October 31, 2022

ICC Steering Committee Meeting

Attendance: Nichole Constantino, Michelle Grewal, Chris Hunt, Kris Levine, Colleen O’Brien, Dina Tedeschi, Emily White

1. Agenda
2. Call to order & review meeting objectives
	1. Moment to honor the land we are standing on today, taken from the original settlers
3. Ice breaker
4. Open items
	1. Appointments
		1. Referred to the Governor’s office; our commissioner determined that she is able to recommend things and individuals should be expecting to get Governor’s office background checks. It is probably not going to happen soon but at some point this fall we will receive background check information.
	2. Website
		1. We need to find a way to take down our family engagement site. Potentially need to have a separate meeting. The website is being taken down temporarily to make it better and make significant improvements.
		2. Issues: the Mass.gov site is pretty ancient, it doesn’t have the accurate chairs, and we need to make sure the bylaws are on there along with other relevant documents.
	3. November agenda
		1. We will work on this today.
	4. Open meeting law discussion
5. 2022-2023 planning charges and committees
	1. Visioning for ICC (the vision of the system)
		1. Being honest about where we are at and what we don’t know.
		2. What is the role that ICC plays within the greater system?
			1. There is a tremendous amount of opportunity and money coming in under infant and toddler care, in addition to increasing maternal mental health care opportunities, and overall increasing/expanding supports for infant and toddler care.
			2. Our vision is not what the ICC is going to do, but about whether we have a shared vision of what the ICC is going to look like, so we can use it to leverage increasing opportunities.
	2. This is a good reminder about the importance of a vision, and it (the vision) should be said at every ICC meeting. We need these connections to make a difference.
	3. ICC members, parents, non-providers, etc. occasionally don’t feel engaged due to the current setup of the ICC. Having a shared vision would help all those attend benefit from their attendance and participation.
	4. During the family retreat, participants brought up that they want to see families more prepared as they leave the EI system, had a specific list of items to work on, want providers to understand the models used (train the parents to train the kids).
		1. Every family has a different vision of EI to look like, every provider/person has a vision for what they want for the system, what is the vision for the entire system?
		2. This can help open the conversation up and provide a framework to respond to issues/challenges such as giving pediatricians better resources earlier. If we see a gap, we can help quickly because the ICC is an interagency council.
	5. What stands out for you in terms of our current emphasis on increasing member engagement, refining operations, and creating a shared vision for the work of ICC?
		1. If families knew services were out there, this could help families connect their children to services sooner than later
		2. we should be cultivating more information to get to them so we can have more impact on this issue during this cycle,
		3. “Advise/assist” was not happening in a way that was functional. The division has all of these things they are responsible for i.e., reporting;
			1. Everyone who sits on ICC should be involved in advising and assisting. When the IFSP was redone, for example, parents had a stake in the changes being made, it needed to meet DPH requirements, it had to be functional for pediatricians, stakeholders like the EEC.
			2. Stakeholders all contributed and had a voice in it.
			3. In the last few years, there were lots of division changes (some have been surprises to Program Directors); if we utilized ICC to advise and assist, the system would work for everyone as well as it could.
		4. ICC should be used for important issues that can be solved collaboratively.
		5. Maybe we need a nuts-and-bolts committee
			1. Is this ICC related or MEIC related?
			2. What is the role of a trade association? Where does the trade work begin/where does ICC start?
			3. Departments job is to regulate industry and that is between DPH and MEIC/where does the ICC fit in?
		6. Mental health focus: People who did not have mental health issues prior to COVID may have it now, how do we address it as a system?
		7. How can we engage our voting members?
			1. They show up for the meeting and that is it. Most do not participate in subgroups. Maybe we can have a two-minute timer, ask them to report to us about what is happening in birth to three in their specific area. This can be a great way to draw people in.
		8. Overall, the system is drained, from families to program managers.
		9. We should create more starting point documents for the FSPs, vision and hearing, and others. They are concrete/tangible, immediate, people will be happy to have something to touch and it can get out to the community quickly.
		10. Need someone to represent tribal councils
		11. Would love for us to get ahead of the curve; ahead of servicing families in a way that is proactive
		12. Craving to make ICC more useful
	6. How does this opportunity fit with our Standing Committees and FFY21 subcommittees?
		1. Racial equity and family engagement committees have a lot of opportunity to tackle the issue of engaging families.
			1. This can be done via many ways, such as recruiting and retaining a diverse workforce, reaching out to communities, schools, colleges/high schools, to achieve diversification in the field. More internship opportunities and working with families that are really struggling.
		2. ICC can be leveraged more often; establish more committees.
		3. Data requirements need to be more clearly flushed out, would have been a good discussion to have within the ICC
		4. What other things is the division tasked with that can be leveraged by the ICC?
	7. What is one thing we can all do as ICC members before the 11/10 General Session meeting to support our emphasis on establishing a shared vision for ICC in FFY22?
6. Charges
	1. Membership committee – continuing- work on gap assessment and developing a tactical plan to engage members
		1. Need to add worker bees to this committee
	2. Fiscal/operations – modifying-
		1. Mass Part C system has been placed for differential monitoring- audit, 3 years’ worth of documents required
		2. Fiscal seems particularly vulnerable
		3. Committee can offer recommendations and pilot fiscal procedures
	3. Visioning task force- establishing
		1. Creating a new task force that creates a strategic vision for the ICC.
		2. End product would be a shared vision that the entire ICC can get behind and get clarity on
		3. End products also include updating our website to reflect the new shared vision, along with updating member materials, orientation, and by laws.
	4. Family engagement- continuing
		1. Dispersing materials, NCSEAM family survey is how we obtain data on indicator 4. One of the things we’ve determined is we have a non-response bias, data set not consistently representative of communities served.
		2. Need help solving the nonresponse bias, particularly in communities of color.
		3. What changes do we need to make on where we announce the survey, how should we talk about it? What do we need to do differently to solve the non-response bias so our survey is more representative?
		4. This can be a way to provide input to the community; advising on the survey so families want to respond; getting information out to the community about early intervention services
		5. Families want something accessible: urgent care centers are a place families go to more often as it is more accessible; we should target these areas more for the survey
		6. There should be time to complete the survey at whatever appointments being offered.
		7. We should consider giving out rewards; incentives; and enticing people to complete the survey
	5. Racial equity- continuing
		1. Supporting culturally and linguistically appropriate services.
		2. First step is to develop and deliver a training to our contracted providers.
		3. Is there a place for the racial equity committee to assist with the indicator 4 data?
		4. We need someone to assist the staff person that is working on this; specifically, around the provision of CLAS services.
		5. Chair needs to undergo more specific training or a 1:1 session to make sure they stay on point in the survey.
	6. Steering- continuing
		1. TBD
7. November ICC Meeting Planning
	1. Proposal to start on 9am; with an addition of agency updates (15 min on the agenda) on birth to 3 updates in their area
		1. We should send agency representatives an email about what the expectations will be on agency updates
	2. Members: *Please send feedback on the agenda via email.*
	3. Subcommittees need to have introductory conversations so we may need more time for the November meeting.
	4. Perhaps we need to push the meeting end time to 1PM
8. Open meeting law questions
9. Next steps and closing