDI-2 has a normative update version.

In 2016, Houghton Mifflin Harcourt™ released the **Battelle Developmental Inventory 2nd Edition - Normative Update (BDI-2™ NU)**. This update accommodates significant changes in demographic characteristics since 2000, the year in which the **BDI-2** original normative data was based.

In October 2016, DPH issued this information in the update:

At this time, Massachusetts Early Intervention will NOT be transitioning to use the Normative Update. This decision was made primarily due to the fiscal implications of doing this transition at this time. In order to make this change, programs would have had to purchase all new examiner manuals with the updated Appendices for scoring.

If there are any programs who are using the BDI-2 Data Manager, please note that these normative updates will be the DEFAULT in that system. You will have to ensure that you are using the original scoring tables.

If you would like more information about the normative update, please go to:

<http://learn.hmhco.com/bdi2nuannouncement>

If you purchase a full BDI-2 kit or the Examiner's Manual, please be sure you purchase the correct version.

NCSEAM Family Survey Update

The Department has received the aggregate report of results for Indicator 4, "Measuring Family Outcomes", for calendar year 2017. Results are obtained by analysis of the NCSEAM Family Survey. Our results show a slight increase from those of 2016. Thanks to all of you for your support of the dissemination and return of the Survey. Here is how we did.

Indicator 4A Percent of families who report that early intervention services helped them know their rights **86.7%**

Indicator 4B Percent of families who report that early intervention services helped them effectively communicate their children's needs **84.2%**

Indicator 4C Percent of families who report that early intervention services helped them help their child develop and learn **93.6%**

Individual program reports were mailed out on February 7. Please review the backside of your report, to see how families ranked specific items of the survey. DPH urges you to share these results with families and staff, to identify any areas where program improvement should be addressed. Staff of the Office of Family Initiatives/EIPLP and your regional specialist will all be glad to assist you in this activity.

The next NCSEAM survey distribution will take place in March 2018. Programs will receive lists of eligible children from Jean Shimer by mid-February. Each program should have enough surveys for the March dissemination.

We do have additional surveys available at DPH if you run short. If you need surveys, please contact Suzanne Gottlieb suzanne.gottlieb@state.ma.us.

EI Engagement for Families Impacted by Neonatal Abstinence Syndrome (NAS) & Substance Exposed Newborns (SEN): A Model of Support

The Department continues to support 10 DPH pilots working with their local hospitals to engage families of substance exposed newborns (SEN) and infants diagnosed with Neonatal Abstinence Syndrome (NAS) while still in the hospital setting. The hope is that by meeting them as a part of the continuum of medical care at this important time, families will be more likely to engage with EI than if the referral comes from another source later in the process (such as DCF). In addition to the original design of the pilot, several programs have added innovative practices to the grants such as meeting families prior to delivery - partnering with obstetricians and treatment programs - and creating a group specifically designed to bring families together with similar challenges.

In the course of their work, programs identified a concern that while many of the professionals they were interacting with were familiar with Early Intervention, they did not fully understand the depth of training, expertise, and services available on EI teams. A decision was made to develop an outreach paper that could be shared with a wide-range of community providers. The result is a paper entitled **Early Intervention Engagement for Families Impacted by Neonatal Abstinence Syndrome (NAS) & Substance Exposed Newborns (SEN): A Model of Support**. Our hope is that by distributing this to the professionals who also interact with families impacted by substance use, referrals and support for engagement with EI through better understanding of our model will occur earlier and more frequently.

The task force identified not only physician's offices, hospital staff, and treatment centers as potential recipients but also DCF, school nurses, early education and care providers, planned parenthood and women's health centers, domestic violence programs and others as potential recipients of this resource. It is important to note that this was NOT intended for distribution to families and will not be translated into other languages.

Each EIP will receive 10 copies of the NAS paper. We hope you find this a useful resource for community partners. The paper is also available in a printable PDF on the Parent Leadership website (www.eiplp.org) under Basic Information on EI/Marketing Materials/NAS/SEN Model of Support.

