**CSHCN Program Mission:** To promote integrated systems of care which assure the population of children with special health care needs the opportunity to achieve the healthiest life possible and develop to their full potential.

**CSHCN Communication Network Purpose:**
Provide for exchange of information among those programs and entities that serve children with special health care needs and their families, and facilitate an opportunity to learn more about statewide policies, programs and issues critical to this unique population.

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Children with Special Health Care Needs (C SHCN) Program Update
Meredith Pyle
www.doh.wa.gov/YouandYourFamily/InfantsChildrenandTeens/HealthandSafety/
ChildrenwithSpecialHealthCareNeeds.aspx

C SHCN Program Updates

The 2018 Legislative Session started on January 8, 2018 and is expected to be a short 60-day session. There are many websites to get information about legislative session. Washington State Legislature’s website is: http://leg.wa.gov/. The Children’s Alliance tracks legislation impacting children’s health at https://www.childrensalliance.org/. The WA Chapter of AAP (WCAA P) released a legislative “active issues” page for 2018: http://wcaap.org/advocacy/active-issues/. Some legislative advocacy activities during this session that we are aware of include the Arc of WA’s Advocacy Days- there are many to choose from, including the 37th Annual Statewide Disability Legislative Reception on January 17, Self-Advocacy and Disability Pride on January 31, Family Services (including multicultural families) on February 7, and Disability Protections on February 14. For a full list of dates and details from the Arc, visit http://arcwa.org/index.php/takeaction/washingtonstate/advocacy_day.

Staff Updates: Healthy Starts & Transitions (See Attachment #1 for PowerPoint presentation.)
After 25 years of service to the people of Washington and nearly four decades in the field of public health, Maria Nadella, manager of the Healthy Starts and Transitions Unit, has retired. She is very humble and requested no party or celebration. We honor Maria’s countless contributions to child and family well-being in our state and the nation. Her commitment to building and improving systems of care and willingness to innovate have made Washington a national leader in providing services for children with special health care needs. Maria has been a trusted colleague, advisor, and friend to many at DOH, in our state, and across the nation. Here are a few very brief illustrative examples of Maria’s contributions during her
career: developed a workforce in Washington state to address the nutrition needs of Children with Special Health Care Needs; coauthored *The Nutrition Interventions for Children with Special Health Care Needs* (2002) which is used across the country; expanded access to community-based care for children with neurodevelopmental conditions through the formation and growth of a network of Neurodevelopmental Centers through an innovative partnership between DOH, HCA, and the providers; conceptualized and launched the medical home neighborhood project in the Pediatric Transforming Clinical Practice Initiative in alignment with work happening in Accountable Communities of Health maintained focus of the needs of CYSHCN and their families through multiple MCH Block Grant transformations and major state and national health systems reform efforts; consistently advocated for fostering leadership among women, parents and caregivers, and youth and lifted their voices to inform and be part of our maternal and child health programs. We will miss Maria’s passion, systems thinking, problem-solving skills, persistence, and dry sense of humor and we congratulate her on a successful career with wishes for enriching retirement with more time in the sunshine, out on her bike or skis, and with her family. We are also THRILLED to announce that Maria is the recipient of the 2018 AMCHP Vince Hutchins Leadership award. AMCHP established the award to honor a recognized national leader with a long record of significant contributions to society and demonstrated accomplishments that advance the health of American women, children, youth and families, including those with special health care needs. Previous winners of this award include Michelle Obama, Hillary Clinton, Marian Wright Edelman, Maxine Hayes, Bonnie Strickland, and Senator Ted Kennedy.

We have another team member who is retiring. After 31 years of state service (including 5 years with the CSHCN Program), Joan Zerzan is retiring. Her last day is March 15, 2018. Joan has many accomplishments and achievements that we will be sharing via email closer to her retirement date. We will miss Joan deeply.

**Child Health Intake Form (CHIF) Database**

Request for Proposal (RFP) 22869 has officially “hit the street” for potential vendors to place a bid on the CHIF Redesign project. Closing date to submit a bid is February 9, 2018 and our goal is to have a vendor identified by March 27, 2018. The projected date for implementation of the new database is October 1, 2018. (See Attachment 2 for RFP Notice.)

**Washington Statewide Leadership Initiative (WSLI)**

We are working on a Communication plan which includes a formal listserv that will allow people to subscribe/unsubscribe. In addition, we are developing a public facing website to house leadership materials, curriculums, and events for our WSLI coalition members. Jill McCormick @PAVE is leading a workgroup to develop the web content and determine administrative access. For information on how to join the website development committee, contact Jill McCormick at PAVE.

We are working now with the MCH Workforce Development Center and they have agreed to come to WA to conduct a Results Based Accountability training on how to do outcome based program planning and evaluation! This is so exciting, because it was my hope to help offer this training to all of the organizations, like local parent to parent and other nonprofits who are wanting to learn more about how to design outcome based projects and evaluate them. We are tentatively planning late Feb/Early March and are doing an environmental scan of other possibly conflicting events—so if you are interested in this training and have major activities during that time please let me know. And YES I said WORKSHOPS plural! It is our initial plan to try to offer at least one in Eastern WA to help Eastern WA programs have easier access to this really amazing resource!

*For more WSLI information, please contact Michelle Hoffman at 360-236-3504 or michelle.hoffman@doh.wa.gov.*

**CSHCN Nutrition Needs Assessment**

We have completed data collection which includes survey data from 130 RDNs across the state (70 Nutrition Network and 60 WIC), 17 parent phone interview/focus groups, and 13 Providers. We are evaluating this and other data sources (CHIF, NDC reports, WIC Nutrition Risk data, and others) and plan on summarizing data and discussion in a report that will be made available within the next few months. On first review it appears that we have input from all four regions of the state. Thanks to all of you who helped in the recruitment process, and even participated in the provider interviews.

*For more information on Nutrition Needs Assessment, contact Joan Zerzan at 360-236-3561 or joan.zerzan@doh.wa.gov.*

**CSHCN Rule (Washington Administrative Code-WAC) Update**

The DRAFT rule is ready for reviewers. Please let Ellen Silverman (contact info below) know who is interested so we can add them to our email distribution list.

As a reminder, from the October 2017 CommNet meeting minutes: “The Children with Special Health Care Needs Program WAC (WAC 246-710; [http://apps.leg.wa.gov/wac/default.aspx?cite=246-710](http://apps.leg.wa.gov/wac/default.aspx?cite=246-710)) is being updated. The last time most sections of this WAC were updated was in 2003, and other sections haven’t been updated since well before then. This WAC was previously under the authority of the State Board of Health until they determined that DOH should be the...
agency authority. The CSHCN Program is taking the lead to update the WAC. Updates will focus on updating language and definitions. There will be opportunities for partner and public input and comments- we are following agency procedures and will engage volunteers from Communication Network and elsewhere.”

For more information, contact Ellen Silverman at 360-2236-3580 or ellen.silverman@doh.wa.gov.

AS3D (Autism and Other Developmental Disabilities) Grant

HCA is revising WAC 182-531A-0800, Applied Behavior Analysis (ABA) - Provider requirements, to align with new credentialing for Applied Behavioral Analysis providers through the Washington State Department of Health under Chapter 246-805 WAC. (WSR 18-02-063)

Telehealth (TH) (Goals 1, 3, Objectives 1.3, 3.2, Strategies 1E, 1H, 3C) The Telehealth Ad hoc Committee, led by HST’s Nurse Consultant, Ellen Silverman, has made amazing progress in the development of a Telehealth Capacity Assessment to be released the end of this January. The Capacity Assessment blends the perspectives and experiences of providers and families and as well as the literature. The AS3D Telehealth (TH) ad hoc committee has now met 6 times providing great insights around issues of telehealth for children with ASD/DD and their parents and providers. We are in the process of developing an AS3D TH Strategic Plan. More to follow in the next update.

