

COORDINATING COUNCIL ON EARLY CHILDHOOD DEVELOPMENTAL SERVICES

October 4, 2002  
Meeting Minutes

Members Attending:

***TOPEKA SITE:***

**Alice Womack** (representing Secretary Schalansky)  
**Julie Stell** (representing Commissioner Sebelius)  
**Ellen Mellard**, Northeast Kansas Education  
Service Center  
**Maria Martinez**, Parent Member

***HAYS SITE:***

**Karla Kenton**, Parent Member

***WICHITA SITE:***

**Deb Voth**, Rainbows United - Wichita

***OVERLAND PARK (REGENTS CENTER):***

**Doctor Chet Johnson**, University of Kansas Child  
Development Unit  
**Senator Karin Brownlee**  
**Doctor Dave Lindeman**, University of Kansas  
Center on Developmental Disabilities  
**Susan Kunard**, Johnson County

***GARDEN CITY SITE:***

Sharon Hixson, Chair, Russell Child Development Center

***PARSONS SITE:***

None

Others Attending:

**Kathy Boyd**, Osage County  
**Phyllis White**, Wyandotte County  
**Julie Flory**, University of Kansas  
Student  
**Jill Hudson**, University of Kansas  
Student  
**Pam Alger**, Social and  
Rehabilitative Services

**Debbie Mai**, Rainbows United  
**Paco Price**, Rainbows United  
**KaAnn Graham**, Early Education  
Center  
**Terri Norgren**, Families Together

The meeting was called to order by Sharon Hixson, Chair. Introductions were made.

Doug Bowman reported InterHab, the association of Community Developmental Disability Organizations has filed suit against the State of Kansas. This suit is on the basis of the Developmental Disability Reform Act calling for the system being funded at a reasonable level. There have not been surveys done to assess the cost of services.

Doug Bowman introduced Susan Kunard a new provider member from the Johnson County Network.

Doug Bowman explained there is not a Kansas Department of Health and Environment or Kansas State Department of Education representative here today due to a meeting to look at the Office of Special Education Programs monitoring process. Doug has received written reports from both agencies.

Doctor Chet Johnson moved to approve the draft July 12, 2002 and the September 6, 2002 meeting minutes. Seconded by Doctor Dave Lindeman; passed unanimously.

#### **PUBLIC FORUM**

No concerns were expressed.

#### **THERAPEUTIC PRESCHOOLS**

Pam Alger, Social and Rehabilitation Services passed out handouts on Therapeutic Preschools, see attached. Pam Alger reported the legislature gave Social and Rehabilitation Services \$1 million dollars to fund Therapeutic Preschools. This program focuses on the mental health needs of early childhood aged children. The Division of Health Care Policy distributed the money through a request for proposal process to the community mental health system. The Request for Proposals planning process required Community Mental Health Centers to develop their proposals with other systems/agencies that serve young children (such as Local Interagency Coordinating Councils, Head Start Programs, Public Health Departments, Regular and Special Education, etcetera and parents of young children with severe emotional disturbance.

Pam discussed that 179 children were served by the actual preschool mental health collaborative project. Each of the therapeutic preschool projects are a collaboration between a Community Mental Health Centers and existing early childhood program (such as Head Start or the local school district, etcetera). This means that mental health supports and services have been implemented into existing early childhood/preschool programs. Even though the children received mental health services in the preschool setting, there is also a requirement that the mental health services follow the children into the home and work with the family if needed. There were 252 additional children served through other outreach and in-home services.

Sharon Hixson asked how to recognize the difference between these early childhood mental health services and special education for children who have emotional difficulty. Pam Alger

answered mental health centers work in collaboration with school systems around mental health needs for children. The mental health center may send an attendant to help stabilize the child with Severe Emotional Disability. If there is a long term ongoing need for the 1:1 support, then having a paraprofessional work with the child through the child's Individual Educational Plan, would need to be considered.

Ellen Mellard asked if eligibility is determined by a medical diagnosis. Pam answered eligibility is determined by a mental health diagnosis. Ellen asked how the program is funded, Pam answered the program is funded through tobacco funds.