Closing the Referral Loop between MA EI Programs and Primary Care Providers

In the January 2018 webinar, Suzanne Gottlieb presented a description and outcomes of an initiative developed between the Massachusetts Title V Division for Children & Youth with Special Health Needs (DCYSHN) and the Part C Early Intervention Program. This initiative was an activity of the Massachusetts Systems Integration Project, a federal grant funded by the Maternal & Child Health Bureau (MCHB). It was designed to assist states in achieving a comprehensive, coordinated and integrated state and community system of services and supports for CYSHN and their families.



One requirement of the grant was for states to establish a referral loop procedure between the DCYSHN and another agency/system serving CYSHN. Massachusetts chose to study and improve the "close the loop" protocol between EI and health care providers referring children to EI by creating and piloting activities to ensure that referring medical providers knew the outcome of their referrals to EI.

Three EI programs participated in a pilot project. Each recruited a primary care provider who typically sent a large number of referrals to the EI program. A "close the loop" form was collaboratively developed. The form was shared with families and was used, with their consent, to let providers know results of their referrals.

Going forward, all EI programs are required to send a "close the referral loop" form stating the outcome of a referral from primary care providers. As of January 1, 2018 programs must indicate in EIIS that a close the loop form was sent. This will become part of the DPH monitoring process. This question can be found in the IFSP section of EIIS.

[Attached is the form](#) developed for the pilot. Programs are free to use this form or continue sending a form they already use. The Department recommends including the following data elements in whatever form programs choose to use.

1. Whether the referred children was seen
2. Whether referred child was eligible or not eligible for EI services
3. Whether an IFSP was developed
4. Whether services have started

For additional information about this new procedure, please contact Suzanne Gottlieb at suzanne.gottlieb@state.ma.us.



Forms & Materials

DPH Dropbox www.dropbox.com/sh/cpewylr7bcoefyv/AAA89_dDxWMwa0mb7Jj7gZ3fa?dl=0

MA Clearing House www.mass.gov/maclearinghouse



EITC Updates

Staffing

Emily Webb is currently on maternity leave. Please contact Noah Feldman (noah.feldman@state.ma.us) in her absence.

Supervisor Training Series

There is still room in our Supervisor Training Series: Parent Interviewing Skills Training in Taunton. It's not too late to register!

www.cvent.com/events/eitc-371-supervisor-training-series-the-parent-interviewing-skills-training/event-summary-03c8f68b0018422cae729e317ba3e435.aspx

Personnel Database Reconciliation

DPH will be completing a **Personnel Database Reconciliation** at the end of this month. Susan Breen will be emailing out your program's personnel list with instructions on how to update the report. Program Directors can expect this information on Friday 2/23/2018. The updated information will be **due to DPH by Wednesday 3/14/2018**.

Higher Education

To meet the needs of our system as well as our higher education partners DPH has decided to restructure the way in which we engage with higher education. In the past DPH, ICC Personnel Prep, and representatives from our approved higher education programs have met twice yearly to collaborate and discuss updates.

Recently we have been engaging with higher education more broadly. Programs that do not have approved higher education programs have been coming to our meetings and looking for ways to support the Mass EI system. They have engaged in research studies, created grab and go's, and supported programs with translation. However, our approved higher education partners still have requirements of their partnership that need to be met.

We have decided to put together a higher education taskforce that will meet quarterly. This task force will include DPH, higher education, and representatives from the EI system. The purpose of this group is to discuss and brainstorm ideas on how to partner better with higher education supporting EI and our system. These will be working meetings geared toward generating grant proposals, research, products, and partnerships that will support our system broadly. We hope to begin these meeting in the late spring.

