



## WV Governors Early Intervention Interagency Coordinating Council

### Final Minutes – Wednesday, September 17, 2025

### Virtual

**Members Participating Virtually:** Breanna Adkins, Wendy Altizer, Jessica Bohman, Cindy Chamberlin, Emily Church, Trina Clark, Naomi Creer, Rhea Dyer, Susan Given, David Gustke, Garland Holley, Katilyn Lucas, Michael Malone, Teresa Marks, Dr. Jennifer McFarland-Whisman, Wendy Miller, Holly Rinehart, Amanda Spencer, Kristi Walter, Bridget Waltz, Brittany Willard, Sheila Womack, and Mel Woodcock

**Members Absent:** Kristan Ball, Diane Callison, Brittany Doss (excused), Lisa Fisher, Angel Kennedy, Tiffany Kiess, Alison Kreger, Brenda Lamkin, Erin Morrison (excused), Jackie Newson, and Stephanie Young

**Guests Virtually:** Shannon Baldwin, Jennifer Chase, Jessica Dempsey, Sarah Feick, Katie Heidel, Lori Lawson, Sherry Maynor, Jenny Meeks, Chrissy Neighbors, Stephanie O'Dell, Adel Riker, Susan Rispress, Melissa Saddler, Kristy Stout, and Kately Thaxton

**Staff:** Sara Miller and Sheila Zickefoose

Agenda/Topic	Discussion/Activity	Decisions/Next Steps
<b>Welcome and Introductions</b>	Naomi Creer opened the day with a welcome and request for introductions. Each Council member and guest in attendance introduced themselves and their role.	
<b>Family Story</b>	Sheila Zickefoose asked the group to brainstorm ideas to find and encourage families to share their stories. Naomi shared that it is possible to add a question to the anonymous survey with a link to share contact information to ask if they are interested in sharing their story. Emily Church added that RAUs could inquire on social media pages. Trina added if there was a flyer to share then providers could share those to find interested families. Wendy Altizer added that they have a BTT family speaking on October 4th at the WVOTA conference, and she thinks she would also be willing to share with the ICC. Others added that have families in mind that may be interested. Sheila added it is one thing to write the story out but could be overwhelming to share it with a public group in their own voice. Susan Given added that it could be helpful to create a template with prompts to get people started to share their experience. Wendy Altizer said CanChild has a prompt form with the All About Me that could be helpful. Jennifer added Parent Partner Newsletters could be useful. Kristi Walters said she could pass it through preschools and the Department of Education. Sheila shared that having a one pager and consent on hand would be beneficial.	
<b>Lead Agency Update</b>	Mel Woodcock, WV Birth to Three Director, began the Lead Agency Update.  <u>Come Grow with Us Sessions</u> - WVBTT held most recent sessions on August 26, 27 and 28, 2025 with over three hundred individuals attending the combined sessions. They will be releasing a save the date for November 3, 4, and 6, 2025 soon. Susan Rispress has created an infographic with an overview of the content of the sessions. The infographic will be available for those that are unable to attend.	

