STATE INTERAGENCY COORDINATION COUNCIL – NOVEMBER 1, 2022

SD Birth to Three contributes to the success of children with developmental delays and their families by providing dynamic, individualized early intervention services and supports by building on family strengths through everyday routines and learning experiences.





South Dakota
Birth to Three
STATE INTERAGENCY
COORDINATING COUNCIL
AGENDA

Tuesday, November 1, 2022 | 10:30am CT Casey Tibbs Rodeo Center Fort Pierre, SD

ICC PURPOSE:

To advise and assist the Lead Agency regarding services for infants and toddlers with developmental delays or disabilities and their families.

Agenda Item	Dracantas	Documents	
Call Meeting to Order - Roll Call	Presenter Documents ICC Chair: Rochelle Holloway		
Approve Agenda	ICC Members	Agenda	
Approval of August 2022 Minutes	ICC Members 8/2022 M. Minutes		
Public Comment	If you are interested in providing public comment, please send notification to sarah.carter@state.sd.us or call (605)773.3678		
National Update	Sharon Walsh, ECTA		
FFY2021 SPP/APR	Birth to Three State Team		
Birth to Three Program Updates			
Next Meeting: Wednesday, January 18, 2023, 3:00pn	n CT		
Adjournment	ICC Members		

If you require a reasonable accommodation to participate in the meeting (e.g. sign language interpreter, materials in an alternative format), please submit your request in writing no later than 7 days prior to the meeting to ensure accommodations are available. Address requests to mailto: Melissa.manning@state.sd.us or call 605-773-3678.

ICC Agenda

ICC Roll Call

Member	Representation
Carla Miller	SD Parent Connection
Carrie Churchill	Department Health
Cindy Fisher	OLC Head Start
Cindy Michelson	Parent
Dawn Smith	DOE – McKinney-Vento
Debra Willert	DOE - SPED Part B 619
Gretchen Brodkorb	Div. Insurance
Jaze Sollars	Human Services
Jodi Berscheid	HS Collaboration Office
Joe Hauge	Provider – BHSS
JoLynn Bostrom	DSS Foster Care/CAPTA
Jordan Mounga	Parent

Member	Representation
Katherine Schmidt	Parent
OPEN	Parent
Kirsten Ducheneaux, PT	Provider
Laura Nordby	DSS Child Care/Mental Health
Wendy Honeycutt, OT	Provider
Carie Green, SDSU	Program Prep
Melanie Lundquist, SLP	Provider
Michelle Martin	Provider - District
Rochelle Holloway	Parent
Sarah Carter	Early Intervention
Senator Jessica Castleberry	Legislator
Valerie Kelly	DSS Medicaid

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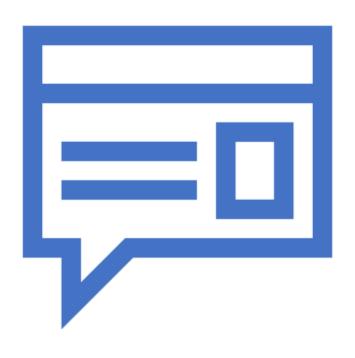
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ICC Agenda



PUBLIC COMMENT

SHARE YOUR NAME AND WHAT YOU WANT US TO KNOW ABOUT YOU AND WHY YOU ARE HERE.

PROVIDE YOUR PUBLIC COMMENT PLEASE KEEPING YOUR REMARKS TO 3-4 MINUTES.

EACH SPEAKER SHOULD REPRESENT NEW IDEA / CONCERN / POSITION.

THANK YOU FOR YOUR PARTICIPATION. THE ICC APPRECIATES YOUR COMMENTS, AND WE WILL CONSIDER THEM AS WE CONTINUE OUR WORK.

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ICC Agenda





SD ICC Meeting Federal Update

By: Sharon Walsh, ECTA November 1, 2022

Roundup of Major Action: 117th Congress

Bipartisan Successes

Infrastructure Investment and Jobs Act

 Carefully crafted "old school" bipartisan deal

Safer Communities Act

 Swiftly drafted legislation to respond to Uvalde, TX school shooting

Partisan Successes

American Rescue Plan Act

- 2021 COVID-relief priorities
 Inflation Reduction Act
- Significantly pared down version of Build Back Better Act



At-A-Glance: Infrastructure Investment and Jobs Act

Price Tag: \$550 billion

Key Provisions:

- Bulk of Funding for roads/bridges and transit
- \$73 billion to upgrade the electric grid
- \$65 billion for broadband, with a priority for rural broadband
- \$71 for climate change initiatives and environmental cleanup **Analysis:** not directly related to early childhood priorities, but broadband helpful for children and families



At-A-Glance: Safer Communities Act

Price Tag: \$13 billion

Key Provisions: First gun legislation enacted in recent history; major focus on mental health

- \$500m for School-Based Mental Health Demonstration Grants
- \$500m for School-Based Mental Health Services Grants
- \$1b through ESSA Title IV-A to improve school climate
- \$28m set-aside for trauma care in schools

Analysis: Mental health provisions are important. Disability community says mental health should not be tied to acts of gun violence



At-A-Glance: American Rescue Plan Act

Price tag: \$1.9 trillion

Key provisions:

- Targeted one-time only IDEA funds:
- \$2.5 billion for Part B
- \$200 million for Section 619
- \$250 million for Part C



Analysis: No part D funds is a lost opportunity for workforce



American Rescue Plan Also Included:

- \$350 billion for state, local, and territorial governments
- \$1 billion for Head Start
- \$1400 Stimulus checks for eligible individuals and families
- ♦\$25B for child care stabilization, \$15 billion for CCDBG, and \$3.55B in Child Care Entitlement to States

- Temporarily expanded Child Dependent Care Tax Credit (CDCTC) and expanded the Child Tax Credit
- 100,000 person public health corps and funding for community health centers/tribal health services
- ❖ 15% increase in SNAP benefits through September 2021
- *\$150 million for the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program.



At-A-Glance: Inflation Reduction Act

Price tag: \$700 billion

Key provisions:

- \$370 billion for climate initiatives
- Corporate tax changes
- Prescription drug price negotiations
- Out of pocket caps for Medicare prescription drugs

Analysis: Nothing on childcare/early learning





Fiscal Year 2023 Appropriations

October 1, 2022 - September 30, 2023

- IDEA awards July 1, 2023
- The President, House and Senate Appropriations Committees have put forward aspirational recommendations
- Continuing Resolution (CR) passed until after the election
- Differences in the House and Senate funding levels and policy proposals need to be conferenced and agreement reached
- Bill becomes law when agreed to by full House and full Senate* and signed by the President
 - *Senate must approve by at least 60 votes, needs to be bipartisan



FY 2023 Proposals- Where we Currently Stand

Program	Current funding level (FY 2022)	Budget Proposal FY 2023	House bill FY 2023	Senate bill FY 2023
IDEA Part B grants to states	\$13.3 billion	\$16.3 billion	\$16.3 billion	\$15.3 billion
IDEA Preschool grants	\$410 million	\$503 million	\$440 million	\$445 million
IDEA Part C	\$496 million	\$932 million	\$621 million	\$591 million
IDEA Part D personnel prep	\$95 million	\$250 million	\$250 million	\$190 million
Parent Training Information Centers	\$30 million	\$45 million	\$40 million	\$45 million
National Center for Special Education Research	\$60 million	\$58.5 million	\$64 million	\$72 million