Family Navigation (Goal 2, Objectives 2.1, 2.2, Strategies 2A-E, ) The Family Navigation Ad hoc Committee, led by CSHCN’s Family Engagement Coordinator, Michelle Hoffman, continues to reach out with their respective training curriculums and modules (both in-person and online) for Family Navigators to increase their capacity and effectiveness across the state to guide families through and around barriers in the health care system, and assist them in accessing and/or receiving care for their children with ASD/DD. The trainings will be conducted by AS3D Contractors and Family-led organizations, Northwest Autism Center, Open Doors for Multicultural Families and Washington Autism Alliance and Advocacy. As this initial training curriculum has been completed, a spreadsheet list of potential recipients to receive Family Navigation training has been developed, and contractors are currently working with the CSHCN Evaluation Team to create standard knowledge gain evaluation questions. Please check out the upcoming trainings (see Attachment’s 3, 4, 5, & 6) from Open Doors on February 8th and March 2nd (both in-person trainings from 9-12), Washington Autism Alliance & Advocacy (online training) and Northwest Autism Center (in person trainings for February & March).

2017 Annual WAAC Meeting (Washington Autism Advisory Council) (Goal 3, Objective 3.1, Strategy A): “Maintain and build on existing statewide WAAC infrastructure to address policy and structural deficits that contribute to delays or unmet needs in identification of and access to needed services for children and youth with ASD.” The 2017 annual WAAC Meeting was held in November and was met with great success! This was the first time in several years that the DOH, CSHCN program hosted and was a true collaborative effort with our Statewide Partners. Funding was provided by the AS3D Grant. The spotlight focus was on improving access to evidence based treatment and medical services for persons with Autism throughout the state with presentations and round table discussion. You can read more about the meeting here: http://medicalhome.org/stateinitiatives/autism-systems-work/washington-autism-advisory-council-waac/#materials

*Congratulations* to Ginger Kwan, Executive Director of Open Doors for Multicultural Families (and AS3D Partner) for receiving the “2017 BECU Member Volunteer of the Year Award” and $50,000 for their outstanding efforts in helping diverse families with members who have developmental or intellectual disabilities by providing information and programming that is both in their own language and culturally relevant. Here’s a link for more information: https://www.kentreporter.com/business/kent-based-open-doors-for-multipultural-families-receives-50000-through-becus-people-helping-people-awards/

For more AS3D grant information, please contact Jean-Marie Dymond at 360-236-3737 or jean-marie.dymond@doh.wa.gov.

Middle Childhood Health

On November 1, 2017, the first annual Connecting Communities: Moving Towards a Common Vision of Middle Childhood Health and Wellness summit was held at Daybreak Star in Seattle, WA. There were over 170 participants from community providers, educators, medical providers, policy advocates and parents. The overwhelming message that was received from participants was that this conversation and information is needed and must continue.

The 2nd annual Middle Childhood Health and Wellness summit is being planned in Spokane, WA in July 2018. If you are interested in participating in the summit planning please contact Shanne Montague.

For more information, please contact Shanne Montague at 360-236-3560 or shanne.montague@doh.wa.gov.

Essentials for Childhood (EfC)

Washington was one of five states awarded a competitive, five-year CDC Essentials for Childhood grant in 2013. The grant supports collaboration to promote safe, stable nurturing relationships and environments for children and families. Recent and current activities include:

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• Shared learning and raising awareness:
  o The EFC Community Stakeholder Education and Action workgroup is working to convene a partner-driven “community of practice” to support, connect and raise up community groups working to prevent ACEs, support resilience, etc.
  o DOH staff maintain an “ACEs and Resilience” email list that regularly shares a variety of resources and information. Staff also maintain and distribute “ACEs and Resilience” resource lists.
  o On online community shares information on ACEs Connection, Washington State ACEs Action page http://www.acesconnection.com/g/washington-state-ace-s-group.

• Systems, programs and policy:
  o The EFC Systems, Services and Implementation workgroup is promoting the Help Me Grow framework as a community drive systems model for connecting children and families to resources they need to grow, develop and thrive. They are developing a Theory of Change that illustrates their vision and an action plan for getting there. You can see a 15 minute video that describes the Help Me Grow approach and how it is being adopted in Washington, http://www.withinreachwa.org/courses/help-me-grow-system-overview/. The 2018 National Help Me Grow Forum is in Seattle April 4-6. We are looking forward to highlighting Washington work on this national stage.
  o EFC Policy Agenda. In October, the EFC Steering Committee adopted two policy priorities.
    o Expand the Help Me Grow systems approach
    o Increase access to quality home visiting programs

By agreeing to these policy priorities, the Steering Committee agreed to raise awareness through shared messaging and data, coordinated actions across partners, and align resources. We are excited that the Governor’s proposed budget includes additional funding for home visiting.

For more information about EFC, please contact Marilyn Gisser at 360-236-3503 or marilyn.gisser@doh.wa.gov.

Project LAUNCH (PL) Expansion
Element I of PL is continuing to bring on more licensed child care providers who want to participate with LAUNCH for UDS implementation in all three pilot communities. So far we have trained over 200 licensed child care providers.

PL is continuing to work with the Washington Association for Infant Mental Health (WA-AMIH), currently WA-AMIH has developed a flyer that will be used for LAUNCH child care providers who are interested in going through the Endorsement pathway. The flyer is going through an editing process from the local trainers and providers. The same flyer will be translated into Spanish once editing is completed. LAUNCH has 33 child care providers who are ready to start the process of endorsement for a level I.

LAUNCH is working with WithinReach to provide materials to support providers and parents with their child/s development.

Project LAUNCH will be providing Mental Health Consultation with the providers who have gone through the Universal Developmental Screening element of the grant. LAUNCH will be unitizing licensed mental health therapist who will provide behavior support to providers at the program and classroom level. This is will begin in the first quarter of 2018.

Lastly, we have submitted the Year 2 progress report, as we head into Year 3 our focus will be on sustainability within our three expansion communities, Mental Health consultation, workforce development and parent engagement.

For more information, please contact Sherry Trout at 360-236-3523 or sherrylynn.trout@doh.wa.gov.

P-TCPI – Regional Care Coordination Project Update
The Regional Care Facilitators are making great strides and advancing the voice of pediatrics in their ACH regions. The RCFs are meeting with DOH and UW MH team 2 times per month for updates and activities and participating on the Medical Home Neighborhood team. Each region has met with their P-TCPI Practice Facilitator and made great connections for the providers. We had an in-person meeting on January 10, 2018 with a focus on care coordination. See Regional Care Coordination Project Flyer (Attachment #7) for more information and how to contact the RCFs.

For more information, please contact Ellen Silverman at ellen.silverman@doh.wa.gov.

Universal Developmental Screening (UDS) (See Project LAUNCH above, as well.)
Universal Developmental Screening Data System. Public Health Seattle-King County (Sea-King) received levy funds to support early development and have plans to use these funds to implement county wide Universal Developmental Screening. DOH staff (Deb Lochner Doyle) met with Dr. Kyle Yasuda (Medical Officer for Children and Families and incoming President of the AAP), Tatsuko Go Hollo (Prenatal to Five Child Health Lead) and Magan Cromar
Sea-King currently has a request for proposals out for a vendor to conduct a “landscape review” as it relates to UDS screening in King County. Last word, in December, is that they expected the contract to be in place and work to commence in January. DOH shared information about key informant interviews that were conducted with physicians (both those who are screening and those who are not screening), child care providers and family members) in Whatcom, Snohomish and Yakima counties in an effort to learn what is working well, barriers to screening as well as which data elements are routinely shared and with whom, and when delays are identified after screening. It sounds like these are some of the same questions that Sea-King is hoping to learn from their landscape review. They are including faith based community groups as potential screeners which would be analogous to community based organizations in the overall DOH proposal.