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<p><b>Lead Agency Update – continued</b></p>	<p>Mel shared WVBTT has begun receiving questions about the funding for WVBTT due to national news reports. Mel reviewed how the federal funding process works. Before the August 2025 recess, the Senate Appropriations Committee completed the markup of several FFY 2026 funding bills including the one that funds health and human services, education, and labor programs.,</p> <p>The FFY 2026 process is still a few steps from completion. The House budget is scheduled to be marked up in September. Final agreement must be reached on all program funding levels by the full House and Senate before the bill goes to the President for signature. She added there is a lot of conflict between the two houses on getting a bill finalized to be voted on before sending it to the President. All this needs to happen by September 30<sup>th</sup>, there may be a need for continuing resolution. The good news is federal funding for Part C for FY 2025 has been appropriated and WV Birth to Three's application which was due in the spring was awarded for this year. The President has recommended Part C be approved for FY 2026 level funding as well. Federal funding covers ICC, interpreters, professional development, and payer of last resort for services to infants &amp; toddlers and their families. The group took a moment to let Teresa Marks introduce herself. She added that a lot of interrelated work and a lot of moving parts right now at the federal and state level.</p> <p><u>WVBTT Annual Determination</u> – Mel reported WVBTT received the “meets requirements” determination for the 16<sup>th</sup> consecutive year. Mel shared this achievement is due to all the hard work that the WVBTT practitioners and service coordinators do each day to supports children and families and that the state office's role is to bring the data together to report and celebrate the work. The report is available on the Law and Regulations tab on the WVBTT website  <a href="https://www.wvdhhr.org/birth23/lawandregs/2023%20APR%20FFY%20Annual%20Performance%20Report.pdf">https://www.wvdhhr.org/birth23/lawandregs/2023 APR FFY Annual Performance Report.pdf</a>).  Stephanie shared a link to the local data -  <a href="https://www.wvdhhr.org/birth23/lawandregs/2023%20APR%20Local%20Reporting%20Data.pdf">https://www.wvdhhr.org/birth23/lawandregs/2023 APR Local Reporting Data.pdf</a>.</p> <p><u>Tips for Quality Documentation</u>. Mel reported WVBTT is completing more continuous quality improvement/monitoring activities. Through those activities WVBTT has identified common themes for improvement in WVBTT documentation. Mel invited Jessica Dempsey to share information presented during the Come Grow with Us sessions, Jessica Dempsey shared an overview and tips shared to support the field to understand the expectations on high quality documents and services. Part of required documentation includes a correspondence/phone contact log. Jessica provided examples of usage of this log. She shared that they reminded everyone that an IFSP is a service commitment of families. Copies of activity notes need to be provided to the family and team members. When a service cannot be provided, missing appointment forms are required. All required documentation needs to be uploaded to child records in a timely manner. If a practitioner is visiting a home with another practitioner, time must be split for billing. Team assessments and meetings can be billed simultaneously. If a service is authorized to be provided face to face (or virtual), it must be provided that way. The family's decision needs to be honored. Mel added that it is important to keep reminding those in the field of the expectation for high quality service and documentation. Mel recognized the</p>	

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<p><b>Lead Agency Update – continued</b></p>	<p>important work our foreign and sign language interpreters do for assisting families in accessing WVBTT services. WVBTT is requesting that documentation reflects when an interpreter is there.</p> <p><u>Family Assessment and the F Words for Child Development.</u> Kristy Stout, CSPD Coordinator, shared the revised Family Assessment pilot has been completed. Each RAU decided how they wanted to implement the pilot, some RAU selected a few team members and others had their full staff implement. There have been two follow-up meetings regarding the Family Assessment tool. RAU directors are reporting that some of the questions that come early in the Family Assessment are not what families were expecting to be asked, and some families were more comfortable sharing than others. Next steps include coming back together with RAUs to reflect on the intake process, and how do we best support families at the beginning stages. A visual of the Family Assessment was shared. Mel added that there have been great collaborative partnerships with the RAUs. Sheila Womack added how much she appreciates the intentionality that is always so apparent in your planning and implementation processes. Mel stated that there is a hold on the pilot while additional support is provided to the RAUs.</p> <p><u>Proposed changes with Evaluation/Assessment Teams</u> - Mel provided an overview of evaluation versus assessment activities. Evaluation is related more to eligibility while an assessment is ongoing to process to gather information. As a state they are considering making amendments to eligibility/IFSP policy. Federal regulations require two different disciplines participate in multidisciplinary evaluation and assessment to determine eligibility. In some parts of the state, large teams are coming together when it is not necessary. The proposed revised policy:</p> <ul style="list-style-type: none"> <li>the multidisciplinary evaluation team will consist of two individuals; however, if documentation exists describing a family's concerns that an area of development is not being addressed, there can be additional team members added as a part of the initial team.</li> <li>Changes cannot be made to the IFSP to add additional services for the initial three months.</li> <li>Mel added that virtual is still an option for providing services. If a camera is not on for the full time, practitioners/service coordinators will be reimbursed at the service provider location rate.</li> </ul> <p>Discussion:</p> <ul style="list-style-type: none"> <li>Breanna Adkins stated she has concerns these new policies will delay much needed services, especially if another discipline is determined by the family and professionals during the eligibility process as necessary to the success of the child. She added almost every eligibility meeting I have been in, the ISC has said something to the effect of "we can start out with more services and decrease" or "it's easier to start out with more and then decrease if needed, rather than increase services or add services later." So, this seems like the opposite of that advice. She asked for clarification on what would qualify for clear documentation for a service provider to be added. Mel responded that record reviews have indicated there are times a family has four or five people on a team and one outcome. Mel added they want to make sure we are giving the family the right supports at the right time.</li> </ul>	