FY 2023 Proposals- Where we Currently Stand

Program	Current funding level (FY 2022)	Budget Proposal FY 2023	House bill FY 2023	Senate bill FY 2023
Child Care and Development Block Grant	\$6.2 billion	\$7.6 billion	\$7.1 billion	\$7.1 billion
Head Start and Early Head Start	\$11 billion	\$12.2 billion	\$12.3 billion	\$12 billion
Maternal and Child Health Block Grant	\$748 million	\$954 million	\$868 million	\$952 million
Early Hearing Detection and Intervention	\$18 million	\$18 million	\$18.8 million	\$18 million
Preschool Development Grants B-5	\$290 million	\$450 million	\$350 million	\$350 million
Infant Early Childhood Mental Health	\$10 million	\$10 million	\$30 million	\$20 million



Other Proposals Being Considered

- Would require all States receiving funds under Part C to reserve at least 10
 percent of their annual allocations to develop and implement an equity plan
 approved by the Secretary.
 - (In President's Request and in House bill)
- A state may reserve from its award an amount necessary for use in a manner described in a State plan, approved in the State, to ensure equitable access to and participation in part C services in the State, particularly for populations that have been traditionally underrepresented in the program;
 - (In Senate bill)



Policy Proposals in the FFY 2023 Recommendations

 The Department states it is proposing to address inequity in access to services through appropriations language that would prohibit States from charging family fees or out-of-pocket expenses.

- In President's Request and in House bill
- Not in the Senate bill



Funding Early Childhood is the Right IDEA Act

- □ Federal funding has not kept pace with growth and inflation continuing decrease in federal per child funding
- A bipartisan, bicameral bill to restore full funding for educational and early intervention services for children with disabilities
- ☐ Bill is parallel to the Part B Full Funding Act efforts
- Mark DeSaulnier (D-CA), Rodney Davis (R-IL), and Jared Huffman (D-CA) introduced in the House (H.R. 6532) has 21 co-sponsors as of 9/27/22
- □ Maggie Hassan (D-NH) introduced in Senate (S. 3544) 4 co-sponsors Casey (PA), Van Hollen (MD), Murphy (CT) and Reed (RI) as of 9/27/22



What Is Due or Overdue?



- Maternal, Infant, and Early Childhood Home Visiting (MIECHV)
- **❖IDEA**
- *****CAPTA
- Higher Education Act
- Education Sciences Reform Act
- Head Start Act



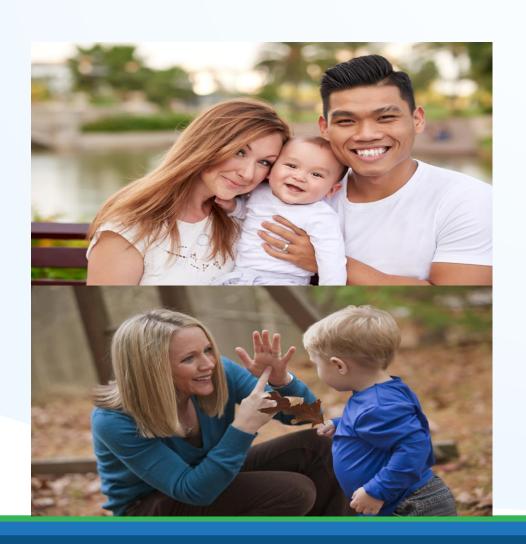
MIECHV Reauthorization

- Short-term gap included in the CR text
- ☐ The Jackie Walorski Maternal and Child Home Visiting Reauthorization Act was introduced 9/19
- □ Passed unanimously through House Ways and Means on 9/21 would:
 - Double funding over 5 years
 - Double Tribal set-aside
 - Change the formula to better target to infants/toddlers in poverty
 - Allow for the continuation of virtual service delivery



Mid-Term Elections

- All House Members and 1/3 of Senators are up for reelection
- Productivity tends to slow as we near election day
- election day
 Partisanship/political divides tend to amplify
- Who will win in November?





Hot Topics Inside the Beltway

- Childcare
 - Continues to need attention at all levels of gov't
- Workforce shortages
 - Affecting a broad swath of industries, particularly education
- Child poverty
 - Was temporarily cut in half through American Rescue Plan Act... now what?
- Mental health
 - A persistent and growing challenge



2022 Tipping Points Survey



- IDEA Infant and Toddler Coordinators Association (ITCA)
- State membership organization for Part C agencies
- This is the 17th annual survey
- 51 of 56 jurisdictions responded in 2022

https://www.ideainfanttoddler.org/board-approvedsurveys.php

How are you using American Rescue Plan Funds?



- Top 4 Responses
 - Child Find and Public Awareness 77.7 percent
 - Workforce Capacity 75.5 percent
 - Develop or enhance data system 57.7 percent
 - Address social/emotional issues resulting from the pandemic – 55.5 percent

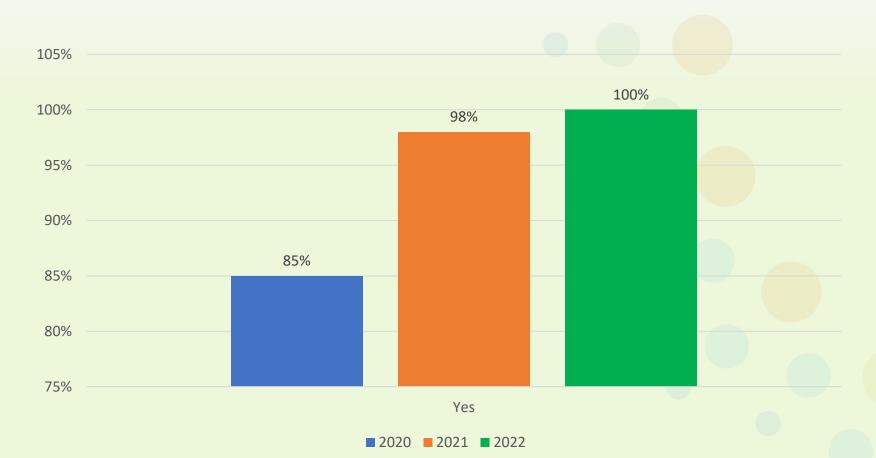
Delivery Method of Part C Services



- Currently, what percentage of <u>families are receiving services</u> <u>virtually?</u> Of the 29 states reporting:
 - •Average percentage was 36% with a median of 35% The range was from zero to 85%
 - •Currently, what percentage of <u>services are provided in</u> <u>person?</u> Of the 29 states reporting:
 - Average percentage of <u>services provided in person</u> was 67% with a median of 80%. The range was 10 to 100%