Sea-King is also planning to utilize the Brooks on-line system for data collection knowing that it is a “hub and spoke model: and not useful for sharing information. They were informed that should DOH build the UDS data system, Brooks would charge Sea-King for every user interface to be able to link with the state system at a cost of $200 per site. The state UDS proposed schematic was shared that described the various functions expected. This generated a lot of discussion about “closing the loop.” In other words, how can someone know that if a family is referred somewhere that they actually received the services? There were multiple conversations about this same issue during the two year planning process and ultimately felt, while the functionality could be built into the system, the bigger issue is the feasibility of obtaining such data (i.e., every type of early intervention or specialty provider would need to login and enter data for all children 0 to 6 years of age).

Also discussed was the Ages and Stages questionnaire versus other tools such as the Survey of Well-being for Youth and Children (SWYC) and the potential benefits and limitations of each. Since Harborview is piloting the SWYC with their non-English speaking clients to help further validate this tool, they may want to be sure their vendor speaks with the Harborview staff.

A suggestion was given that rather than purchasing Brooks on-line, perhaps Sea-King might consider using the statewide UDS data system plans to build the system and pilot it within King County (much like how the Immunization Registry - Child Profile was initiated). They agreed that it would be in line with their agency’s mission that their work be impactful beyond the county but felt that the costs were likely prohibitive. Since Sea-King is the most populous county in the state and has sustained funding, their efforts could have a significant influence on future directions concerning a statewide UDS data system. For more information, contact Deb Lochner Doyle (Debra.LochnerDoyle@doh.wa.gov).

For additional information on UDS Systems Development and Help Me Grow, please contact Sharon Shadwell at 360-236-3572 or sharon.shadwell@doh.wa.gov.

Healthy Communities Consolidated Contracts Updates

The series of topical calls/webinars for 2018 began on January 4th with a presentation by Rabeeha Ghaffar and Alexis Bates on the recently released Maternal Mortality and Infant Mortality reports. Topics planned for this year include Adverse Childhood Experiences presented by an LHJ partner, updates on MCH-related statewide projects, maternal opioid use, planning for the upcoming 5-year MCHBG Needs Assessment, and fiscal updates.

Kara Seaman will be on leave until late February, so for the time being Mary is the contact for all the counties. For more information, please contact Mary Dussol at 360-236-3781 or mary.dussol@doh.wa.gov.

See Attachment #8 for PowerPoint Presentation. Three thousand athletes are expected in Seattle for the Special Olympics this year. A number of other programs are offered throughout the year for individuals with intellectual disabilities, including family supports, health screening, young athletes, and health initiatives. Eight different disciplines participate in health screening for the Healthy Athlete program including podiatry, physical therapy, nutrition and physical activity, hearing, vision, dental, medical/physical assessment, and the newest – emotional wellbeing and coping strategies. Healthy Communities Program is now taking it beyond screening, into communities, offering increased access to these programs beyond just the Special Olympics athletes. There are opportunities to be involved through a variety of volunteer activities. Questions regarding these opportunities and the program can be directed to Samantha Thompson at sthompson@sowa.org.
Special Presentation
Center for Children with Special Needs Re-designed Website
Beth Crispin and Paul Gilmore

https://cshcn.org/

The Center for CYSHCN is housed at Seattle Children’s Hospital, and funded by DOH. It does not provide direct services or care coordination, but it is a resource for families and providers providing tools, guides, and other information. This presentation highlighted some changes and enhancement to the re-designed website. The website is designed to follow a life course view (Note the tabs: after diagnosis, organizing, resources, school, and adolescent transition). Goals for redesign was to improve mobility of site, make in interactive with social media, and increase visibility. Notable changes include 1) Safety tips now can provide topic specific, stand-alone single page documents 2) There is a built in community calendar of activities 3) Improved visibility and access to summer camp pages so one will not get “no results” response. This site gets the most traffic. Search can be done by condition, location, and will identify free camps and those with scholarships available. 4) The Linkages section has improved visibility and capability to search archived editions back to 3 years.

Health Care Authority (the Medicaid agency)
Colette Jones and Kevin Cornell

Brief summary of spoken remarks:
FAQs: Scope of Coverage: Maternal depression screening to include dads who are primary caregivers. Pediatricians can do screen and bill under child. Added depression screening for adolescents 12-20. Dermatology tele med options. Collaborative care model expanded for psychiatric conditions (using UW model). Hepatitis A vaccines are now available.

Detailed updates are below:
HCA launches first phase of single preferred drug list for Apple Health (Medicaid). In 2018, HCA will implement a new approach for prescription medications for Apple Health (Medicaid) clients. It is called a single preferred drug list (PDL). While we are making this change at the direction of the Legislature, it is the right thing to do to better serve prescribers, pharmacists, and clients.

A single PDL will provide the same set of medications to Apple Health clients, whether they are in a managed care plan or the Apple Health fee-for-service program. On January 1, the first phase of implementation begins when 13 drug classes move to the single PDL. With a single PDL, providers will know what drugs in each drug category are preferred across all Apple Health clients, and will know the criteria for each (drug, dose, duration and prior authorization requirements).

We are implementing the single PDL in a phased approach, because of the complexity of the systems requiring changes to support the single PDL. Beginning January 1, 2018, 13 drug classes will move to the single PDL. These classes were selected with the support of the Drug Utilization Review (DUR) Board, and with public input. They are some of the most commonly prescribed and highest cost drugs for the state. We will add more drugs in July.

We have three top priorities for implementing the single PDL:

- **Patient care and access to necessary medications come first.** We will be working closely with the Apple Health managed care plans to ensure a smooth transition for Apple Health clients.
- **Patients, prescribers, and pharmacies have easy access to the right information.** We appreciate that a single PDL means work for prescribers and pharmacies in the short term. Longer term, Apple Health clients and managed care organization network providers will be better served by one standard PDL.
- **Minimize disruption to patients and providers.** With a preferred drug list, drugs prescribed for a specific use must come from the list. For example, not all of the drugs within a specific drug class that are used to treat high blood pressure will be available on the Apple Health preferred drug list (PDL).

When we first implement the PDL, some patients may need to change medications. We are working hard to limit the impact on patients and their providers. Some drugs will be “grandfathered.” That means patients who are already on a grandfathered drug when the PDL takes effect will not have to change their medication.

Moving to a single PDL is a major change for our state. We are confident that a single PDL for the Medicaid population will provide savings for the State and make the prescribing process easier for providers and patients.

Phase One Drug Classes

- Anticoagulants

Back to top
• Antiemetics
• Beta agonists (long and short acting)
• COPD drugs
• Cytokines and CAM antagonists
• Epinephrine auto-injectors
• Growth hormones
• HIV
• Inhaled corticosteroids
• Insulin
• Multiple Sclerosis
• Pancreatic enzymes
• Substance Use Disorder

Phase Two
HCA will add more drug classes to the Apple Health PDL beginning July 1, 2018. Additional drug classes that have been reviewed by the DUR Board will be added at this time and will continue to be added until all drug classes have been added to the Apple Health PDL.

Whole-person care expands to Chelan, Douglas, and Grant counties on January 1, 2018. Five more regions set to move to whole-person care in 2019, ahead of statutory requirement. Beginning January 1, 2018, Washington Apple Health (Medicaid) clients in the state’s North Central region (Chelan, Douglas, and Grant counties) will transition to a whole-person approach to care delivery. Services will be coordinated through a single health plan so that people receive the help they need for body and mind, including mental health and substance use treatment.

“It can be hard for individuals—especially those with multiple complex conditions—to receive the full spectrum of care and services they need,” said Health Care Authority (HCA) State Medicaid Director MaryAnne Lindeblad. “Treating the whole person is a better way to help people get and stay healthy. By combining both sets of benefits under the same managed care plan, the plan will be responsible and accountable for addressing both the medical and behavioral health needs of individuals, leading to more integrated care and better outcomes.”