Pam explained Social and Rehabilitative Services has developed an extensive evaluative process. There will be outcomes reports. Social and Rehabilitative Services is tracking risk factors, such as what services are most beneficial; maintaining the child in their home, with their families; keeping children in a natural preschool setting with same age peers, school readiness; social and emotional functioning, etcetera. Social and Rehabilitative Services will also track longitudinally how the children are doing after they have entered kindergarten.

All Therapeutic Preschool Projects (there are 6 grant projects) are collaborative endeavours with existing early childhood and/or preschool programs. This means that mental health services and supports have been implemented into existing preschool programs. Two of the sites are collaborations with Head Start, three sites are collaborations with local school districts special education services, and one site collaborates with any preschool/early childhood program in the two counties that the therapeutic preschool project is located. Grant recipients are:

- Area Mental Health Center (Finney and Ford Counties)
- Family Service and Guidance Center (Topeka Area, Shawnee County)
- Franklin County Mental Health Center
- High Plains Mental Health Center (provided throughout the 13 most Northwestern counties in Kansas. The main office is in Colby.)
- Johnson County Mental Health Center
- Mental Health Center of Crawford County

Doug Bowman asked what would happen to the 431 children if the special education tobacco dollars were not available for these services. Pam said if the children would have made it to the mental health center, then the traditional clinical outpatient mental health services are available such as family therapy and possibly medication management. The other services that have been developed for preschool aged children through this grant would not necessarily be available without grant funds.

Doctor Chet Johnson asked if children are receiving 40 hours per week of services. Pam answered the mental health system's case management model is both brokerage and service model, which means that case managers do work on connecting families to other resources, but they also provide supportive services directly to the child and the family. Additionally, there are other in-home services such as attendant care, parent support and training, in-home family therapy, community based psycho-social group, and mental health services supports provided in the child's preschool or school setting. Children with very high needs can receive a combination

of any of these services - whatever it takes to stabilize the child and support the child and the family in remaining together.

Senator Karin Brownlee asked how to measure success of children in the Therapeutic Preschool program. Pam explained there is an extensive evaluative process (see notes above on evaluation of the therapeutic preschool projects). Social and Rehabilitative Services evaluates social, emotional, and clinical functioning by using a clinical assessment tool. Other outcomes include maintaining the child in the home, assessing child and family risk factors (risk factors include abuse, neglect, if parent has a history of mental illness, if parent is or has been incarcerated, if parents have substance abuse issues, etcetera), and the longitudinal study. A major goal of the mental health system with the in-home services and supports that have been developed is to be able to work with families, despite the risk factors, to keep the child with their family. If, however, there are imminent and immediate safety concerns for the child, then the Community Mental Health Center would report concerns to and work with Local Child Protective Services.

Doctor Dave Lindeman asked if all the children are diagnosed with mental illness or mental health issues. Pam stated there is a specific group of children that would have an identifiable mental health diagnosis. There is another group of children who would be identified as at risk for developing mental health illness that are not actually diagnosed as such who could also be receiving supports and services through the project. Pam explained it depends on each child and their individualized needs/circumstances.

A question was asked about Community Mental Health Center services and special education services. Pam gave a brief description using the numbers of children served through community based services and supports by Community Mental Health Centers. The Kansas mental health system currently has 4,000 children (this number does not include the children receiving services through the Therapeutic Preschool Projects nor does it include all children served by Community Mental Health Centers) who receive in-home and community based services and supports from the Kansas community mental health system. All of the children who receive in-home and community based services and supports are experiencing a serious emotional disturbance. Of the 4,000 children, about fifty percent are also identified through the education system and are receiving special education services and have Individual Educational Plans at school. The eligibility criteria which identifies a child as Severe Emotionally Disability and eligible for in-home community based services and supports through a Community Mental Health Center and the criteria establishing a child eligible for special education services are different. Therefore, the target populations for services provided by the two systems are different. It is also important to note that the Community Mental Health Center would concentrate on all mental health needs of a child, while a school would concentrate on needs related specifically to the educational/learning process.

Doctor Dave Lindeman asked what determines when a child leaves a Therapeutic preschool program. Pam answered it could be that child's clinical functioning has improved to the point that mental health services and supports are no longer needed in the child's preschool setting or that the child went on to kindergarten or first grade.

Doctor Chet Johnson asked about outcome measures for older children on functioning or parent child interaction. Pam answered that in addition to the outcomes already described, Therapeutic Preschool projects are using the child behavior checklist for parents and teachers.

