



Dana McGrath ECI Director

## A Message from the Director

I recently had an opportunity to hear Anne Grady talk about resilience at my kids' school. Anne is an author and public speaker and has a child with mental illness who was served in the Texas ECI program as a toddler. I've heard her speak before and have always been inspired by her messages, and I was inspired to share with all of you a simple but important wellness reminder that I got out of her talk.

Anne shared a story about her mother, who is a flight attendant, and the joke she sometimes conveys in the in-flight announcements that "in the sudden loss of cabin pressure, please place your oxygen mask on first and then assist your child. If you have more than one child, pick your favorite, or the one with the most potential." Ha. But the reason they ask adults to put their masks on first is because if you aren't breathing, you won't be able to help anyone else. Whether it's taking time to exercise, get a massage, get enough rest, spend quality time with your loved ones, meditate, read or just sit quietly, we all need activities that recharge our batteries.

In ECI, you work hard, and your work is important. But you can't do what you do to assist others as effectively if you aren't taking care of yourself.

May is National Mental Health Awareness Month. Exercising, getting plenty of sleep, good nutrition and having a healthy self-image are just a few things that are key to building balance and overall wellness. To learn more, here are a few resources you may find of interest.



Vol. 4, No. 3 — May 2019

#### In this issue:

Child Outcomes State Fiscal Year 2018......2

Annual Performance Report Federal Fiscal Year 2017.......3

All About Monitoring Resources ......4

Texas Health Steps Medical Checkups......5

Seven Texas Agencies Collaborate to Help Littlest Texans and Their Families....6

| Revigate Life Texas   | Institute & Sectorpoor   |
|---|--|
| <u>•</u> <u>•</u> <u>•</u> <u>•</u>   |  |
| C Mental and Behavioral Health  |  |
|   |  |
| the state of the s                      | -  |
| The part of a single part of the energy state, the part of the second state of the sec                      | Reserved<br>O Dependent Healthcare   |
| parts or an employed with reaction that childs during per strate, and registring the real.<br>Their edges approach, the part is install in appendix the card watch and marked the part<br>and appendix the control of the strategies. The child is installed and the part of the strategies and<br>polled processing and the control of the strategies and the strategies and the<br>polled processing and the control of the strategies and the strategies and the strategies and the<br>strategies and the strategies and the strategies and the strategies and the strategies and the<br>polled processing and the strategies and the strategies and the strategies and the strategies and the<br>strategies and the strategies and the str | Marcined<br>Dispersit & Healthcare<br>Frank & Index Seaso  |
|   | Paran Transf.<br>© Diagnonia & Hankhanan   |
| you'r a ceinearlann che russen franz della hang per monar, est autoria per en<br>la russe para para la russe para para para para para para para par   | Marched<br>O Depose & Heathcare<br>Instal Colored Sector   |
| you're ar endoren me'r earter fel yn fel yn hynn yn er endoren yn yn yn yn er endoren yn yn yn yn yn er fel yn yn yn yn hynn yn  | Here: Herd<br>Dispanses & Headblocker<br>Here: Herd Herder Street<br>Here: Herder Herder<br>Here: Herder Herder<br>Here: Herder Herder<br>Herder |

Navigate Life Texas



Mental Health America



Speak Your Mind



National Alliance on Mental Health



Promoting Mental Health Awareness in Texas



### **Child Outcomes State Fiscal Year 2018**

The table below illustrates the child outcomes data for SFY 2018 for each of the three outcome areas. For each summary statement, the table shows the number of contractors within each ten-percentage-point range. The state mean and range are shown below as well. The data points in the table can serve as a reference to gauge your child outcomes performance. We encourage you to access the child outcomes reports available on TRAD to track your program's performance.

#### Outcome 3: Use of **Outcome 1: Positive Outcome 2: Acquisition and** appropriate behaviors social-emotional skills use of knowledge and skills to meet their needs Percent of **Enrolled Children** Who Reached Outcome **SS1\*** SS2\*\* **SS1\*** SS2\*\* **SS1\*** 10-20% 0 0 0 0 0 21-30% 0 1 0 8 0 31-40% 0 9 0 16 0 41-50% 11 0 4 0 10 12 9 3 51-60% 6 2 61-70% 9 8 8 0 3