Apple Health coverage for about 65,000 people in Chelan, Douglas, and Grant counties will be covered by Amerigroup, Coordinated Care, and Molina Healthcare.

In 2014, state legislation directed a transition to fully integrate the purchasing of medical and behavioral health services for Apple Health clients through a managed care system no later than January 1, 2020.

Five other regions in Washington have told the HCA they are ready to make the shift to whole-person care, ahead of the timeline required under state law. Greater Columbia, King, North Sound, Pierce and Spokane regional service areas will make the transition in 2019.

The Southwest Washington region (Clark and Skamania counties) was an early adopter of this integrated care model. Since making the transition April 1, 2016, the community has since seen several statistically significant changes in care compared to other regions of the state.

“We are working closely with our partners in the North Central region to ensure a smooth transition on January 1 and are ready to respond quickly to the needs of clients, providers and stakeholders in the region,” Lindeblad said.

Update on funding for premium-based Apple Health for Kids program. (a.k.a. “CHIP” program)
Federal funding for the Children’s Health Insurance Program (CHIP) expired on September 30, 2017. Since that time Washington has received $45M in unspent Title XXI funds to continue to pay for program costs which cover 58,000 children in Washington State. Congress passed a continuing resolution on December 21, 2017 to appropriate $2.85 billion in additional funding to continue the CHIP program through March of 2018.

The CHIP program in Washington State is under the umbrella of “Washington Apple Health”, and provides federal funding for healthcare coverage of uninsured children through age 18 whose family income is too high to qualify for Medicaid (free) coverage. Families pay a small premium ($20 - $30/mo.) depending on income. The income limit for the program is 312% of the federal poverty level (FPL) (~$77,000/Yr. for a family of 4).

2018 FPL standards – (See Attachment #9)
Tonya Niverson was unable to attend.

CHPW was not represented at this meeting.

We are joining the P-TCPI Regional Care Facilitators and Care Coordination team to increase well child visit compliance with Providers and members.

Foster Care CCW Updates:
In Quarter 4, we launched our new project a2A (adolescent to Adult) where we are outreaching to members 16-18 years old to talk about healthcare transitions and readiness as they’re approaching adulthood! We complete a screening with healthcare questions across all life domains and provide resources/referrals if needed. We want to help ensure our adolescent members are set up for success entering into adulthood. Especially for individuals in the foster care system, we want to talk about the Extended Foster Care Program or make sure they know they are still covered under our health insurance as Alumni until age 26.

Looking into outcome measures, HEDIS measures and increasing well child checkups.

No new updates. Check website for information regarding Molina Healthcare.
Communication Network Meeting Minutes
January 11, 2018

HEDIS team is meeting to increase well-child checkups. Doing some trauma informed care trainings.

The Center for Children with Special Needs (CCHSN) at Seattle Children’s
Jacquie Stock
www.cshcn.org

- Family Leadership Trainings—
  o “Becoming a Parent Partner,” for parents and caregivers of deaf and hard-of-hearing children, successfully offered in collaboration with Christine Griffin from Washington Hands & Voices
  o “Telling Your Story with a Purpose,” specifically for dads of children with special needs, first time collaboration with Dads MOVE and Washington Fathers Network
  o “Train-the-Trainer” class for our “Telling Your Story with a Purpose” training, developed by Kimberly Arthur, MPH, Clinical Research Scientist, for Parent-to-Parent coordinators who want to offer the train-the-trainer class in their counties


- County Resource Lists available at https://cshcn.org/resources-contacts/resources-directory/. 260 Resource Lists were downloaded first quarter 2017-2018 contract year. CSHCN Coordinators send yearly updates and resource recommendations to Hanna Abrahamson, Project Coordinator.

- Dental Fact Sheets—Paul Gilmore, Web Coordinator, partnered with University of Washington Dental School, receiving permission to add and promote their helpful Special Needs Dental Fact Sheets to the CSHCN.org website.

- Wings For Autism—Paul Gilmore, Web Coordinator, volunteered in the Wings for Autism event at Seatac Airport.

- Adaptive and Accessible Playgrounds and Parks—Beth Crispin, Senior Health Educator, currently researching adaptive and accessible playgrounds throughout Washington State, will review and summarize her findings for new content on CSHCN.org for parents to learn about relevant playgrounds in their community or when traveling. Please notify Beth.Crispin@seattlechildrens.org with any information regarding this topic you would like to share.

- Linkages Newsletter—Beth Crispin, Senior Health Educator, currently researching news and best practices for health topic for Winter Linkages. If you would like to subscribe to Linkages email Beth.Crispin@seattlechildrens.org. Looking to add information on transgender CSHCN in a future Linkages Newsletter.

- Adolescent Transition activities at Seattle Children’s—Beth Crispin and Jacquie Stock participated with Children’s Parent Advisory Task Force members, physicians and other Children’s health providers who meet quarterly to address improving and potentially standardizing approaches to adolescent transition within the organization. Beth worked with the Parent Advisory Task Force to create an Adolescent Transition Checklist for parents, youth and providers to guide health care transition. (See: http://www.seattlechildrens.org/patients-families/transitioning-adult-healthcare/)

- Updating Care Organizers—Want to make it more print friendly. Available in Spanish.

Medical Home Partnerships for CYSHCN and Their Families
Kate Orville
www.medicalhome.org

Technical Assistance to Communities Growing Local ASD and other Neurodevelopmental Disabilities Identification and Intervention Services

- Community Asset Mapping continues to be busy. The Cascade Region has been especially busy. New CAM coalitions include Greater Grays Harbor (Grays Harbor/Mason/North Pacific), Pacific, Cowlitz/Wahkiakum are focusing on addressing the needs of children with autism and other developmental disabilities and the families. The Lewis County Autism Coalition provided mentoring to these groups and interconnected county work groups are working on increasing capacity to evaluate and diagnose locally (initially for autism), develop roadmaps for families and providers about what to do when there is a developmental concern, and increase local family support services.

- The Lewis County Autism Coalition Autism Conference for SW WA was a success. MHPP staff co-presented with members of the Lewis County School-Medical Autism Review Team (SMART) on how pediatricians, families, schools, early intervention, public health and other community services are partnering for more efficient local autism evaluations.
• Amy Carlsen organized and facilitated the quarterly SMART Team Zoom conference call which included a focus on collaboration with schools and evaluation. She also hosted a Zoom call for new CAM coalitions interested in starting SMART in their communities.

• See more at: http://medicalhome.org/stateinitiatives/community-asset-mapping/school-medical-autism-review-team-smart/

• MHPP staff are helping the Health Care Authority identify clinicians around the state interested in participating in ASD Center of Excellence (COE) training this year. Please let Amy Carlsen (carlsa@uw.edu) know if you or someone you know is interested or wants more information.

Pediatric Transforming Clinical Practice Initiative (P-TCPI):

• The Regional Care Facilitators (RCF) have been busy identifying who is doing care coordination already in their ACH region and what the resources are that practices are looking for to help their patients and families. They are helping their Accountable Communities of Health include the maternal and child health perspective in this important work. The MHPP and DOH provide technical assistance and support to the RCFs including twice monthly meetings (virtual except for in-person every quarter) Make sure to meet your knowledgeable and silo spanning RCF if you have not yet!