### **TASK FORCES/COMMITTEES**

Doug Bowman discussed the three separate task force meetings. The task force on Newborn Screening for Developmental Delays had a teleconference on September 20, 2002. The consideration was to look at what kind of data to review. Some issues were low birthweight, APGAR scores and a list of medical conditions. They discussed the method of referral and it became evident that there is a data base in existence from birth certificates. It was decided to initiate a conversation with staff from Kansas Department of Health and Environment and the Office of Vital Statistics to explore the possibility of accessing that data collected on birth certificates to help identify children that meet one of several targeted conditions. This initiative will require a statutory change. Doctor Chet Johnson added the overall purpose is to utilize existing vital statistic data to identify children that we know will have delays or at significant risk for delays to enable those children to get into infant toddler/early intervention programs earlier than typically referred. There are local agreements that work well and we do not want to interfere with them. Confidentiality issues will need to be settled.

Task Force on Parent Participation met by teleconference on September 26, 2002. Doug explained he will schedule a teleconference for parents a week or two prior to the State Interagency Coordinating Council meeting. They discussed having a cover sheet list the highlights from the Interagency Coordinating Council meeting attached to the Interagency Coordinating Council meeting minutes. Doug discussed the possibility to offer an opportunity of a mentoring program to the new parent members. Doug discussed the creation of a new list serve, specifically for parent members of the local and State Interagency Coordinating Councils. Doug discussed revisiting the Community Fair concept.

Task Force on Interagency Coordinating Council Operations met by teleconference on September 30, 2002. Doug discussed a cover sheet in bulleted fashion for the Interagency Coordinating Council meeting minutes which will make them more user friendly. The agency reports will be streamlined. Written reports will be attached to the minutes.

The Task Force recommends a continuation of monthly meetings, for now. If the task forces and committees become more functional, then we reduce time for full Council meetings to schedule task force/committee work. The location of the Interagency Coordinating Council meetings will change periodically. The November 1<sup>st</sup> Interagency Coordinating Council meeting will be located in Junction City at the Education Support Center in the Board Room at 123 North Eisenhower, Junction City, Kansas.

The Interagency Coordinating Council Chair may appoint members and non-members to a committee or task force. It appears non-members may also serve as chair of a council task force/committee.

The recommendation for the funding committee is to split the activities into two separate entities. One would be the funding activities and the other being an advocacy group.

For communication, Council members may be matched to Interagency Coordinating Councils. Who are the primary customers of the 37 Infant Toddler Networks, who are responsible for the implementation of services for children birth to their third birthday with special needs or the Local Interagency Coordinating Councils.

The Coordinating Council on Early Childhood Developmental Services committee structure was discussed. It was decided to keep Quality Services committee with Newborn Screening as a task force under it. Interagency Coordinating Council Operations would be kept as committee with parent participation under that committee. Funding Committee with advocacy under this committee. Doctor Chet Johnson made a motion to endorse the three task forces be pulled together into a strategic plan and present in November. Doctor Dave Lindeman seconded the motion; passed unanimously.

### **2003 STRATEGIC PLAN**

Doug Bowman asked for changes and or additions to the strategic plan be submitted to him or the chair.

**KANSAS DEPARTMENT OF EDUCATION** - Doug Bowman reported for Marnie Campbell Marnie Campbell's written report is attached.

The Kansas Department of Education has been receiving phone calls from locals regarding the participation at the Individual Education Plan meetings of a regular education teacher.

Lots of questions are asked about Head Start-school collaborations and categorical aid. Those who have called are being asked to write letters so if this is a systemic issue, the powers that be can deal with it. I'd like to have this on the agenda for next month's meeting as an interactive topic to discuss.

The information presented at the Midwest Faculty Institute was well received. Doctor Dave Lindeman reported there were 20 faculty from different community colleges and four year colleges from Kansas. There were workshops on early literacy. Collaboration was a issue.

The Midwest Faculty Institute will draw nearly 200 Early Childhood faculty from 5 states: Kansas, Missouri, Nebraska, Iowa, Oklahoma.

Kansas State Department of Education staff have been concentrating on the final preparations of the Office of Special Education Programs Self-Assessment before it is reviewed by the Steering Committee (also October 4!).