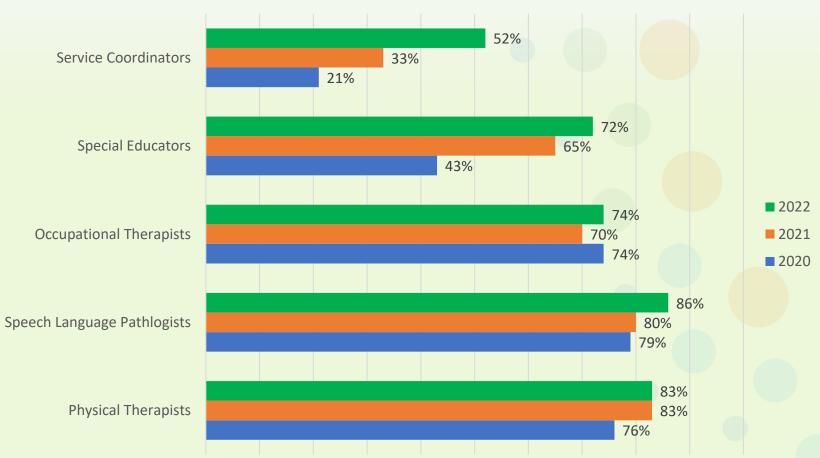
Are you experiencing a shortage of providers?





Shortage Comparison for most frequently used services

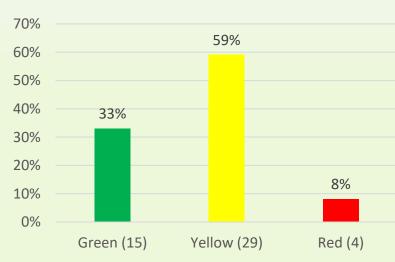




Estimated 2022 Child Count



Point in Time



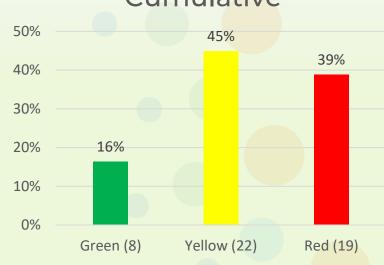
Of the 29 states in yellow:

- 9 were at 95-100% of 2019
- 12 were at 90-94% of 2019
- 5 were at 80-90% of 2019
- 3 were at 75-80% of 2019

Of the 4 states in red:

- 2 were at 99% of 2020
- 1 was at 98% of 2020
- 1 was at 89% of 2020

Cumulative

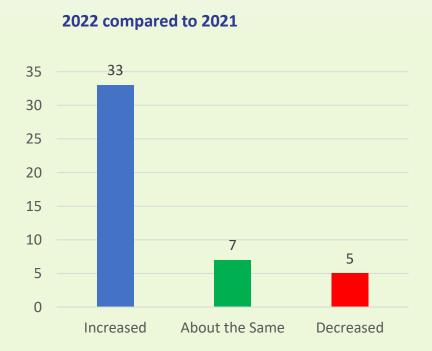


Key:

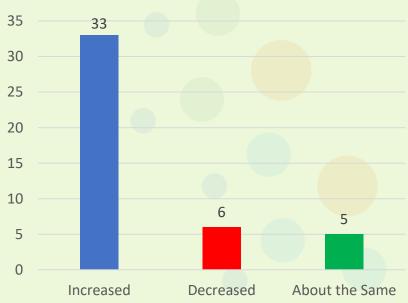
- Green: Meets/exceeds 2019 count
- Yellow: Above 2020 but not back to 2019
- Red: Below 2019 and 2020

Comparison of 1st Q 2022 Referrals



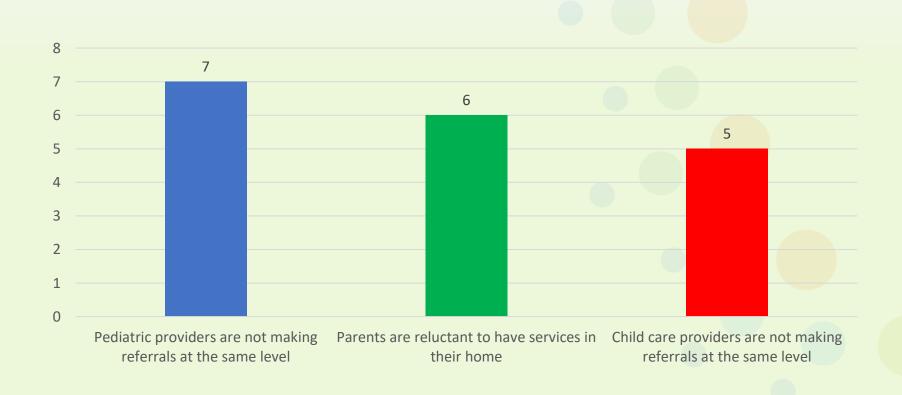


2022 compared to **2020**



If your referrals are still down, what are the reasons?





FFY2021 State Performance Plan / Annual Performance Report (SPP/APR)

FFY2021 Performance: July 1, 2021 – June 30, 2022

FFY2021 Submission to OSEP: February 1, 2023

IDEA PART C INDICATORS

- **1. Timely Provision of Services.** % of infants/toddlers with IFSPs receiving EI services on their IFSPs in a timely manner.
- **2. Services in Natural Environments**. % of infants/toddlers with IFSPs primarily receiving EI services in the home or community-based setting.
- **3. Early Childhood Outcomes**. % of infants/toddlers with IFSPs demonstrating improved (A) Positive social-emotional skills, (B) Acquisition and use of knowledge and skills, © Use of appropriate behaviors to meet this needs.
 - 1. Summary Statement 1: % of infants/toddlers with substantial increase in rate of growth in each outcome by age 3 or program exit.
 - 2. Summary Statement 2: % of infants/toddlers functioning within age expectations in each outcome by age 3 or program exit.
- **4. Family Involvement**. % of infants/toddlers reporting that EI services helped families (A) Know their rights, (B) Effectively communicate child's needs, © Help their children develop and learn.
- **5.** Child Find (Birth to One): % of infants and toddlers birth-1 with IFSPs compared to national data.
- **6. Child Find (Birth to Three)** % infants and toddlers birth -3 with IFSPs compared to national data.
- **7. 45-Day Timeline.** % of eligible infants/toddlers with IFSPs with initial evaluation, assessment and IFSP meeting, within 45-day timeline.
- **8. Early Childhood Transition.** % of toddlers exiting Part C with timely transition planning for whom LA, within required timeline, (A) Developed IFSP with transition steps and services, (B) Notified SEA and LEA of toddlers' potential eligibility for Part B, © Conducted transition conference.
- **9. Resolution Sessions**. % of hearing requests resolved through resolution session settlement agreements.
- 10. **Mediation.** % of mediations held resulting in mediation agreements.
- 11. **State Systemic Improvement Plan**: SPP/APR includes comprehensive, ambitious, achievable, multi-year SSIP, with Phase I analysis, Phase II plan, Phase III implementation and evaluation, with stakeholder engagement in all phases, for improving results for infants/toddlers with disabilities and their families.

