**ICC Retreat**

**10/6/22**

**11 am – 2 pm**

**Meeting Minutes**

**11:00 am:** Meeting called to order and roll call of appointed members. Chris Hunt provided opening remarks. Michelle led the group in a land acknowledgment to reflect on the native land we stand on. The co-chairs reviewed the meeting agenda and engaged the group in an icebreaker activity.

**11:10 am**: Eve Wilder presented an ICC Orientation presentation including an overview of the purpose and functions of the ICC.

**11:50 am:** Dr. White presented a brief Director’s report including local and national Part C updates for the group.

**12:00 pm:** The ICC took a 10-minute break

**12:10 pm:** Chris introduced the breakout room activities to review the goals and committee charges for the year. Chris reviewed the process for goal setting and drafting charges developing charges. He presented goals and proposed charges, including an overview of the process for their development. Each subcommittee was sent to breakout groups to refine proposed charges. Groups were organized by affinity (i.e. providers, families and state agencies/systems). Each group was asked to provide feedback on 3 goals and proposed charges and come to a consensus. Each group was asked to discuss which committee would be charged with doing the work for each goal/charge or identify if a committee needs to be developed. At the end, each group was asked to report out for discussion. Notes from breakout rooms are below:

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| **Performance Goal**: *Increase the impact of ICC in strengthening the Massachusetts Part C system, with activities focused on meaningful long-, intermediate- and short-term change.*  **Proposed ICC Charge**: *Establish and promote a shared vision for the ICC* | PROVIDERS:   * Need for clarification on proposed goal and charge * The changes over the past years have been difficult and have impacted shared goals/vision   FAMILIES – shared vision:   * Increase the impact of ICC and strengthen work of subcommittees * Help families become aware of resources that are in their communities and within the state of MA * Make sure we meet families where they are so they can access services and for them to feel most comfortable * Make sure resources are equitable * Bring awareness to the newer way of EI providing services. * Help families become more independent and able with the piwi model. Virtual and hybrid services. * Help prepare families for EI graduation: doctors, outpatient etc * Help support families who are overwhelmed, recognizing when families are burnt out but haven’t said it and helping. * Trauma training   STATE SYSTEMS   * Having a shared vision would help members understand how they can contribute/bring their expertise * A shared vision would provide a clear and common understanding of what the group is trying to accomplish * Important to understand what members can bring back from the ICC to their agency (communicating value of participating in ICC) in addition to the perspectives/content they bring to the ICC   + Idea – Create a document that links ICC activities with mission and activities of each partner * It has been unclear what is being asked of ICC members (expectations). A shared vision would help to provide more clarity. * It would also be helpful to have a shared understanding amongst ICC of who the members are and the expertise/perspectives they bring. * In a previous version of the ICC, members had space to provide updates. Many found this valuable. Can info/resource sharing be brought back?   + ***Communications charge for each committee or Steering?*** * Want to have clear, actionable ways for members to advise and assist. Miss the specialty service subcommittee. |
| ***Membership Goal:***ICC membership is diverse and representative of those who are impacted by Early Intervention services and advocates for and support systems level change.  ***Proposed ICC Charges:*** *Complete a membership gap analysis; Develop a Member Recruitment & Engagement Plan* | PROVIDERS   * Membership try out strategies from other goals to ensure we are representing the population we serve. * Ensure SSP participants? Are they participating and how can we better welcome them to the ICC and initiatives (3 were in the room) * How do we recruit for the vacancies on ICC membership? * Also, how do we ensure they are present and involved? * Who are the people on the membership and represent various backgrounds: ethnicity, culturally, linguistic, etc to reflect the families we work with * Noted there has been a broad participation in the past but not maintained or sustained; but loses the clarity   + What is the person's role?   + How are they expected to engage with ICC?   + Need for an ICC member engagement plan   FAMILIES – who should be involved in the ICC:   * Those who represent different ages (aged out and current) different demographics, different geographical areas and different disabilities * Voices from all different types of therapists are being heard as well as those who are in early childhood and make referrals   STATE SYSTEMS   * For clinicians/providers, important to think about ways that direct service providers can participate. Usually the Director has the capacity/flexibility to attend meetings. How can EI programs support staff in being able to participate?   + Some states offer incentives for EI providers to attend as well as include language in program contracts re. EI staff participating in ICC. * Important to ensure that child welfare/DCF is well represented. * Need to increase the effectiveness of council to increase participation of members. Members are busy. Prove that it brings value to their work. * A gap analysis would be helpful to identify important voices that are missing. Ex – would like to see a payer participate. * Concern that this goal and the two others are operational and not content-based. Hard to see where members can provide value and contribute their expertise. * ***Possible task:*** *Create a directory of ICC members that identifies their expertise/areas of focus. These members could be invited to participate in/present to subcommittees based on relevant agendas/discussions.* * ***Relevant committee – Steering*** |
| ***Operations Goal:***ICC is a high performing advisory board due to consistent, streamlined operational supports with clear and consistent management.  ***Proposed ICC Charges:*** *Recommend Fiscal Monitoring Procedures; Consistent Orientation to ICC members* | PROVIDERS   * Ensure that the Division is held accountable to provide the updated info that impacts the field in current time * Division provide information in a timely manner * Important to close loop on items discussed at ICC/recommendations shared * The ICC should have a focus on ICC standards   FAMILIES:   * Make it easy for families to participate in ICC/remove barriers (from report back)   STATE SYSTEMS   * Propose to broaden charge language to “monitoring procedures”. The charge would be inclusive of fiscal. * Would be helpful to share agenda topics in advance so members could identify which meetings would be most helpful to attend; members could be available by content expertise and not by subcommittee topic area |

**1:25 pm:** Next Steps and closing. The co-chairs thanked the group for attending and reminded them about the next meeting on 11/20/22.

**1:30 pm:** Meeting adjourned