Lots of fall presentations and workshops in the Early Childhood world. School Readiness will be covered at all major conferences/conventions.

Kansas Inservice Training System scheduled a meeting with Carol Dermeyer and Marnie Campbell last Friday, to consider the Least Restrictive Environment issue in preschools and the Office of Special Education Programs Self-Assessment finding that as a state we are far under the national percentage of children in typical Early Childhood settings. Doctor Dave Lindeman reported the majority of children that are age three to five years old in Kansas are in self contained special education type settings opposed to community settings. This brings up training issues, how to develop training and working with those people in direct service and administrators, Kansas State Department of Education regional consultants and through the Kansas City framework where special education directors come together and discuss issues.

**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT** - Doug Bowman for Carolyn Nelson

Carolyn Nelson's written report is attached.

Doug Bowman reported there is an Office of Special Education Programs meeting being held today in Topeka. A report will be turned in to the feds by October 18, 2002. A self improvement plan will be forwarded by next summer.

A memo was received from the Office of Special Education Programs concerning Health Insurance Portability and Accountability Act. This covers provisions dealing with the way information is distributed and shared.

The next Part C coordinators meeting is scheduled for Salina on November 13<sup>th</sup>, 2002. There will also be a meeting with Infant-Toddler network data people who will meet with Jim North regarding further implementation and refinement of the Part C data system.

The annual report has been printed and is almost ready for public distribution. After an insert is added then this report will be distributed.

**SOCIAL AND REHABILITATIVE SERVICES REPORT** - Alice Womack

Social and Rehabilitative Services has been targeted for a budget reduction that will impact monies to distribute. For Fiscal Year 2003 Social and Rehabilitative Services will not offer grants to child care centers. There have been reductions made in the child care resource and referral agency statewide, to the professional development initiative and their Infant-Toddler initiative that provides support and education for providers that work with infant-toddlers and to the early Head Start program.

The Head Start collaboration office is planning a healthy smiles conference scheduled in February that is an oral health initiative for parents and providers of infants and toddlers. There

will be a fatherhood conference in April. The goal of the conference is to make sure that fathers across the state of Kansas are involved in the early education and development of their children.

There is an economic impact study started through Butler County Community College. This will look at the childcare industry as an economic factor in Kansas.

There are several strategic planning efforts going on in early childhood in Kansas. One is with the school readiness task force, social and emotional development for children planning group and Kansas Action for Children has one on public awareness and education. These three groups will combine efforts to look at building an early childhood landscape and from there build a strategic plan.

**INSURANCE COMMISSION REPORT** - Julie Stell

Julie Stell reported the Kansas Insurance website address is [www.ksinsurance.org](http://www.ksinsurance.org) . Press releases are available on their website along with information from questions you may have. Also available are e-mail addresses and phone numbers for those at the Kansas Insurance Department.

**COORDINATOR REPORT** - Doug Bowman

Doug reported the 2003 task force meetings will be held monthly. The Council will continue to do interactive television on a quarterly basis. The September 2003 meeting will be a day long retreat. The January 2003 meeting will be scheduled January 10<sup>th</sup> in the morning from 9:00 am to 12:00 by Interactive Television.

The National Early Childhood Technical Assistance System sponsors a national meeting for those involved in early intervention birth through five in Washington District of Columbia in early November. Doug Bowman will be attending along with a parent member and staff from Kansas Department of Health and Environment and Kansas State Department of Education.

The Interagency Coordinating Council meeting scheduled November 1<sup>st</sup> will be located in Junction City at the Education Support Center in the Board Room at 123 North Eisenhower in the afternoon. A van has been reserved.

Doctor Dave Lindeman announced teacher licensure through the Kansas Department of Education, a supplement to their state improvement grant was written. This grant focused on early childhood and the licensure. The application will be funded in the amount of \$415,000. This is a one year grant. The bulk of the money will go to the Institute of Higher Education to revamp their curriculum to address the new licensure. A part of the activity of the grant will be to support faculty coming together and looking at utilizing additional ways of education.

**ADJOURNMENT** - Maria Martinez made motion to adjourn. Seconded by Doctor Chet Johnson. The meeting adjourned at 4:00. The next meeting will be November 1<sup>st</sup>, 2002, in

Junction City, at the Education Support Center in the Board Room at 123 North Eisenhower,  
Junction City, Kansas.

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