SPP/APR Reporting Indicators

Compliance Indicators (100%)

- ► C1 Timely Provision of Services
- ► C7 45-day Timeline
- C8 Early Childhood Transitions

Results Indicators (*Targets)

- ► C2 Services in Natural Environments
- C3 Child Outcomes
- C4 Family Involvement
- C5 Child Find (Birth to One)
- C6 Child Find (Birth to Three)

General Supervision

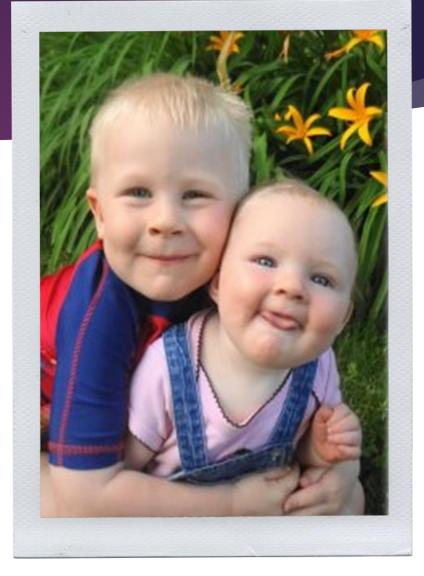
- C9 Resolution Sessions
- C10 Mediation

^{*}Targets established for FFY2020 – FFY2025 by ICC

C11 State Systemic Improvement Plan

What is the SSIP?

- ► A comprehensive, ambitious, yet achievable multi-year plan that states will develop to improve results for children/students with disabilities (and their families)
- Increase the capacity of EIS programs/LEAs to implement, scale up, and sustain evidence-based practices that will result in improved results
- Added FFY2015-FFY2019
- ▶ New SSIP Package FFY2020 FFY2025



The South Dakota Birth to Three State Identified Measurable Result (SIMR)

To substantially increase the rate of children's growth in their acquisition and use of knowledge and skills, including early language/communication, by the time they exit the program, as defined by the targets established for Indicator 3B, Summary Statement 1.

SICC assisted state in revising the Theory of Action to reflect state progress and priorities



SSIP Theory of Action

Vision: SD Birth to Three contributes to the success of children with developmental delays and their families by providing dynamic, individualized early intervention services and supports by building on family strengths through everyday routines and learning experiences.

Strands of Action	If the State	Then Regionally	Then	Results
Data Quality	Monitors for continuous improvement the process to obtain, analyze and report BDI scores for children in the Birth to Three programContinues to provide BDI training in collaboration with 619	Service coordinators & districts will continue to increase the number of usable BDI exit evaluationsEvaluators will improve the reliability and validity of BDI administration	Statewide data quality continues	Infants and
Accountability	Develops and implements a monitoring protocol to address results and compliance	IFSP teams will increase the quality of decisions related to outcomes and services	Children & families, including those most often underrepresented,	toddlers exiting early intervention services will demonstrate
Professional Development	Continues to provide relevant & rigorous training under the state's Bright Beginnings PD program Continues to design, enhance and deliver training and TA opportunities as identified for SC, DSP and Families.	Early Intervention providers will continually increase the use of evidence-based practices and family and caregiver engagement through coaching practices	receive appropriate evidence-based practicesFamilies and caregivers are more likely to be engaged in routines-based intervention	increased growth in their acquisition and use of knowledge and skills (including early language/ communication)
Access & Participation	Increases connectedness & representativeness of South Dakota families to EI servicesAttracts, recruits, and retains qualified personnel to meet EI needs statewide	Enrollment increases with emphasis on children and families most often underrepresented An increased diverse provider pool is available to meet the needs of all Part C families.	intervention	

SOUTH DAKOTA PART C SSIP IMPLEMENTATION / EVALUATION PLAN: PROFESSIONAL DEVELOPMENT

Improvement Strategy: South Dakota will continue to provide relevant and rigorous training under the State's Bright Beginnings PD program.

Improvement Strategy: South Dakota continue to design, enhance, and deliver training and TA opportunities as identified for service coordinators, direct service providers and families.

SHORT / INTERMEDIATE OUTCOMES
 Part C training is branded as "Bright Beginnings" inclusive of both EBP. South Dakota specific videos available featuring providers and families
Training cohorts are semester based Increase participants in each training cohort Statewide implementation of EBPs
Coaching schedules established for year-round coaching Increase in number of Peer and Master coaches
 Increased statewide percentage of SC & DSP meet fidelity Providers, two years from initial fidelity, meet sustained fidelity.
Regional service coordinator mentor groups established with John Hopkins RBI Academy. Tier 1 DSP mentoring group established. Family networking determined.
Select & secure platform compatible with smart phones. Creation & Dissemination of topical learning pods
Increase number of participants electing to obtain graduate credit
 Increased number of opportunities for Part C presentations with professional preparation programs. Agreements established to offer Bright Beginnings as an elective course for professional preparation programs.

Next Steps:

- Reflect
- Provide feedback
- Next Steps

Professional Development Access & Participation

SOUTH DAKOTA PART C SSIP IMPLEMENTATION /	

Improvement Strategy: South Dakota will increase connectedness & representativeness of South Dakota families to EI services.
Improvement Strategy: South Dakota will attract, recruit, and retain qualified personnel to meet early intervention needs statewide.

ACTIVITY	SHORT / INTERMEDIATE OUTCOMES
Enhance and revise existing resources to assist	 Opportunities for improvement of existing resources are identified.
all families to engage in the EI process.	Stakeholder input is obtained.
	Plan of action is developed.
	Outline and format decisions are made.
	Resource(s) is completed and disseminated.
Develop a comprehensive, culturally relevant	Cultural parameters are defined.
communication plan to ensure clear, responsive,	Broad stakeholder input, including family is obtained.
respectful interactions between El providers and	Strength and gaps in current communication is assessed.
families,	Plan of action is developed.
	Resource(s) is completed and disseminated.
Increase collaboration with relevant EC partners	Part C director lead team member of state HRSA ECCS grant
throughout the state to assist in identification &	
referral of all families including traditionally	
underrepresented families.	
Develop and implement a new discipline for the	Implementation of pilot program.
provision of special instruction in Part C.	 Language describing discipline and its requirements is established.
	Communication plan with state professional organizations is implemented
	New discipline language is promulgated in administrative rule language.
	 Additional providers are available throughout the state, including areas of the
	state that are traditionally underrepresented.
Facilitate relationships among state tribal	Concept is presented at SDACTE (South Dakota Association for Colleges of
colleges and the Part C program to cultivate	Teacher Education). Including public, private universities and tribal colleges.
opportunities for Native American Part C	 Project goals and approaches and liaisons are identified including Department of
professionals.	Labor work force.
	Conversations with tribal colleges occur.
	Advisory group is formed.
	Programs developed and implemented.
	Monitoring of program implementation
	 Increase in Part C professionals who reside within identified communities who
	are typically underrepresented.