In addition the Early Intervention Training Center will also be hosting an annual higher education retreat for our DPH approved higher education partners. It is expected that each school will send at least one representative, and this day will be focused on informing higher education about any DPH updates, new initiatives, and current priorities. We will then work on devising ways to better support students in the EI system and making sure that course curriculum reflects any changes that have been made in our system. Our first retreat will be held this fall.

If you or another staff person is interested in joining the higher education task force please email Emily Webb at emily.webb@state.ma.us and she will add you to the communication list.



Resources

Zika Webinars

The Department of Public Health has created 4 Web-based Presentations about What Massachusetts Healthcare Providers Need to Know About the Zika Virus. To view a flyer that you can post or share, [click here](#). The webinars are:

1. Overview of Zika Virus in Massachusetts
2. Impact on Reproductive Planning and Pregnancy
3. Recognizing and Diagnosing Zika-Associated Birth Defects
4. Beyond Microcephaly: Post-Delivery Follow-up for Zika-Exposed Infants

Institute for Health & Recovery (IHR)—Increases in Torticollis and Plagiocephaly Incidence in Infants with NAS

IHR wants to make sure EI staff know about recently published research showing increased incidence of torticollis and plagiocephaly in infants with NAS. EI staff are on the front lines of both prevention, and early diagnosis and treatment, since torticollis may not develop until months after the babies leave the hospital. Following are links to an article in the popular press <https://www.cincinnati.com/story/news/2018/01/23/opioid-exposed-babies-may-get-head-tilt-neck-condition-childrens-study-shows/1049462001/> as well as to the original study [http://www.jpeds.com/article/S0022-3476\(17\)31631-1/fulltext](http://www.jpeds.com/article/S0022-3476(17)31631-1/fulltext)

As always, please contact karenwelling@healthrecovery.org or karengould@healthrecovery.org for any training and technical assistance needs, and to get your hand-delivered (brief training included) Trauma-Informed Tip sheets.

39th Annual Report to Congress on the Implementation of the IDEA, 2016



Now you can download the [39th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2016](#) from the [ed.gov website](#). The report includes national and state-level exhibits about infants and toddlers, children, and students with disabilities served under IDEA Part C and Part B. The most recent data in the report represent the reporting periods associated with fall 2015 or school year 2014-15. Where exhibits present trend data, the oldest data are associated with fall 2006 or 2005-06.

In addition, the report presents summaries of

- findings and determinations resulting from OSEP reviews of state implementation of IDEA;
- special education research conducted under Part E of the *Education Services Reform Act of 2002*;
- national special education studies and evaluations conducted under IDEA section 664(a) and (c); and extent and progress of assessment of national activities related to determining the effectiveness of IDEA and improving its implementation, as required under IDEA section 664(b).

The report also contains three appendices.

- 1— Appendix A—Numbers of infants, toddlers, children, and students served under IDEA by age group and state and then by race/ethnicity and state
- 2— Appendix B—Information about states reporting serving children ages 3 through 5 and students ages 6 through 9 under the development delay category
- 3— Appendix C—State-level information on maintenance of effort (MOE) reduction and coordinated early intervening services (CEIS)

Previous editions of the annual report—from the 38th report, published in 2016, back to the 17th report, published in 1995—are also available at the [ed.gov website](#).

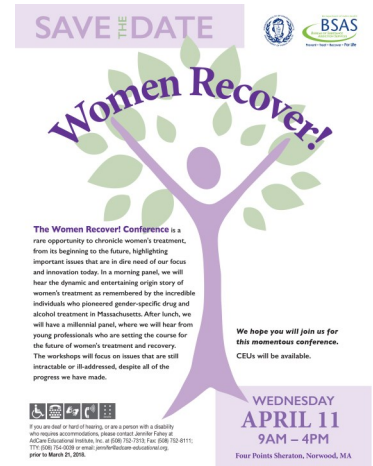


Events

The Women Recover! Conference Save the Date

This conference is designed for those with professional or personal experience in women's recovery from substance use disorder and related issues. All genders, ages, and backgrounds are welcome to attend! To view flyer, click on it.