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<p><b>Lead Agency Update – continued</b></p>	<ul style="list-style-type: none"> <li>Wendy Altizer asked if there is a way to use two licensed practitioners on children under 6 months if not 9 months to determine eligibility. The training to recognize differences at those young ages is not available to most.</li> <li>Cindy Chamberlin agreed. Cindy added that this is a great idea in theory, but in reality, it is worrisome.</li> <li>Trina Clark added that from a parent perspective, she was learning the same thing at every visit, and it was redundant. Maybe putting a team together to really look at finding a prescription or guide of what services should look like.</li> <li>Teresa Marks added that she appreciates the conversation. WVBTT is a very large program, but there are over twenty-five programs in OMCfH. There are opportunities to coordinate with other programs. It is all overwhelming, but to recognize there are other people available to serve the same families, it is important to look around at what other opportunities are available. She added that delay in services is not the goal. Children with Special Health Care needs is a great resource to name one.</li> <li>Emily Church added that sometimes families forget to mention something, and that three month wait may lead to a decline in the population served.</li> <li>Teresa added that with six parent partners across the state, they are ready to assist.</li> <li>Cindy Chamberlin added that parents do not know what they do not know, so they may learn as they go on and the concern may change. Trina asked if there is some infographic on the difference between early intervention and medical intervention.</li> <li>Brianna Adkins stated it seems like there a few problems and everyone is getting punished for it. She asked if it is a huge problem, or can those be addressed directly before full policy changes happen. Mel responded that they could do some data runs to determine the prevalence of larger teams and do further record reviews to see what family concerns were. Mel added that training needs to take place for RAU staff. She added that we are a coaching model, and the research shows more is not always better. The wish is to provide high quality early intervention services in a fiscally responsible manner.</li> <li>Mel asked the group if it seems reasonable that having 2-3 members would get a family started successfully without overwhelming them? <ul style="list-style-type: none"> <li>Cindy Chamberlin added that starting with two is fine; waiting three months is not okay. Cindy reiterated that addressing the problems directly rather than policy change is preferred.</li> <li>Breanna that the data will give better insight.</li> <li>Trina added that services may be held up for the teaming caps as well.</li> </ul> </li> <li>Mel reiterated that when the State office brings a proposal forward, it is only a proposal based off concerns expressed.</li> </ul> <p><u>WV Deaf and Hard of Hearing Advisory Committee 2023-2024 Report</u> – WV Department of Education and WVBTT are working collaboratively to meet the requirements of House Bill 4414. All requirements have been achieved, except for gathering the data. The WV Department of Education has built a</p>	

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<b>Lead Agency Update - continued</b>	<p>data system and released training. The WVBTT state office will be reaching out to families and teams to gather information to enter into the data system for the state requirement.</p> <p><u>Differentiated Monitoring and Support System Process (DMS-2)</u> - Mel encouraged ICC to print out the shared documents as we work through this process. Mel gave an overview of the DSM-2 process. Under general supervision, it is required to have a data system, fiscal management, professional development system, policies and procedures, evidence-based practices, and a monitoring system. The first process is discovery, which is where we are now. A list has been received of everything they are expecting to be in place. With ICC as a large stakeholder, the State team will keep the ICC informed on the processes and monitoring reports. Mel added that every state has had a finding because no one is perfect.</p>	
<b>Public Comment</b>	<p>There were no public comments. Trina inquired how to get more people to come for public comment. Naomi added that we can create a system to get feedback. Trina added that posting it publicly with ideas of public comment points of interest. Sheila added letting people know email accommodation would be available as well. Cindy Chamberlin added a sign-up link could be a good idea.</p>	
<b>Recess</b>	<p>A recess of the agenda was called for lunch at 12:30pm.</p>	
<b>Review of Minutes</b>	<p>Naomi Creer facilitated a review of the June 2025 minutes. Katie Lucas asked her name to be corrected to Kaitlyn.</p>	<p>The motion was made by Brittany Willard, seconded by David Gustke and the Council voted to approve the minutes as corrected.</p>
<b>Unfinished Business</b>	<p>There is no unfinished business for the Council to address at today's meeting.</p>	
<b>Committee Work</b>	<p><u>Bylaws Update</u>: Sheila provided an update on the Bylaw Committee. Things that are in red are proposed changes, anything in blue has been considered but unsure if it is a recommendation. Any recommendations please let the Bylaw committee know.</p> <p><u>Assistive Technology Update</u>: Wendy provided an update for Sheila to walk through. The team has been meeting monthly. They have drafted some decision trees for the field to determine needed AT and a decision tree on the trial and evaluation assessment process on AT. The group is researching the most requested AT. They hope to provide the state staff with best practices or contra-indicated for infants and toddlers. The group has been evaluating how other states have their system structured. There are three committee members that are not on the ICC. Rachel Hamner is going to send the list of AT items they have available.</p> <p><u>Child Care Update</u>: Kristy Stout gave an update on the committee. They obtained some handouts/samples of what other states utilize to have a framework of ideas.</p>	