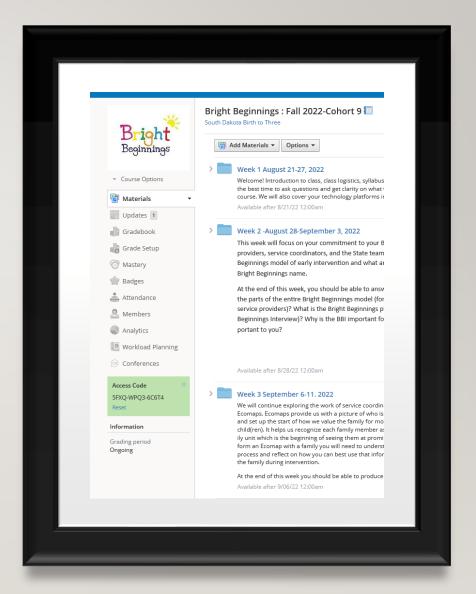
Next Steps:

CII SSIP PROGRESS

Professional Development

PROFESSIONAL DEVELOPMENT

- All materials have been branded with the Bright
 Beginnings name as the overall umbrella for trainings.
 Cohort 8 (spring 2022) was the first to receive training with the new branding.
- 7 SD specific videos have been completed and shared with service coordinators, used in training, and in statewide presentations. An 8th video is being shot in December to complete the series.



BRIGHT BEGINNINGS VIDEOS

Angela's Story

Jordan's Story

Amy's Story

Wendy's Story

Kirsten's Story

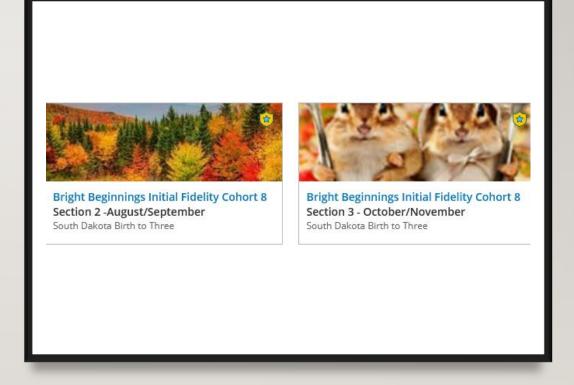
Service Coordinator

Story

Panel Discussion

PROFESSIONAL DEVELOPMENT

- Training cohorts became semester based in January 2022. Cohort 8 graduated 78 participants. Of that, 63 have met initial fidelity. Cohort 9 began in August 2022 with 83 participants.
- A year-round coaching schedule has been developed and implemented. There are five, two-month coaching pods per year (no coaching in July or December). After the first pod, coaches gave feedback for improvement and those changes are being implemented now. We continue to monitor progress with each pod.



PROFESSIONAL DEVELOPMENT CONTINUED...

- 100% initial fidelity rate for all SC and DSP. The only DSP's who have not met fidelity are those who left birth to three permanently.
- 100% DSP met sustained fidelity
 - New methods of fidelity implementation
 - More intense coaching methods for those who are struggling -and include I-year sustained fidelity
- SC mentor group -completed collaboration with John Hopkin's University RBI enhancement
- Established and implemented quarterly Tier 1 DSP mentor group started in July 2022
- Parent networking –no progress

PROFESSIONAL DEVELOPMENT

Managing Your Stress Course TRY IT NOW!

- Smart phone compatible training platform Articulate 360 purchased and 3
 of 5 infant/toddler and provider mental health courses are now in the
 platform for release in summer 2023
- Family literacy course was implemented in summer 2022. Children's literature course is process of development for summer 2023. Other topics have been gathered from the Tier 1 mentor group meetings
- Dr. Jill Thorngren (counselor) –providing zoom conversations with providers, service coordinators, and state staff on healthy relationships in the workplace including working with colleagues and families and taking care of ourselves.
- COMING AUGUST 3, 2023 Statewide early intervention conference!



PROFESSIONAL DEVELOPMENT

- Bright Beginnings training offered through SDSU for 3 graduate credits participants seeking graduate credit -15 spring 2022, 9 fall 2022
- Presentations to SDSU's early childhood program ECE 150 FA2021, SP 2022, USD's PT program SP2022 —presentations at SD SPED and SD AEYC. Inservice to YFS Rapid City (who will be part of cohort 10).
- While conversations have been held with IHE's, none have yet agreed to offer training during undergrad or grad programs. Outreach to tribal colleges on hold currently.

QUESTIONS FOR ICC

- How do we reach the remaining providers?
- What will touch their hearts and move them to understand this model of family engagement?

Impact on Access & Participation

- ARSD 24:14 Rule Revisions 8/1/22
 - 7/1/2022 Medicaid Rate Increases (OT, PT, SLP)
 - Restructure travel reimbursement
 - Restructure special instruction / family training reimbursement rates (80% of SLP rate)

**Concern affect participation

Provider Enrollment Since Rules Announced

- ▶TOTAL ENROLLED NEW PROVIDERS— 22
 - ► Notified of Part C Rule Changes
 - ► Early Childhood Special Education Teachers-7
 - ▶Occupational Therapists- 3
 - ▶Physical Therapists- 5
 - ►Speech Language Pathologists-7

*1 PROVIDER LEFT DUE TO TRAVEL RATES



- Pilot Program
- Virtual Early Intervention Services
- SLP Services
- PT Services
- Reaching families across the state
- High Success

DEVELOPMENTAL SPECIALIST PILOT PROJECT



PROBLEM

Provider shortages

Misalignment of services

Model in other states such as Nevada and their developmental play groups

ICC

Supported idea

Cautioned about over-reach in discipline groups

Approved pilot to study need/processes

PILOT

- Collaboration with DX Therapy (Kirsten Ducheneaux service coordinator and PT provider) in Oahe area serving our tribal and remote communities
- Original intent
 - A person who does not have to have teacher certification that can perform duties of an early instruction provider. Can be the first line of intervention unless "medically necessary" (structural) diagnosis.
- Holly White Wolf
 - Trained in Bright Beginnings as service coordinator and provider
- Progress checks

FINDINGS

- Confusion over role of developmental specialist
- Rules change and influx of providers
- Learning from Nevada
 - Embedded people in underrepresented populations
 - Community gatherings where simple observations can lead to screenings and evaluations
 - Engaging those who typically aren't accessing screening events
 - Leads to new definition of Developmental Specialist
- Lack of enough higher ed prep specific to infants/toddlers and/or early intervention and IFSP's
 - Early childhood programs in SD have only 3 credits out of 120 related to infant/toddler development or curriculum, Elementary programs have zero. Practicums and student teaching are related to K-3, K-8 or K-12 certification requirements and little to no elective credit to use toward birth to three interests.

NEXT STEPS/TASKS FOR ICC

React to: New definition and direction for a community embedded developmental specialist

Purpose: to support service coordinators in communities with identified underrepresented children and families

Responsibilities: to develop and execute community-based activities that lead to increased developmental screening; bridge the gap in access to the Birth to Three program; engage families in activities that support the growth, development of all children with specific attention to early literacy and language.

<u>Ideas for</u>: How to address infant/toddler and early intervention prep

BREAK!!