Please share...registration for this event will open at the end of February 2018.



Perkins School for the Blind: Early Connections Conference Save the Date

<http://www.perkins.org/get-involved/events/early-connections>

Infant-Parent Mental Health Post-Certificate Graduate Program at UMass Boston

There are still a couple of spots left in Dr. Tronick's Infant-Parent Mental Health Post-Certificate Graduate Program at UMass Boston, starting March, 2018.

Ed Tronick's unique Infant-Parent Mental Health Postgraduate Certificate Program is offered through the psychology department at the University of Massachusetts, Boston. Fellows spend 12 interactive intensive 3-day weekends meeting every other month to learn first-hand from world luminaries and program faculty as well as each other. To learn more, visit www.umb.edu/academics/cla/psychology/professional_development/infant-parent-mental-health

For more information, or to inquire further, please email: ipmh@umb.edu or call Rouzan Khachatourian, 617-287-6996.



Comments, contributions or feedback, please contact:

Patti Fougere

Patti.fougere@state.ma.us

617-624-5975

Transportation for Early Intervention (EI) PT-1 Facts for Providers, Families and DPH

1. The EI Provider should submit a Transportation Request (TR) for all children attending their site that need transportation services. If a child is MassHealth eligible, a PT-1 should be submitted as well.
2. The EI Provider is responsible for the submission of the PT-1. This is completed electronically via the MassHealth Customer Web Portal at: <https://masshealth.ehs.state.ma.us/cwp/login.aspx>
3. When completing the PT-1 form or making any changes you must always select the PT-1 Type "**Early Intervention**" (never any other options, this includes never selecting change of address).
4. Prior to submitting the PT-1, providers must first confirm the member's residential address as well as an alternative pickup/drop off address if applicable. If the residential address is not the address currently on file with MassHealth, (it will auto-populate on the on-line PT-1 application) the member or guardian must update the address by contacting MassHealth and Social Security (if applicable). If the member has MassHealth through Social Security they will have to change their address with Social Security. EI Providers are not able to make this change. As a temporary work around, providers can put the current residential address in the "alternate address" area on the PT-1 form.
5. Address Changes — All MassHealth members utilizing transportation through the PT-1 will require new PT-1 forms for adjudication whenever they report a new residential address to MassHealth. To avoid any interruption in services, treating providers must submit new PT-1 requests within 30 days of the member's address change.
6. It can take up to 4 business days for the PT-1 to be processed. MassHealth customer service sends notification to the Broker, the participant and the EI Provider. The EI Provider can then coordinate with Broker.
7. Providers can check the status of the PT-1 application electronically at the Portal by clicking on "Search PT-1 request" under PT1 Request Management and then providing the information requested.
8. Once transportation is approved with a TR or PT-1, the Broker and the EI Provider must communicate with each other to initiate a start date, confirm the attendance schedule, pick up and drop off times, etc. The Broker and Program should not delay transportation due to a lack of routes or vendors. If you experience any delays in getting transportation started please contact the email or phone number below so that the issue can be addressed.
9. When transportation services need to be placed "on hold" for reasons such as hospitalization, vacations, etc., the EI Provider must notify the Broker immediately.
10. When a child is discharged from the program, the EI Provider must notify Broker of discharge immediately, there is no way to discontinue a PT-1 electronically.
11. If the EI Program is moving to a new location please submit new PT-1 forms for all children reflecting the new address. Please follow normal DPH procedures regarding new site approvals.
12. Complaints about transportation can be made by Participant, EI Provider or DPH directly to HST in order to ensure follow up. Complaints should be emailed to HSTComplaintIncident@massmail.state.ma.us.
13. EI providers with any issues or questions can also contact Vera Kirrane. She can be reached at 617-847-6556 or vera.kirrane@massmail.state.ma.us.
14. MassHealth Customer Service Center: 1-800-841-2900.