• We have also been busy working with the P-TCPI Medical Home Neighborhood Team (MHNT) on engaging different types of clinicians in both P-TCPI and ACH work. Primary care, behavioral health and other health care clinicians who are licensed by the state Health Department, and serve children on Medicaid are eligible to enroll in the initiative until April 30th. The grant continues for 18 more months after April. Go to the P-TCPI website for more info and great resources: https://pediatricctci.org/

Child Health Note

• Now available: “Health Management of Children with Autism Spectrum Disorder: Co-Occurring Gastrointestinal Problems and Sleep Disorders”

• Child Health Notes: http://medicalhome.org/stateinitiatives/child-health-notes/child-health-notes-topics/#special

• Next Child Health Note will be looking at implementing and billing for adolescent and maternal depression in the practice in collaboration with new training from the WA Chapter of the American Academy of Pediatrics and ongoing P-TCPI work. We are awaiting new rules coming out from the HCA about how to bill.

Questions? Contact Kate Orville (orville@uw.edu) or 206-685-1279, or Amy Carlsen (carlsa@uw.edu), or Kathy TeKolste al (katd423@uw.edu).

University of Washington CSHCN Nutrition Project at CHDD
Sharon Feucht
depts.washington.edu/cshcnnut/

The Nutrition Training contract between the CSHCN Program, DOH, and CHDD-UW, provides training and technical assistance to registered dietitian nutritionists (RDNs) that are part of the CSHCN Nutrition Network, and to Community Feeding Teams, as well as projects related to improving nutrition through medical nutrition therapy and feeding team services.

Nutrition Network (NN) Training and Development

1. Nutrition Network Training – Fourteen RDNs joined the Nutrition Network for Children with Special Health Care Needs. RDNs working in Bellingham, Spokane, Centralia, Everett, Mt. Vernon, Olympia, Bothell and Seattle participated. These RDNs work in a variety of settings including WIC, public health, local/regional hospitals, community health clinics, and home health.

2. NN members were invited to listen via webinar to the CHDD Fall Nutrition Journal Club on December 7, 2017. The article presented discussed a study related to bone mineral density in boys diagnosed with ASD compared to age matched controls.

3. Nutrition Network Webinar – This annual event is scheduled Thursday, February 15, 2018 from 10:30AM to 1:30PM. The webinar is open to Nutrition Network members and CSHCN Coordinators to join; however, they can invite others to listen/watch with them.

The agenda:

• Congenital Heart Defects: Developmental and Nutrition Considerations (Dr. Liza Herzig, Lauren Boyer, RDN and Hannah Roosevelt, RDN
• Update on Lead (Elisabeth Long, MPH)

4. NN members are completing the topic survey for the spring Nutrition Network meeting, scheduled on Monday, April 30, 2018, in Renton, at this time.
WA Community Feeding Teams

1. Transition from Hospital to Home for Infants at Risk for Feeding & Nutrition Concerns – October 27, 2017 phone call meeting focused on three topics. Tami Hance described a project of Seattle Children’s related to discharge care coordination for NICU and/or babies with medical complexity; data is being collected. Adrienne O’Brien (Early Learning) and Tiffany Elliott (UW NICU) presented a form for NICU staff detailing referral to early intervention. Members of the transition group were asked to review and send comments. The third item reviewed the transition of Smooth Way Home (SWH) from Cooper House to King County Developmental Disabilities. SWH is a national focus of the needs of both infants and their parents when leaving the NICU. Feeding and nutrition are one aspect of SWH; our project is maintaining contact with this King County effort.

2. Team members are completing a topic survey for the spring WA Community Feeding Team gathering on Tuesday, May 1, 2018 in Seattle, at this time.

3. Four teams were selected to participate in a contract funded Telehealth Learning Collaborative for Children with Autism Spectrum Disorders (ASD) and Restrictive Eating. This learning collaborative, led by the Seattle Children’s Pediatric Feeding Program at the Autism Center, will focus on a collaborative learning opportunity to establish stronger community partnerships, provide training, and, support WA State Feeding Teams who are caring for children with Autism Spectrum Disorders who experience severe restrictive eating patterns. The training begins with a six-hour event in February and then ten one hour interactive tele-health sessions extending through May 2018. Eleven applications were received. Teams that applied needed to verify commitment for teams to participate in all training sessions. Participating teams must include a medical provider, a feeding specialist (OT or SLP), and an RDN. An optional but highly welcome team member was a behavioral/mental health provider.

**Questions?** Contact Sharon Feucht, MA, RDN, CD ([sfeucht@uw.edu](mailto:sfeucht@uw.edu)) or 206-685-1279, or Mari Mazon, MS, RDN, CD ([llmaro@uw.edu](mailto:llmaro@uw.edu)).

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**Washington State Fathers Network (WSFN)**

Louis Mendoza

www.fathersnetwork.org

- Fathers Network conference held in Bellevue in November. 53 dads attended and they came from across the state, including but not limited to: Ellensburg, Whidbey Island, Pullman, Pasco, Tacoma, Everett, Seattle, Vancouver and Yakima.

- Also in November, along with Jill McCormick and Susan Atkins, I presented at the Middle Childhood Health Summit on Resources for Parents and Educators of Children with Special Health Care Needs.

- Work continues with the Cultural Accessibility Consortium of King County. In October arts organizations, family members and service providers were brought together to discuss “What practices could King County and Seattle arts organizations adapt to warmly welcome and effectively include people with neurodevelopmental differences as patrons, artists, administrative and support staff?” 7 areas of work were identified and next steps are being discussed including the creation of an inclusion handbook for arts organizations. The WA State Arts Commission has expressed interest in the work and in helping to replicate the effort across the state.

- The Chief Seattle Council of the Boy Scouts (Seattle and much of Puget Sound) has renewed their efforts on inclusion with a target date of March 2018 to start having discussions at district roundtables on implementation. The hope is to replicate this effort with other Councils.

- Continue to serve on the planning committee for the 2018 WA State Fatherhood Summit to be held on June 5th and 6th. My primary involvement is in finding dads to serve on a dad panel.

- A large effort this contract year will be on having dads attend the How to Tell Your Story with a Purpose workshop and building up a cohort of dads who are prepared to speak about their experience and advocate for their family and other families. The first training was held in Naches on October 7th. 16 dads attended the training.

- The WA State Dad Affiliate Group will be presenting at the May Infant and Early Childhood Conference. The title of our presentation will be Obtaining Services for Children with Special Needs: A Father’s Perspective.

- I’ve accepted an offer from the National Fatherhood Initiative to write a guest blog on tips for practitioners working with dads who have special health care needs. I will be seeking input from the Dad Affiliate Group and have asked that the byline of the blog be the WA State Dad Affiliates.
1. I shared resources and information with local Parent to Parent programs around Child Health Domain projects -- ie. Help me Grow, ACES and Resilience; Strengthening Families Initiatives; UDS; child safety and inclusive community opportunities. Posted on Facebook, Parent to Parent monthly newsletter (let me know if would like to receive this newsletter), yahoo groups and e-groups.

2. Family Professional Partnerships and Family Engagement- Have shared the opportunity for Parent to Parent Coordinators to attend the following meetings and to share with families in their areas:
   a. Quarterly CSHCN Communication Network meeting
   b. TCPI/Medical Home meeting- clarification on the CHIP funding and status
   c. WSLI- new website and also bringing North Carolina to train us on family led program evaluations- outcome based and Results Based Accountability
   d. Autism Grant- discussion about family navigator training
   e. Seattle Children’s “Telling Your Story with a Purpose”- some Programs will be hosting this winter Yakima P2P
      “Holland group”- some Programs will also be hosting this winter
   f. attended and presented with Fathers Network and F2F at the Middle Childhood Health and Wellness Summit;
      also did a resource table.
   g. Whatcom County Parent to Parent presented about Parent to Parent supports and services to the State ICC in
      Bellingham.

3. Culturally Competent family/professional partnerships: resources and leadership
   a. We have 11 Programs that have Ethnic Outreach Coordinators across the state. We would like to grow our
      Program in King county to also include Somalia, Vietnamese, Korean and African American but would need more
      funding.
   b. Spanish speaking Parent to Parent programs will be meeting Wednesday on a webinar to discuss the leadership
      training in Spanish for peer mentors and other resource sharing and discussion. Patty Gonzalez, P2P King
      County will be facilitating.