19

11

3

76%

95%

57%

2

0

0

50%

75%

28%

### **Child Outcomes State Fiscal Year 2018 — Count of Programs**

### \* Summary Statement 1:

71-80%

81-90%

91-100%

Mean

Highest

Percentage Lowest

Percentage

Of those infants and toddlers who entered early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

19

5

0

69%

91%

40%

### \*\* Summary Statement 2:

0

0

0

40%

59%

22%

The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

17

19

1

78%

93%

55%

SS2\*\*

1

1

8

12

16

4

1

0

0

49%

73%

20%

# ECI Data continued

### State Fiscal Year 2019 Routine Reports Update: Consolidated Monthly and **Quarterly Reporting**

Starting Fiscal Year 2019, there were changes to the reporting format of the monthly and guarterly CRIB reports that are posted to the Extranet routinely. Each contractor's monthly reports are in a consolidated Excel file. Similarly, the quarterly reports are in a consolidated Excel file as well. Any questions regarding the reports should be sent to ECI TKIDS mailbox at eci.tkids@hhsc.state.tx.us.

### Annual Performance Report (APR) Federal Fiscal Year 2017 (SFY2018)

The APR was submitted to the Office of Special Education Programs (OSEP) on February 1, 2019, and is under review. After the APR is approved by OSEP, programs will receive their local program performance reports.

## Understanding the Importance of Cultural Competency

enerationa

Understanding how cultural values and expectations may impact your conversation with a family is critical. A family's culture is a pattern of behavior that is passed on from generation to generation. It includes language, religious ideals, emotional responses, and patterns of social and interpersonal relationships. Culture defines how groups of people will conduct themselves with regard to beliefs, values, and traditions.

Culture influences all provider and family interactions; therefore, being culturally sensitive and having a basic understanding of the wwet veligious ider different cultural practices you may encounter are important to establishing the partnership tood behaviors child rearing between you and the family.

Cultural sensitivity does not mean knowing everything there is to know about every culture represented in your service area. However, it does mean having some general knowledge or awareness.

Culture is not about a place, but rather about people who are constantly changing. It is important to recognize that each family and individual may have some characteristic of their generational group culture but is also unique in their own way.

When you have a basic knowledge of culture, you are more aware of what a family's perspective might be and can be ready to respond appropriately. It can also help you pick up on nonverbal cues from the family, which will allow you to be more responsive to a family's concerns or needs.

Everyone has a cultural context that shapes how they respond to situations and events in their lives. It is often easier to identify culture in others than in ourselves. For some of us, our cultural identity is clear, but for many it is more difficult because it is simply a part of how we know ourselves.

> Understanding your own culture and cultivating self-awareness is critical in your work with families as it influences the conversations and interactions you have.

Take a moment to think about how you, your decisions, and your communication style are shaped by the beliefs and values of your family of origin. Remember that your values are not good or bad, they are simply a part of your cultural perspective. Being aware of your values, without passing judgment, will help you do the same with families.

# All About Monitoring Resources

### **Fiscal Monitoring**

The HHSC Fiscal Monitoring Unit recently released the HHSC Grantee Fiscal Monitoring Review Guidelines, which are designed to assist contractors in identifying common findings in financial monitoring reviews. The guidelines are not all inclusive and are limited to fiscal compliance. Information about the guidelines, including a copy of the guidelines, were included in a numbered document, FY19-ND-12-HHSC Grantee Fiscal Monitoring Review Guidelines, which was sent out on March 27, 2019. Contractors are also encouraged to review the Grant Technical Assistance Guide, which is available on the Health and Human Services website at <u>https://hhs.texas.gov/file/80501</u>.

As always, contractors are required to follow the rules and regulations outlined in their contract, including:

- 2 CFR §200 Uniform Grant Guidance (UGG)
- <u>34 CFR §303 Early Intervention Program for Infants</u> and Toddlers
- Uniform Grant Management Standards (UGMS) -State of Texas Single Audit Circular
- Texas Administrative Code, Title 40 Chapter 108

# **Administrative and Programmatic Monitoring**

The FY2019 administrative and programmatic onsite monitoring season kicked off in January, and the ECI Performance Managers (PMs) have already racked up more than 1,000 miles driven this year. With several monitoring trips completed, the PM team have compiled a set of "common errors" and helpful tips for contractors who will have an administrative and programmatic monitoring visit:



### Maintain proof that all direct service staff have fingerprint background checks.

PMs should not see the actual background check results for any staff member; however, should see supporting documentation indicating a check was completed and reviewed by the appropriate staff within the contractor's agency. To meet this requirement, the contractor may provide a printout of the list of background checks conducted through the DPS system. Staff outside the scope of the review may be redacted.