WELCOME BACK

SOUTH DAKOTA PART C SSIP IMPLEMENTATION / EVALUATION PLAN: ACCESS & PARTICIPATION

Improvement Strategy: South Dakota will increase connectedness & representativeness of South Dakota families to El services.

Improvement Strategy: South Dakota will attract, recruit, and retain qualified personnel to meet early intervention needs statewide.

ACTIVITY	SHORT / INTERMEDIATE OUTCOMES
Enhance and revise existing resources to assist	Opportunities for improvement of existing resources are identified.
all families to engage in the EI process.	Stakeholder input is obtained.
	Plan of action is developed.
	Outline and format decisions are made.
	Resource(s) is completed and disseminated.
Develop a comprehensive, culturally relevant	Cultural parameters are defined.
communication plan to ensure clear, responsive,	Broad stakeholder input, including family is obtained.
respectful interactions between El providers and	Strength and gaps in current communication is assessed.
amilies.	Plan of action is developed.
	Resource(s) is completed and disseminated.
ncrease collaboration with relevant EC partners	Part C director lead team member of state HRSA ECCS grant
throughout the state to assist in identification &	
referral of all families including traditionally	
underrepresented families.	
Secretary and leavelences a new disciplina for the	. toulousebalou of ellet exercise
Develop and implement a new discipline for the	Implementation of pilot program.
provision of special instruction in Part C.	Language describing discipline and its requirements is established.
	Communication plan with state professional organizations is implemented
	New discipline language is promulgated in administrative rule language. Additional psychology are available throughout the state language areas of the
	Additional providers are available throughout the state, including areas of the
Cacilitate relationships among state tribal	state that are traditionally underrepresented.
Facilitate relationships among state tribal	Concept is presented at SDACTE (South Dakota Association for Colleges of Tandon Education), Including public prints unit position and tribal colleges
colleges and the Part C program to cultivate	Teacher Education). Including public, private universities and tribal colleges.
opportunities for Native American Part C professionals.	 Project goals and approaches and liaisons are identified including Department of Labor work force.
professionals.	
	Conversations with tribal colleges occur.
	Advisory group is formed. Programs doublesed and implemented.
	Programs developed and implemented. Manitorina of programs implementation.
	Monitoring of program implementation Increase in Part 5 professionals who socials within identified communities who
	Increase in Part C professionals who reside within identified communities who The increase in Part C professionals who reside within identified communities who
	are typically underrepresented.

Next Steps:

Access & Participation

INDICATOR C2:

SERVICES IN NATURAL ENVIRONMENTS

% OF INFANTS AND TODDLERS WITH IFSP'S PRIMARILY RECEIVING EI SERVICES IN THE HOME OR COMMUNITY BASED.

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	97.00%	97.00%	97.00%	97.25%	97.25%	97.50%

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1014	1018	99.89%	97.00%	99.61%	Met target	No Slippage

INDICATOR C5:

CHILD FIND (BIRTH TO AGE 1)

%OF INFANTS AND TODDLERS BIRTH TO AGE ONE WITH IFSPS COMPARED TO THE NATIONAL AVERAGE

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	0.88%	0.88%	0.89%	0.89%	0.89%	0.90%

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
135	11,810	0.97%	0.88%	1.14%	Met target	No Slippage

INDICATOR C6:

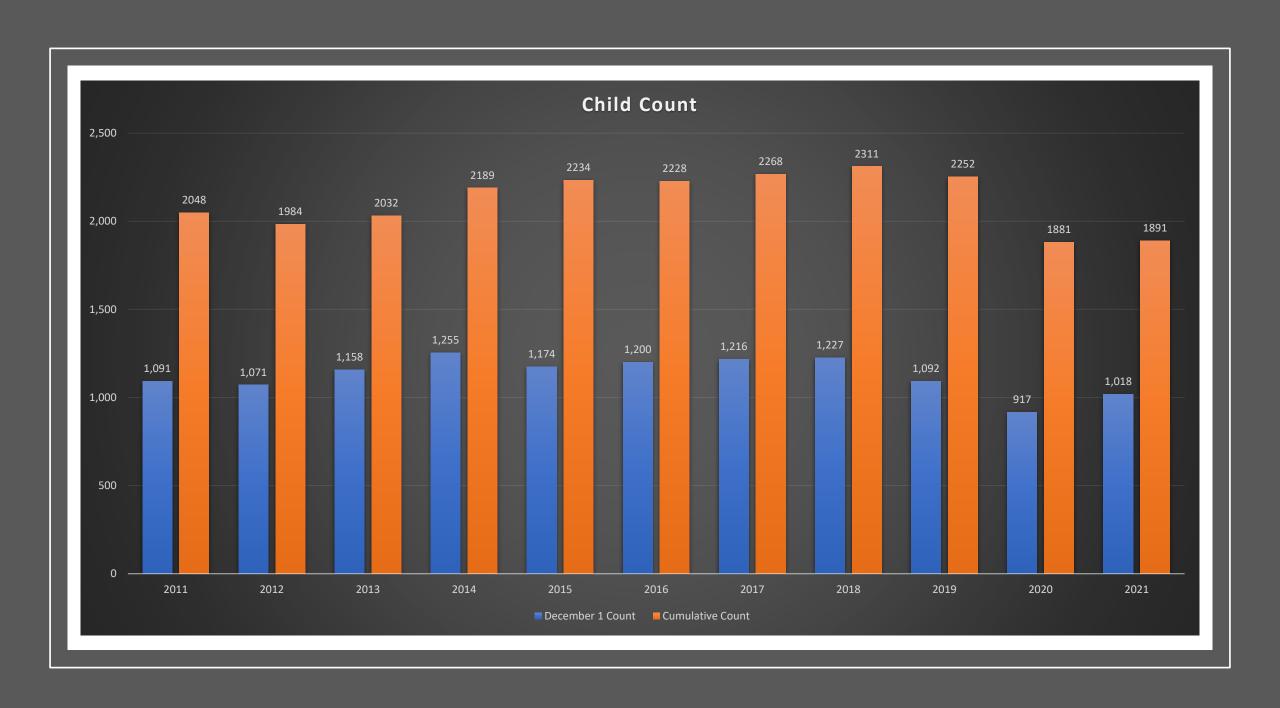
CHILD FIND (BIRTH TO AGE 3)
%OF INFANTS AND TODDLERS BIRTH TO AGE THREE WITH IFSPS COMPARED TO THE NATIONAL AVERAGE

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	2.56%	2.81%	2.83%	2.83%	2.84%	2.85%

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1018	35,387	2.56%	2.81%	2.88%	Met target	No Slippage



Family Dynamics Changing?