4. Hosted a Coordinator Training- “Back to the Basics- peer mentoring/parent connections”. And Program updates in
   November 2017.

5. Statewide Communication with Coordinators and Helping Parents.- mentoring of Coordinators. 46 calls to State Office
   for resource and referral and 3,500 calls from parents to County Programs for support, resources, referral and
   community connections this quarter.

6. Project LAUNCH in two counties- Thurston at South Sound Parent to Parent programs; and in Chelan/Douglas at
   Parent to Parent.

F2F three-year project coming to end. Working on application for next four years. Will be attending and presenting at
AMCHP in February. Doing some Emergency Preparedness and Response work.

Darya Farivar was unable to attend.
Paraeducator Employment Requirements for 2018–19

The 2017 Legislature passed into law ESHB 1115 identifying requirements for paraeducator employment in Washington State. Effective September 1, 2018, the following minimum employment requirements, as written into law by HB 1115, go into effect. All paraeducators must:

- Be at least eighteen years of age and hold a high school diploma or its equivalent; and
  1. Have received a passing grade on the Education Testing Service's Paraeducator Assessment; or
  2. Hold an Associate of Arts degree; or
  3. Have earned seventy-two quarter credits or forty-eight semester credits at an institution of higher education; or
  4. Have completed a registered apprenticeship program.

These minimum employment requirements are for experienced paraeducators as well as for newly hired paraeducators beginning September 1, 2018. Bulletin 001-18, issued on January 2, 2018, provides additional information regarding the work of the Paraeducator Standards Board.

Revocation of Consent for Special Education Services and its Effect on Section 504 and Other Federal Programs

Originally printed in the February 2014 update, updated December 2017

On December 8, 2008, the Office of Special Education Programs (OSEP) issued a final regulation allowing parents to revoke consent for continued special education services under the Individuals with Disabilities Education Act (IDEA). In its analysis of comments and changes to the federal regulation, OSEP did not address the effect of revocation on other federal programs such as Section 504 of the Rehabilitation Act of 1973 (Section 504) or the Americans with Disabilities Act (ADA). Instead, OSEP stated: “These final regulations implement provisions of the IDEA only. They do not attempt to address any overlap between the protections and requirements of the IDEA, and those of Section 504 and the ADA.” Federal Register, Vol. 73, No. 231, December 1, 2008, at 73013.

Before the revocation regulation was implemented, one of the regional offices of the Department of Education’s Office for Civil Rights wrote a guidance letter, Letter to McKethan (OCR 1996), addressing whether a parent’s refusal to provide consent for special education services under IDEA would also be a rejection of services under Section 504. OCR stated at that time that there were two groups of students who were “qualified students with a disability” under Section 504. The first group included students who qualify for regular or special education and related aids and services under Section 504 and, additionally, are eligible for services under the IDEA. The second group would include students who are qualified for purposes of Section 504 but who are not eligible the IDEA. In the Letter to McKethan it was noted that for the students who qualified for services under Section 504 and IDEA, the implementation of an IEP developed under the IDEA would be how the Section 504 requirements were met. OCR then stated that by rejecting the services developed under the IDEA, the parent would essentially be rejecting what would be offered under Section 504.

However, since OSEP finalized the regulations in 2008 regarding revocation of consent for IDEA services, there have been a number of reported cases addressing this question. Two relevant cases are summarized below:

In Kimble v. Douglas County School District RE-1, 925 F. Supp.2d 1176 (D. Colo. 2013), the court noted that there was little or no direction regarding the effect of revocation of parental consent for IDEA upon services that may be available under other federal laws. However, the court noted that IDEA states that nothing in the statute should be construed as restricting or limiting the rights, procedures, and remedies available under other federal laws protecting the rights of children with disabilities, including Section 504. See: 20 U.S.C. §1415. As such, the District was correct in following 504 procedures, after the parent revoked consent for services under IDEA.

In Jason E. v. Department of Educ., State of Hawaii, 64 IDELR 211 (D. Haw. 2014), a parent revoked consent for her son's IDEA services and expressed the desire to have her son enrolled in a charter school without special education and related services. The district classified the student as a general education student and attempted to provide FAPE under a Section 504 plan, including 1:1 instruction. According to the parent, the court observed, the Section 504 plan was deficient because it failed to include accommodations such as preferential seating, an aide for field trips, an individual to escort the student from the car to the classroom, and services to help the student communicate effectively in class. However, the court determined that the parent did not provide any evidence that the student required any of those accommodations to access the charter school's programs or activities. The court explained that the absence of such
evidence entitled the charter school and the Hawaii Department of Education to judgment on the parent's Section 504 and Title II claims.

Given the lack of definitive guidance from OSEP or OCR on this topic, and given recent case law from district courts (of which one is within the Ninth Circuit), OSPI generally recommends that, if a student or parent revokes consent for IDEA services, districts initiate the Section 504 referral process to determine if the student is eligible for a Section 504 plan and services, as is appropriate for the student. It should be noted that the free appropriate public education (FAPE) standard under Section 504 is slightly different than under the IDEA. Under Section 504, a district must provide accommodations, related aids, or services that are designed to meet the needs of students with disabilities as adequately the needs of nondisabled students. Also, note that regardless of whether or not a student receives a Section 504 plan, all students with disabilities continue to be protected by the antidiscrimination provisions of Section 504 and the Americans with Disabilities Act (ADA).

For more information on the requirements under Section 504, contact OSPI’s Equity and Civil Rights Office at 360-725-6162 or equity@k12.wa.us. Visit OSPI’s Equity and Civil Rights office website. If you have specific questions about a particular situation in your district, please contact your district counsel.

Nursing Services as a Related Service

According to WAC 392-172A-01155 school nurse services and school health services are a type of related service. These services enable the student who is “eligible for special education to receive FAPE as described in the student’s IEP”. Therefore, any nursing or health services the qualified school nurse or other qualified person provide to the student with an IEP should be documented in the student’s evaluation and IEP as a related service. This includes an Individualized Health Plan (IHP) that may consist of an emergency action/care plan (EAP/ECP), emergency evacuation plan (EEP), and any medical accommodations. If services are outlined in an IHP, best practice is to include the IHP as a section in the IEP or attach the IHP to the IEP and document as a related service.

The school nurse may be involved in counseling services as other qualified personnel, parent counseling and training, and recreation. For example, the school nurse may conduct group counseling for students who are struggling to manage their chronic medical condition, such as asthma. Furthermore, the school nurse should be involved in the “early identification and assessment of disabilities” in students. The nurse may also consult on orientation and mobility services, medical services, and transportation.

Questions should be directed to Nicole Klein at 360-725-6054 or nicole.klein@k12.wa.us.

Neurodevelopmental Centers (NDCs) Update

Marianne Bastin, Mary Bridge Children’s Therapy Services, Puyallup/Tacoma


The Neurodevelopmental Center director meeting September 25, 2017 with Lacy Fehrenbach, Meredith Pyle, and Ellen Silverman to gather information from the NDCs about prior and current experiences with service provision and billing for commercial, Medicaid and managed Medicaid programs. Follow up questionnaire returned by NDCs and continued discussion expected at January 22, 2018 meeting. Current carve out system is working for the NDCs with reduced paperwork burden. Centers have limited experience with managed Medicaid because of the current carve out system.

Innovative Services NW

Innovative Services NW is a nonprofit, serving Clark County since 1963. Our mission is “Creating opportunities. Achieving results. Changing lives!"