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<b>Committee Work - continued</b>	<p><u>Finance Update</u>: Mel Woodcock provided an update on the Finance Committee. The committee is a combination of ICC members, State Staff, and Teresa Marks. Some had the opportunity to go to North Carolina for a finance academy.</p> <p><u>Service Coordination Update</u>: Members have been finalized. They have met once to go over basic information to determine roles and goals. They meet again in September to go over tasking.</p> <p>Trina asked for a timeline of when final recommendations are due. Sheila stated that by the retreat she would hope committees would be wrapping up their work for the year. Naomi agreed.</p>	
<b>Other Business</b>	<p><u>Membership</u> - Sheila shared there are a couple people in Region 8 to fill the open seat for a Provider.</p> <p><u>Parent Leadership Committee</u> - Sheila reviewed the notes and considerations from the retreat regarding a Parent Leadership Committee. The idea is to empower parents to take a leadership role when discussing all those parts of early intervention. Sheila provided a list of activities that the Committee may want to tackle, along with important ideas and concepts that may fall under other committees for conversation.</p> <p>Discussion</p> <ul style="list-style-type: none"> <li>• Naomi Creer suggested adding parent links to the website but putting them in a parent friendly order. Sheila suggested infographics or informational pieces could be created for all families. Helping families be good consumers of quality information would be beneficial.</li> <li>• David Gustke asked if there could be a chatroom type location to be able to be able to contact someone if needed.</li> <li>• Naomi suggested one sentence suggestions on how they could do a bit more to be an advocate and be a voice for their child.</li> <li>• Brittany Williard added that the earlier you can help a parent find their voice, the better.</li> <li>• Mel added that we can build on the idea of getting the family in the driver's seat.</li> <li>• Trina added that as service coordinator they share all the parent resources with parents from the WVBTT website to empower them.</li> <li>• Wendy Miller stated that she agrees with giving the parent empowerment, even bringing the conversation back to center the family.</li> <li>• Sheila Womack shared it feels like this goes hand in hand with the coaching model that BTT is supposed to be built on. If families are sitting back and letting the team do the work, the practitioners are not really coaching. I think there's value in considering these two things as weaving together instead of separate.</li> <li>• Breanna Adkins added there is definitely a fine line between giving the family your professional opinion when it is solicited and accidentally putting them in the backseat when they are a bit more passive.</li> <li>• Katie Heidel added there was some work done on a brochure for foster families, so they feel included and able to make connections in the community.</li> </ul>	

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<b>Other Business - continued</b>	<ul style="list-style-type: none"> <li>• Mel inquired if they shared the document that maybe there is a collaboration with parent partners. The state office could use some resources on               <ul style="list-style-type: none"> <li>• What Advocacy is?</li> <li>• What is the ICC?</li> </ul> </li> </ul> <p>Naomi stated if anyone is interested in the committee, they can email Sheila Zickefoose, or if you have someone in mind, they can be informally nominated. Sheila will create a summary for every one of these conversations.</p>	
<b>Adjournment</b>	There being no further business for the Council today, the Council ended the meeting at 1:58pm.	The motion was made by Dave Gustke, seconded by Wendy Miller and