Observations from Service Coordinators

- Technology/Social Media
 - Parenting apps/programs seem to lessen parent/child interaction
 - Under pressure to be perfect parents
 - Quick ways to "fix" child
- COVID Factor
 - Uncertainty of needing help from programs/resources
 - Screens/rescreens increasing as parents are uncertain about needing to move forward
- Communication challenges
 - Reaching families is more difficult (no response)
 - Obtaining parent consents during IFSP process delayed

Indicator C4 = % of families reporting that EI services helped the family:

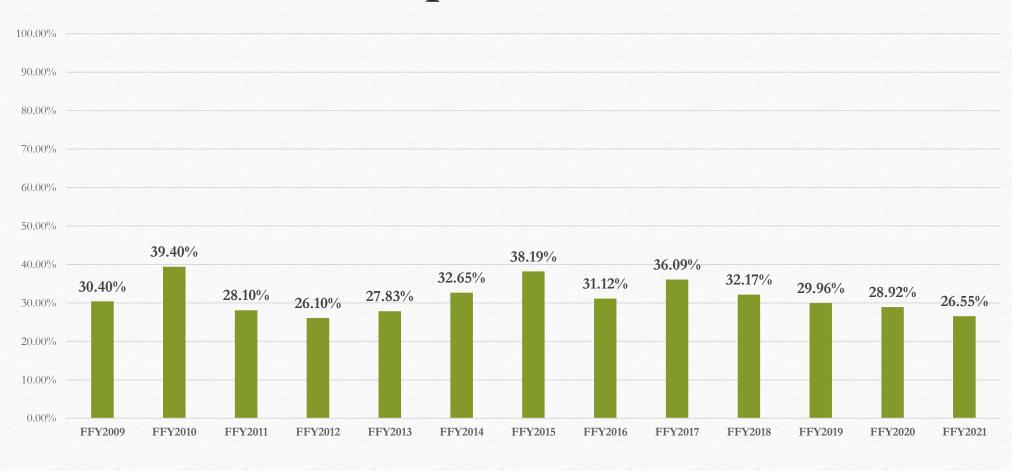
- A. Know Their Rights
- B. Effectively Communicate Child's Needs
- C Help Their Children Develop and Learn

C4 Family Survey

- New Survey Tool
 - Standardized tool vs. state developed
 - Five questions vs. one
- New Distribution Method
 - Electronic vs. only hard copy
 - Service coordinators distributed by hand no sent via Text, email etc.

FAMILY OUTCOMES SURVEY south dakota Instructions: Section B of the Family Outcomes Survey focuses on the helpfulness of early intervention. For each question below, please select how helpful early intervention has been to you and your family over the past year. Not at all helpful, a little helpful. somewhat helpful, very helpful, or extremely helpful. Knowing your rights How helpful has early intervention been in... 0 0 0 0 0 giving you useful information about services and supports for you and your child? giving you useful information about your rights related to your child's special 00000 giving you useful information about who to contact when you have questions or 00000 giving you useful information about available options when your child leaves the 00000 00000 explaining your rights in ways that are easy for you to understand? Communicating your child's needs How helpful has early intervention been in... 0 0 0 0 0 giving you useful information about your child's delays or needs? 00000 listening to you and respecting your choices? 00000 connecting you with other services or people who can help your child and family? 00000 talking with you about your child and family's strengths and needs? 00000 talking with you about what you think is important for your child and family? 00000 11. developing a good relationship with you and your family? Helping your child develop and learn How helpful has early intervention been in... 00000 12. giving you useful information about how to help your child get along with others? 00000 giving you useful information about how to help your child learn new skills? giving you useful information about how to help your child take care of his/her 00000 00000 15. identifying things you do that help your child learn and grow? 00000 16. sharing ideas on how to include your child in daily activities? 17. working with you to know when your child is making progress? 00000

Response Rate



Indicator C4: Survey Return Rate by Region

Number of Family Members Who Received the Parent Survey: 919

Number of Family Members Who Completed the Parent Survey: 244

Percentage of Family Members Who Completed the Parent Survey: 26.55%

Region	# Sent	# Returned	Response %
Black Hills	195	52	26.67%
Southeast Coop	122	32	26.23%
CORE Educational Coop	62	31	50.00%
HUB	192	47	24.48%
Oahe	18	8	44.44%
Center for Disabilities	330	74	22.42%

Indicator C4: Responses by Child Ethnicity/Race

FFY 2021

FFY 2020

	Number	Percent
Black / African American	9	4%
Alaskan Indian / Native American	21	9%
Asian	4	2%
Hispanic	3	1%
Native Hawaiian / Pacific Islander	0	0%
Multi Racial	22	9%
White	185	76%

	Number	Percent
Black / African American	4	2%
Alaskan Indian / Native American	24	10%
Asian	2	1%
Hispanic	13	5%
Native Hawaiian / Pacific Islander	0	0%
Multi Racial	12	5%
White	190	78%

919 sent, 244 returned = 26.55%

854 sent, 247 returned = 28.92%

Indicator C4: Family Outcomes

% of families reporting that EI services helped the family (A) Know their rights (B) Effectively communicate child's needs,(C) Help their children develop and learn.

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A>=	94.1%	94.1%	94.2%	94.3%	94.4%	94.5%
Target B>=	90.0%	90.2%	90.4%	90.6%	90.8%	91.0%
Target C>=	90.0%	90.1%	90.2%	90.3%	90.4%	90.5%

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	97.98%	94.1%	88.11%	Not Met	Yes?
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	97.96%	90.2%	90.98%	Met	No
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	99.19%	90.1%	87.30%	Not Met	Yes

Question to Stakeholders

• Reflection on the Response Rate? Suggestions for increasing families participation

- Reflection on Targets
 - State recommends leaving as is.
 - Given only one year of data with new tool, not sufficient to warrant changing targets.

SOUTH DAKOTA PART C SSIP IMPLEMENTATION / EVALUATION PLAN: DATA QUALITY

Improvement Strategy: South Dakota will monitor for continuous improvement in obtaining, analyzing, and reporting BDI scores for children in Part C. Improvement Strategy: South Dakota will continue to provide BDI training in collaboration with 619.

ACTIVITY	SHORT / INTERMEDIATE OUTCOMES
Annually collect, analyze, and report child outcome data from the BDI database	Completion rate of at least 65%
Collaborate with Part B 619 to continue to provide BDI training opportunities for evaluators	% of evaluators who have completed BDI training increases.