We offer:

- **Pediatric Therapy & Neurodevelopmental Center** including speech, physical, occupational, and specialty therapies for children birth through age 20. Also offering Early Intervention for children birth through age three.
- **Early Learning & Child Care** for children 1-5 years ago including serving children with special needs, as well as those who are typically developing. With an average of 3.3 adults in each of our six classrooms, we offer one of the only fully-inclusive licensed Early Learning programs available in Clark County.
- **Supervised Visitation** for families involved with the foster care system

Innovative Services NW is expanding their feeding therapy services. With both occupational and speech therapy approaches, we are excited to be able to serve more children who have such needs.
Innovative Services NW has openings for a Physical Therapist which will allow us to expand our Intensive PT program; Additionally we have an opening for a part time SLP to work in early intervention; Innovative Services NW also has an opening for a BCBA to help us initiate ABA therapy services for the growing demand in Clark County and SW WA. If you know someone who would be a good fit for our open positions, in SW Washington, please refer them to:

Susan Lehr
Director of Health Programs
Innovative Services NW
360-823-5142 direct, 360-892-2157 Fax
www.innovativeservicesnw.org

- Employment Services, training and job support for adults with disabilities or employment barriers including our Janitorial Services and our Individual Placement Program
- Smaller programs include Case Aide, Parenting Plan Mediation, and Counseling

Kindering Center
Kindering, now in its 56th year, provides best-in-class therapies and special education for more than 4,000 children with disabilities, delays, and other risk factors in King and Snohomish counties each year.

UPDATES: In addition to our Bellevue and Bothell facilities, we opened a third site in Renton in October 2017 to help address unmet need in the area. Kindering Renton is now fully staffed and operational, and will soon be adding another classroom. In 2017 we expanded our northern boundaries to include the Edmonds and Everett school districts, and we are focused on local outreach efforts, including working with referral sources such as doctors and other providers, throughout all of our service areas.

UPCOMING: In partnership with Allegro Pediatrics, we are hosting Toddler 101 on January 31, 2018 (6:30-8:30pm) at Kindering Bothell. Seasoned Pediatrician David Reuter will provide fresh ideas to equip parents with skills and confidence. Topics include: How do I handle a tantrum? Why is my toddler not eating? What are some successful sleep strategies? RSVP: colleen.willis@kindering.org; Details: https://kindering.org/portfolio-items/speaker-series/

Those wishing to learn more about Kindering, its mission, and programs may call Alison Morton at 425-653-4331 or Alison.morton@kindering.org, or visit its website at www.kindering.org.

Mary Bridge Children’s Therapy Services (Tacoma/Puyallup)
Therapy services has seen a 13% growth in patients served from 2016-2017 with a 4% growth in patient visits. Patient satisfaction has improved with 92% of parents indicating they would recommend our services to others. Financial concerns continue with reduced reimbursement noted in 2017 and expected to continue into 2018 along with increased requests for financial assistance.

Mary Bridge Physical Medicine & Rehabilitation clinic will begin reporting to Therapy Services director January 8, 2018.

Management restructure is complete:
Director – Marianne H Bastin Marianne.basin@multicare.org
Physical Therapy manager – Tracy Martin tracy.martin@multicare.org
Occupational Therapy manager – Carrie Mori carrie.mori@multicare.org
Speech Therapy/Audiology manager – Angela Kitzmiller angela.kitzmiller@multicare.org
Administration Support Supervisor – Jodi Guetle Jodi.guetle@multicare.org
Orthotics Supervisor – Lynda Johnson lynda.johnson@multicare.org

Open positions: 2 Occupational Therapists (CTU-Puyallup), 3 Speech Therapists (Tacoma)

Skagit Preschool and Resource Center (SPARC)
What’s new at our Center

Autism Work
*We will be offering Incredible Years for Parents with Children with Autism
*Working with state on support from AS3D Autism grant and what others are doing
*Focus on finding funding for a SCAP (Skagit County Autism Partnership) coordinator
*Working with UW to create RIT training for parents
*Realigning work with local doctors for earlier autism diagnosis
*Looking to offer parents free access to Autism modules from UW
New staff
Hired a new full time speech therapist! Yay!

New services
Family Support
*Offering a Kaleidoscope Play and Learn group 2x month 1.5 hour each session
*Autism Support group for just our families in SPARC meet monthly

Challenges
Speech therapist who we hired over a year ago is struggling getting licensed with DOH. Constantly being given that it is in process. We cannot bill Medicaid for her.
Very frustrating.

What is going well
Parent supports, services for families, focus on Autism
Partnership with HeadStart and inclusion program.
Amazing, hardworking staff!

Provide a brief overview of our program
Birth to three services…currently serving 35 children
Preschool services…currently serving 103 preschoolers
Services: FRC, Speech, OT, PT, Parent classes, Autism…STAT training

Valley Medical Center
1. We have mental health counselors from Renton Area Youth Services (RAYS) providing individual and family therapy in our clinic 4 days a week. Referrals can be made through our main number 425-656-4215.
2. We have re-started our pet visits program with a lovely dalmatian, Clover, who comes to the clinic several days each month.
3. We are offering free art therapy classes to the community on Thursdays from 12-1 – all invited – no need to be a patient at VMC and no need to sign up. More information can be found on our class listings at valleymed.org or by calling 425-656-4215.
4. We have been blessed to have received several grants in the last few months to continue our Wubbanub pacifier program in our NICU, to continue our Books for Babies NICU literacy program, and to install an adolescent/adult sized changing table. Thank you to our community partners!

Department of Early Learning
Early Support for Infants and Toddlers (DEL-ESIT)
Debi Donelan
www.del.wa.gov/esit

ESIT Staff Updates: We are pleased to announce that Teniel Sabin has started as an ESIT Program Consultant. Teniel comes to us from Child Care Resources where she was a Program Coordinator and Infant Mental Health specialist for the Infant Toddler program. Teniel has her Masters in Teaching and is close to completing her doctorate in Educational Leadership. Teniel will be attending Communication Network as Debi shifts responsibilities.

Annual Performance Report: ESIT is finalizing the Annual Performance Report (APR), due to the Office of Special Education Programs (OSEP) on February 1, 2018.

Annual Application for Federal Funding: ESIT will apply for FFY 2018 funding in April, 2018. As part of the application process, ESIT is required to hold a public comment period prior to each year’s application submission. The 30 day public comment period, prior to submitting the application, will be held in February or March, 2018.

Family Resources Coordinator (FRC) Training: The next FRC training/Professional Learning Community is scheduled for Thursday, January 25, 2017 from 9:00 AM -12:30 PM. The topic is the Initial Individualized Family Service Plan (IFSP). Interested individuals may participate in trainings as space allows. For more information, contact Sue Blount at sue.blount@esd112.org.

State Interagency Coordinating Council (SICC): The next SICC meeting is Wednesday, January 17 from 9:00 AM -12:00 PM at the Department of Early Learning, 1110 Jefferson St SE, Olympia. This is a special meeting to review the federal Annual Performance Report (APR). The February SICC meeting is scheduled for Wednesday, February 21,
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from 9:00 AM – 3:00 PM, and will be held at: ESD 113, Thurston Room, 6005 Tyee Drive SW, Tumwater. Contact Jahla Brown at (360) 725-4413 or email Jahla.Brown@del.wa.gov for more information or to R.S.V.P.

**DSHS, Developmental Disabilities Administration (DDA)**
Nicole Fergason

Nicole Fergason was unable to attend.

**DSHS / DDA, Medically Intensive Children’s Program**
Doris Barret

New Partner. Looking forward to working with this group. If you have any questions, contact Doris at email provided above in contact list.

**DSHS, Fostering Well-Being Care Coordination Unit (FWB CCU)**
Michelle Milholland-Fears

Michelle Milholland-Fears was unable to attend.

**DSHS, Kinship and Family Caregiver Program**
Hilarie Hauptman
www.dshs.wa.gov/kinshipcare

NOW AVAILABLE: Free Kinship Care and Foster Parent Families Annual Passes to the [Seattle Aquarium](#) and [Pacific Science Center](#).

