Iowa Council for Early ACCESS  
Meeting Minutes November 21, 2014

I. Call to order
Heather Moorman called the Iowa Council for Early ACCESS to order at 10:05 AM on November 21, 2014 at the Grimes State Building, Des Moines, IA.

II. Attendance
Council Members Present: Gladys Alvarez, Heather Moorman, Paula Connolly (cc), Barbara Khal (cc), Marti Andera (cc), Laurie Jeans, Janet Stauss, Laura Belle Sherman-Proehl, Joshua Tessier, Gina Greene (sub for Shari Huecksteadt), Heather Moorman, Kasey Vermillion, Mary Butler, Chad Dahm, Julie Hahn, Angela Hance, Kim Thomas, Marcus Johnson-Miller.

Staff Present: Meghan Wolfe, Rae Miller, Kate Small, Cindy Weigel, Andrea Dencklau

Absent: Maria Cashman, Debra Matzat, Gary Guetzko, Kevin Koester, Aryn Kruse, Stacy Kramer, Jeffrey Anderson

III. Parent Presentation
Steven and Susan Larsen presented on their son who was part of the Early ACCESS system. Susan provided great examples of how Early ACCESS helped with their son’s development and how he has transitioned to Part B.

IV. Approval of Minutes from last Meeting
Angie Hance made a motion to approve the minutes with adjustments: Marcus Miller-Johnson was in attendance and Heather Moorman was listed twice with attendance. Marti Andera seconded. Approved unanimously.

V. Autism Updates
Wendy Trotter, Department of Education Autism Consultant, presented an update of her review of services through the Area Education Agencies (AEAs) Autism services. She has noticed that a transition among services has not always been smooth. Iowa is a non-categorical state so you do not need a diagnosis to initiate services. However, nice to have diagnosis from a medical perspective for what resources to tap into.

Hopes to focus initial efforts on how to reach out to parents who are not proactive to receiving services for their child. Great resources out there that are aimed to help people recognize subtle differences in development so that they are able to see first-hand behaviors that they may have a better clue. Awareness is huge.

Tara Underwood-Levin, Child Health Specialty Clinics, presented on the Regional Autism Assistance Program (RAP). The mission of RAP is to assure community-based clinical consultation, multidisciplinary care planning recommendations, and family-to-family support for children and families with Autism Spectrum Disorder.
(ASD). There are 13 different RAP locations located across the state. RAP teams are committed to ensuring that Iowans ages 0-21 years with ASD have access to early identification, treatment services, care coordination, and family-to-family support in their community.

VI. **Agency Updates**
LauraBelle Sherman-Proehl updated that the state work team has presented an action plan at the last signatory agency meeting which will be discussed later. The budget information will be shared at a later meeting as well. provided

Public Health updates provided by Meghan Wolfe: Working on updated materials that are replacing the developmental wheels. These are magnets and Meghan was able to pass out to the council members. This is significantly cheaper and functional. All the information/milestones are on the iowafamilysupportnetwork.com website. Marcus Johnson-Miller updated about the Title Five needs assessment. Prioritization survey will identify needs in the state to prioritize. Will send the link to the council members to fill out the survey. This is open until December 8th. Also working on a data integration project so that there is not a duplication of entry. A funding request has been sent to the legislature to help with this project.

Department of Human Services (DHS): Andrea Dencklau researching how to best engage families in the child welfare system and refer them to Early ACCESS. Expansion efforts with the safe babies court team. We would like to offer a policy-level person to explain to the council about Differentiated Response. Please let Andrea know what you think about this.

Rae Miller updated for Child Health Specialty Clinics (CHSC): CHSC is also partnering with Public Health in the CHSC collaborated with IDPH to create data detail sheets that provide the data and explain the current status of several topics important to the health of children and youth with special health care needs and their families.

No updates from the Early ACCESS leadership group because they did not meet in October.

VII. **Committee Updates**
Public policy: Marcus Miller-Johnson reported that policy-wise things are on hold until after the election. Budget at the federal level continuing resolution until December, probably flat-funded until the session resumes.
Governor’s Report: Jeff Anderson provided a rough draft for everyone to look at and give feedback. Handouts were provided for everyone. It was suggested that the child story is presented in the front and the council information in the back. Hopefully this will draw the reader in to look at it.

Parent committee: Kasey was here and also helped to look at the governor’s report and offer ideas.

Nominations Committee: Three members have said that they would like to renew their terms. We need to fill three more parent slots in the council. Kate will email the link to the parents to help recruit. We will need to vote on the executive committee in May. Kate will resend to the parent flyer to the council to send out.

VIII. SSIP update (State Systemic Improvement Plan).

Goal 1: This goal was about financial resources and having adequate money to maintain the infrastructure. Talked about different activities, such as exploring private insurance, Medicaid, and looking at eligibility criteria. What could the council do? We could have a work group that looks at the condition that might lead to a delay (e.g. prematurity).

Do the people reviewing the request understanding autism services don’t understand. Marti offered help with this.

Paula commented that this has to be more than a verbal conversation about providing information about what this might look like regarding private insurance.

Goal 2: Dispute Resolution. We did not have a chance to talk about this but we know that there currently not a lot of disputes in Early ACCESS.

Goal 3: Building Relationships with Stakeholders and Improving the Infrastructure. The activities is to participate in the DMM implementation teams, participating in Early Childhood Iowa activities, and staying up-to-date on any policies that may influence the Early ACCESS system.

Goal 4: Following Iowa Administrative Rules. Finding better collaborative practices. The objectives suggest increasing knowledge of coordinated intake, being aware of eligibility criteria, and using evidence-based frameworks just to name a few.

We do want to measure that we accomplish these things and may possibly use surveys to measure that we have accomplished some of these “learning tasks”

Goal 5: Ensuring Signatory Agency resources improve health, well-being, and early learning of infants and toddlers in partnership with families.

Make sure that we use data for programmatic decisions as a council. Results-driven accountability will be huge. Data systems and how we can measure success.
IX. Iowa’s Part C SSIP indicator (which is reported to the Office of Special Education Programs (OSEP).

Needing readers of the draft. This is due the first week of April. Angie Hance, Kim Thomas, Paula Connolly, and Laurie Jeans volunteered to read a draft of the new indicator.

Heather Moorman adjourned the meeting at 3:14pm
A motion was made by Marcus Johnson-Miller and seconded by Paula Connolly. It was approved unanimously.

Minutes respectfully submitted by: Kate Small 11/21/14