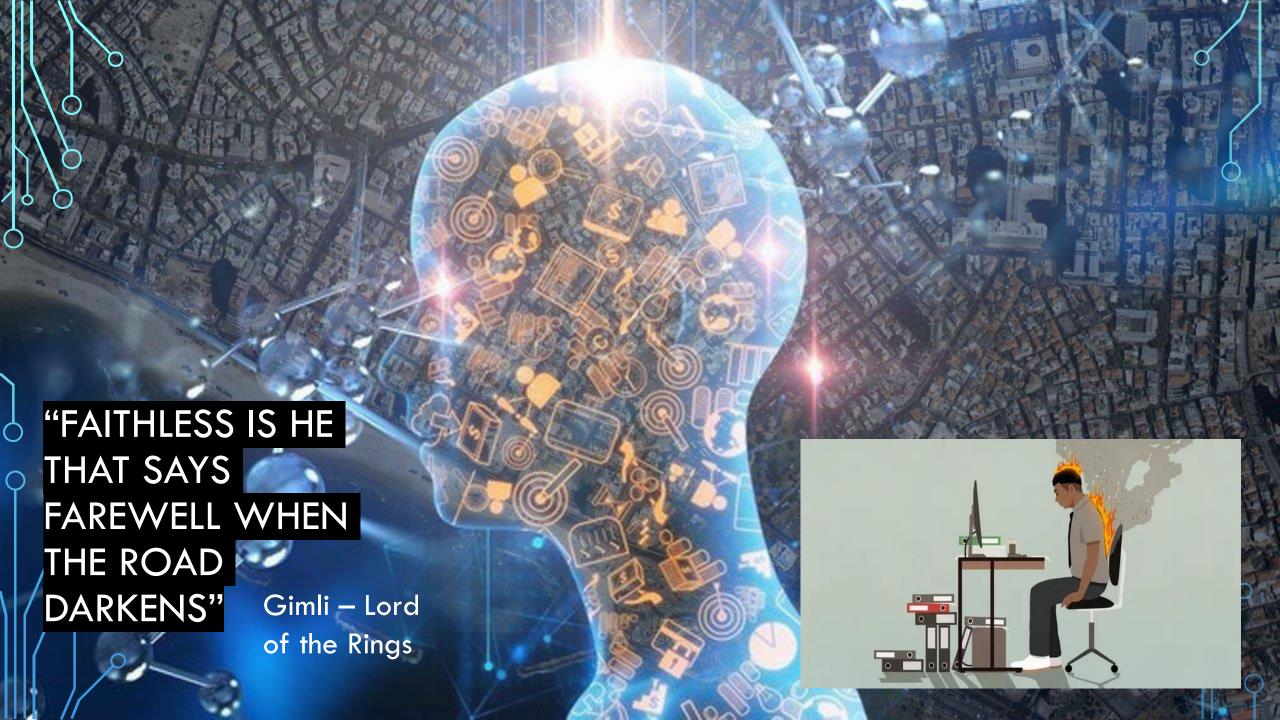
Next Steps:

Data Quality

WE HAVE SOME EXCITING NEWS!







DATA SYSTEM

- Legacy System
 - State Developed
 - Continual enhancements
 - Clunky many things still done manually
 - Only capture from IFSP to transition
 - Quirky data scenarios
 - Many processes to pull SPP/APR data

- New Data System
 - New technology
 - Using ARP funds
 - Referral to Transition one electronic file for each child
 - Include billing for providers
 - Linkage to other DOE data systems (LDS, LMS etc).
 - Capture SSIP work
 - Cleaner reporting
 - All Data elements! (reporting)
 - Hoping to have up and running by July 1, 2024 (begins new fiscal/reporting year)

WHERE THINGS STAND RIGHT NOW:

- Officially approved to pursue an RFP (Request for Proposal)
- Conference/Demonstrations
- DaSy, other states, national OSEP funded technical assistance centers
- Project Manager, RFP writing and routing
- Remainder of process

QUESTION TO STAKEHOLDERS

- Recommendations for the state to consider including in this new data system?
 - Possible Parent Portal?
 - Possible calendar linkage
- What would be beneficial to families, providers?
- Future data considerations

SOUTH DAKOTA PART C SSIP IMPLEMENTATION / EVALUATION PLAN: ACCOUNTABILITY

Improvement Strategy: South Dakota will develop and implement a monitoring protocol to address results and compliance.

ACTIVITY	SHORT / INTERMEDIATE OUTCOMES
Determine indicators to be monitored	 A set of indicators reflecting quality of IFSP process including availability of providers that have met fidelity criteria available.
Develop protocols for the collection, analysis, and evaluation of data to reflect quality of IFSP process.	 Development of protocols that include fidelity of EBP data. Training with a monitoring team on use of protocol. Protocol used in pilot to collect monitoring data.

Next Steps:

Accountability

INDICATOR C9: RESOLUTION SESSIONS

% OF HEARING REQUEST RESOLVED THROUGH RESOLUTION SESSION SETTLEMENT AGREEMENTS

Targets							
FFY	2020	2021	2022	2023	2024	2025	
Target>=							

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0				N/A	N/A

INDICATOR C10:MEDIATION

% OF MEDIATIONS HELD RESULTING IN MEDIATION AGREEMENTS

Targets	jets .						
FFY	2020	2021	2022	2023	2024	2025	
Target>=							

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0				N/A	N/A

OSEP STATE MONITORING

- State prepping for this
 - Cohort 4 or 5 (est. 2026 or 2027)
 - National TA Center DaSy multi-state meeting
 - Small upper/western plains states: Wyoming, North Dakota, Montana, Idaho, South Dakota
 - Learn from each other
 - Prepare service coordination regions and direct service providers
 - New Data system!

QUESTIONS?

SICC Feedback

- 4 Stations
- 1) Data System Enhancements
- 2) Access & Participation
 - -Survey response
 - -Family initial/upfront engagement
- 3) Reaching Providers Resistant to the EBP
- 4) Pilot Group (Developmental Specialist)

**Find the station you want to start with

Directions:

- Four cycles rotate through each station
 - Timer will sound when time to move

Café Style

- Using your notes from the day, add to the flip chart your suggestions to the state for next steps.
- All suggestions written on a post it (one idea per post it)
- When rotate to new station, review what is there. If your idea represented, place your note on top of or use dots to agree. Dots can also be used to identify ideas you agree with.

What's Coming up for Birth to Three

- ► SPP/APR Submission 2/1/2023
 - ▶ January 18, 2023, SICC cover remaining indicators C1, C3,C7 and C8.
- Preschool Foundational Study
- ECCS Advisory
- Part C Grant Application
- Data System!!

South Dakota
Birth to Three
STATE INTERAGENCY
COORDINATING COUNCIL
AGENDA

Tuesday, November 1, 2022 | 10:30am CT Casey Tibbs Rodeo Center Fort Pierre, SD

ICC PURPOSE:

To advise and assist the Lead Agency regarding services for infants and toddlers with developmental delays or disabilities and their families.

Agenda Item	Presenter	Documents			
Call Meeting to Order - Roll Call	ICC Chair: Rochelle Hollov	ICC Chair: Rochelle Holloway			
Approve Agenda	ICC Members	Agenda			
Approval of August 2022 Minutes	ICC Members	8/2022 Meeting Minutes			
Public Comment	If you are interested in providing public comment, please send notification to sarah.carter@state.sd.ue or call (605)773.3678				
National Update	Sharon Walsh, ECTA	Sharon Walsh, ECTA			
FFY2021 SPP/APR Birth to Three State Team					
Birth to Three Program Updates					
Next Meeting: Wednesday, January 18, 2023, 3	3:00pm CT				
Adjournment	ICC Members				

Next Meeting: January 18, 2023 3:00CT Virtual

If you require a reasonable accommodation to participate in the meeting (e.g. sign language interpreter, materials in an alternative format), please submit your request in writing no later than 7 days prior to the meeting to ensure accommodations are available. Address requests to mailto:Melissa.manning@state.sd.us or call 605-773-3678.