**2018 Voices of Children – Raised by Grandparents and Other Relatives Contest**
This 15th annual contest is for children in Washington State who are being raised now or in the past by a relative other than their parents. [Entry and rule information is included on the flyer](#). The six winning entries will receive a $100 from TwinStar Credit Union. *Entry postmark deadline is April 2, 2018.* Please help spread the word.

**Lifespan Respite Washington (LRW)**
Linda Porter
www.lifespanrespitewa.org

Linda Porter was unable to attend.

**WithinReach**
Stephanie Orrico
www.withinreachwa.org

Stephanie Orrico was unable to attend.

**THRIVE Washington**
Liv Woodstrom
thrivewa.org

In anticipation of next year’s budget request for additional home visiting dollars, **Thrive is excited to be able to support two communities in Washington to engage in a home visiting planning process.** This process will bring together a diverse array of community stakeholders to evaluate the fit and feasibility of installing a home visiting program in their community. At the end of the process, the communities should be well poised to apply for home visiting funding, with a clear description of unmet community need, referral relationships established, and a local agency selected to implement the chosen model. **As a reminder, this opportunity is for planning supports and is not a funding opportunity.**

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Please share this opportunity widely with your networks. Interested communities are encouraged to submit a Letter of Interest, due January 31, 2018. For more information about the opportunity and instructions for submitting a Letter of Interest, please visit https://thrivewa.org/home-visiting-exploration-supports/. (See Attachment #10 for additional information.)

DOH Screening and Genetics Unit
Deb Lochner Doyle and Nini Shridhar
www.doh.wa.gov/YouandYourFamily/InfantsChildrenandTeens/HealthandSafety/GeneticServices.aspx

Last spring, when the Screening and Genetics Unit created a landing page for Down syndrome on the DOH website, we also published the “Resources for Families who have a member with Down syndrome” – a PDF document listing local, regional and Statewide resources for families. Our winter update to the resource is now underway. If you are aware of any group(s) that would like to be included in the resource, please send me their contact information.

Debra Doyle presented at the WSOA on December 1st. Her presentation, titled the “Down syndrome Information Act – What does it Mean for Obstetricians?” was very well received. She was followed by Dr. Rebecca Partridge, a pediatrician whose son has Down syndrome. Both were very well received and Deb brought enough copies of the lettercase booklet to provide every attendee a copy.

The Screening and Genetics Unit conducted a study last summer to evaluate wait times for access to genetics services in Washington State. Genetics services, in this instance, is defined as any direct to patient services provided by a genetic counselor or medical geneticist. The 2017 Wait Times Study was a follow up to one conducted in 2013. The key takeaway from this study was increase in wait times across the State. The average wait times for genetics services had increased by more than 100% from 32 days in 2013 to over 66 days in 2017.

A flyer was provided at the Communication Network meeting announcing a Parent Leader Workshop for parents and caregivers of children and youth who are Deaf, Deaf/Blind or Hard of Hearing. See Attachment #11 for flyer.

Better Health Together ACH
Melissa Charbonneau, Spokane County
[ The Region includes the following counties: Adams, Lincoln, NE Tri-County (Ferry, Pend Oreille, and Stevens), and Spokane ]

The Better Health Together Region met November 9, 2017 at Spokane Regional Health District in Spokane. See Attachment #12 for the region meeting minutes.
Better Health Together Region Meeting schedule for 2018: January 11th (in conjunction with Communication Network via video conference), May 10th, August 9th, and November 8th.

Cascade Pacific Action Alliance ACH
Apple Martine, Thurston County
[ The Region includes the following counties: Cowlitz, Grays Harbor, Lewis, Mason, Pacific, Thurston, and Wahkiakum ]

See Pierce County ACH and Attachment #18.

Greater Columbia ACH
Shelley Little, Benton-Franklin County
[ The Region includes the following counties: Asotin, Benton-Franklin, Columbia, Garfield, Kittitas, Walla Walla, Whitman, and Yakima ]

The Greater Columbia Region met December 11, 2017 via conference call. See Attachment #13 for the region meeting minutes.
Greater Columbia Health Region Meeting schedule for 2018: March, June and September – actual dates are yet to be determined.
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King County ACH
Kate Besch, Seattle-King County
[ The Region includes the following county: Seattle-King ]

See Attachment #14 for King County updates.

North Central ACH
Carol McCormick, Chelan-Douglas County
[ The Region includes the following counties: Chelan-Douglas, Grant, and Okanogan ]

The North Central Region met January 3, 2018 via conference call. See Attachment #15 for the region meeting minutes. North Central Region Meeting schedule for 2018 will be determined by the end of January.

North Sound ACH
Paula Young, Skagit County
[ The Region includes the following counties: Island, San Juan, Skagit, Snohomish, and Whatcom ]

See Attachment #16 for North Sound updates.

Olympic Community of Health ACH
Karina Mazur, Kitsap County
[ The Region includes the following counties: Clallam, Jefferson and Kitsap ]

See Attachment #17 for Olympic Community of Health updates.

Pierce County ACH
Kate Phillips, Tacoma-Pierce County
[ The Region includes the following county: Tacoma-Pierce ]

The original Southwest CSHCN Region consists of three ACH Regions – Cascade Pacific Action Alliance, Pierce County, and Southwest Washington. The three ACH Regions have agreed to continue to meet as a group. Kate submitted the region meeting minutes on behalf of all three ACH Regions. (See Attachment #18)

Cascade Pacific Action Alliance, Pierce County, and Southwest Washington CSHCN Region meeting schedule for 2018: February 22nd, May 24th, August 23rd, and November 15th.

Southwest Washington Regional Health Alliance ACH
Anne Johnston, Clark County
[ The Region includes the following counties: Clark, Klickitat and Skamania ]

See Pierce County ACH and Attachment #18.

Announcements

Infant Mortality Report
DOH recently released the Infant Mortality Reduction Report. Our Washington State infant mortality rate is an important indicator of the health of our state. Governor Inslee has highlighted improving the infant mortality rate and the need to address disparities among our youngest residents as a priority in Results Washington. This report provides detailed information about infant mortality in Washington State and makes eight recommendations to reduce infant mortality and disparities in birth outcomes so that all children have equal opportunity to achieve their highest health potential. Here is a link to the report: https://www.doh.wa.gov/Portals/1/Documents/Pubs/140-157-InfantMortalityReductionReport.pdf.
Attachments

1. Healthy Starts and Transitions PowerPoint Slides
2. CHIF Redesign - Request for Proposal (RFP) 22869 Notice
3. Effectively Partnering with Culturally and Linguistically Diverse Families Training Flyer
4. Engaging Diverse Families in Decision Making Training Flyer
5. FREE Family Navigation Online Training for Professionals Training Flyer
6. Applied Behavior Analysis (ABA) – What does this mean? How do you access it? Training Flyer
7. Pediatric-Transforming Clinical Practice Initiative Regional Care Coordination Project Flyer
8. Special Olympics Washington, Healthy Athletes and Healthy Communities Program PowerPoint Slides
9. Health Care Authority, 2018 FPL Standards
10. THRIVE Washington, Request for Letters of Interest
11. Becoming A Parent Partner Workshop Flyer
12. Better Health Together ACH/CSHCN Region Minutes
13. Greater Columbia ACH/CSHCN Region Minutes
14. King County ACH/CSHCN Region Minutes
15. North Central ACH/CSHCN Region Minutes
16. North Sound ACH/CSHCN Region Minutes
17. Olympic Community of Health ACH/CSHCN Region Minutes
18. Cascade Pacific Action Alliance, Pierce County, Southwest Washington ACH/CSHCN Region Minutes

Next CSHCN Communication Network Meeting
Thursday, April 12, 2018
Creekside Two at Centerpoint
20425 72nd Avenue South
Kent, Washington
Conference Room 309