### Be able to demonstrate that reasonable effort was made to provide services in the child's and family's native language.

Texas Administrative Code §108.203 indicates contractors must make a reasonable effort to provide appropriate interpreter or translation services in the child's native language. Contractors should provide forms and services in the child's and family's native language. If forms in the family's native language are not available, the contractor should have bilingual staff or an interpreter translate the forms for the family. At no time should a family member act as a translator. When providing services in a language other than English, the service provider should document on the service note that services were provided in the family's native language.



### Ensure outcomes are specific, measurable, attainable, relevant, and timely, or "SMART".

Outcomes should tie to the needs identified in the Individualized Family Service Plan (IFSP) and should be measurable. Outcomes should demonstrate mastery of the component reflected in the IFSP. Outcomes should be written so families can easily measure success. For instance, saying "Child will walk every day", does not indicate how many steps or how far, or for how long the child should walk. A more appropriate outcome would be "Child will walk at least 20 steps three times a day, every day for one week consecutively."

# **Texas Health Steps Medical Checkups**

The Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) service is Medicaid's comprehensive preventive child health service for individuals from birth through 20 years of age. In Texas, EPSDT is known as Texas Health Steps.

Texas Health Steps provides free medical checkups starting at birth, and free dental checkups starting at 6 months of age. Checkups can help find health problems before they get worse and harder to treat. Checkups can also help monitor conditions as children grow up. Service coordinators familiar with Texas Health Steps can help families access these benefits for all children in the household who receive Medicaid. Texas Health Steps publications can help support referrals for services and family education. The three publications shown below are specific to medical checkups and can be ordered online free of charge. Service coordinators can use these as a guide or give the informational materials to parents or guardians.

For children and young adults, birth to age 20, who receive Medicaid, call Texas Health Steps toll-free, Monday-Friday, at 1-877-847-8377 for help finding a doctor, making an appointment, or obtaining information about free rides to health care appointments.

### Order Texas Health Steps publications at <u>www.dshs.state.tx.us/thsteps/THStepsCatalog.shtm</u>



(EPSDT-05) This publication explains the services Texas Health Steps provides.

(EPSDI-T6) This publication gives tips on how to make visits to the doctor or dentist go smoothly for clients.

This publication details the recommended schedule for Texas Health Steps medical checkups every child should have.

### Seven Texas Agencies Collaborate to Help Littlest Texans and Their Families

Texas is one of 45 states and territories that has been awarded a Preschool Development Grant Birth–Five from the U.S. Department of Health and Human Services and the U.S. Department of Education. States are required to carry out five activities under this grant:

- Conduct a statewide birth–five needs assessment of the availability and quality of existing programs in the state and the number of children being served and awaiting services.
- Develop a statewide birth–five strategic plan that recommends collaboration, coordination, and quality improvement activities among existing programs.
- Increase parental choice and knowledge about the existing programs in the state's mixed delivery system and how to support their child's development.
- Share best practices among early care and education providers to increase collaboration and efficiency of services.
- Improve overall quality of early care and education programs.

The Texas Education Agency (TEA) has reformed The Texas Early Learning Council (TELC) to guide these activities in the current year and help ensure Texas achieves its vision for the grant: Thriving children in strong Texas families empowered by state and local systems.

The TELC is comprised of the following Texas agencies:

- Texas Department of Agriculture
- Texas Department of Family and Protective Services
- Texas Department of State Health Services
- Texas Education Agency
- Texas Head Start State Collaboration Office
- Texas Health and Human Services Commission
- Texas Workforce Commission

TEA recently conducted a statewide survey to better understand the needs and challenges of those accessing, providing, and supporting early childhood programs and services in Texas, receiving almost 9,000 responses from across the state, including responses from every county in Texas. This was just one of the activities the state is undertaking to implement the Preschool Development Grant for Texas. Visit *earlylearningtexas.org* to learn more about TELC.



Members of The Texas Early Learning Council (visit earlylearningtexas.org/telc-members.html to see a list of member names and bios)

### We welcome your input!

Email your feedback, suggestions or questions related to the newsletter to <u>eci.connection@hhsc.state.tx.us</u>. Messages to the *ECI Connection* mailbox should pertain only to the newsletter.