

Question	Discussion	Date Discussed	Decision	Next Steps
<p>What if a family can not spend 2 hours with an FSC at any time, they just don't have the time?</p>	<p>We need to be careful how we present this to the family, this cannot be presented as a burden or challenge. We can let the families know that this is a part of an improvement plan throughout the state to improve outcomes for families. We have been trained and chosen and we need to practice this valuable tool during this initial implementation time.</p>	<p>11/20/2015</p>		<p>Discuss the word practice come up with a better description. This can be used by the FI team to develop terminology. 11/20/15</p>
<p>How to explain RBI to families</p>	<p>We could create a brochure containing verbiage describing the RBI and its purpose. We could add family testimonials describing positive experiences. Team went on to discuss making this a part of the RBI consent instead of a separate document.</p>	<p>9/25/2015</p>		
<p>How to explain RBI to families</p>	<p>Family Involvement Team will work on developing language to prepare families for the RBI- we will prioritize this activity.</p>	<p>11/5/2015</p>	<p>Family Involvement Team will work on developing language to prepare families for the RBI- we will prioritize this activity.</p>	
<p>May need/ administer separate interviews if parents are separated, re-visit this discussion.</p>				
<p>Perhaps we can develop (in my Utopia we already have developed) something that explains to parents the changes (why, how, etc.). We don't have anything, to my knowledge, in the new family folders that discusses RBI (or the DOE pilot that is soon to come our way). Parents will be the ones explaining to pediatricians why specific assessments aren't being performed, and they will be educating their friends and neighbors on the new (old, actually) model being introduced. We need to make sure the message is positive and as accurate as possible!</p>				

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Can you clarify how to send the video - SD card, card, digitally? Should this go directly to CarolAnn from the therapists or from provider agency?	It will be submitted on a secure flash drive, not through e-mail or drop box. Has to be comparable with Windows media player, the SD card reader should be able to be used on almost any type of machine with slot for it.	11/20/2015		
CDW process for letting non-trained FSCs know what is going on when being paired with a trained person to perform an RBI for mini-grant phase.				
Delaware Certification requirements - how long will certification be valid?	Submit Test by December1. Submit videotape and reflective checklist when you feel you could pass with 95% proficiency along with Eco map, functional outcomes and notes by March 15 -	10/14/2015 11/20/15	Submit Test by December15, submit videotape and reflective checklist by March 15 , Coaches can send a practice video when they think they are comfortable, to get quick critique and feedback. Cannot use this as a way to get feedback instead of practice.	
Describe what we are going to do with the video of family. Does it need to be stored as part of their medical record? Different types of agencies with different types of requirements need to be considered.	The purpose of the video is for educational purposes.	11/20/2015		
Does having a Delaware RBI certification count towards CEUs for other discipline-specific certifications? Can the RBI certification be listed as training that fulfills yearly requirements? Is it possible for the coaches we sent to get CEU's once they are certified?	If it is a job requirement, there should be on the job training, it has been rejected to us in the past. If there is anyone on this team that would like to work with us to get this worked out, we would be happy to work it out.	11/20/2015	Candace sent information regarding CEU requirements and CarolAnn will update.	
Does having a Delaware RBI certification count towards CEUs for other discipline-specific certifications? Can the RBI certification be listed as training that fulfills yearly requirements? Is it possible for the coaches we sent to get CEU's once they are certified?	If it is a job requirement, there should be on the job training, it has been rejected to us in the past. If there is anyone on this team that would like to work with us to get this worked out, we would be happy to work it out.	11/20/2015	Candace sent information regarding CEU requirements and CarolAnn will update.	
Expectations of coaches- Long-term roles for coaches- it was mentioned that they would observe and critique, not all of the above. Could we clarify long-term expectations?				

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For future trainings including FSC 2nd Interviewer Training	For future trainings:Two ideas to consider: One suggestion with writing outcomes, it might be helpful if during the de-brief, we could sit and do one or two outcomes and do one or two outcomes right after the observation. This would allow people to see more of an immediate connection between the RBI and what an outcome might look like. The second one regarding notetaking: outing one and outing two shown during training. We could observe and take notes during that and compare during the de-briefing. It would be a great activity to do with the FSCs to help them better learn how to practice creating functional outcomes	11/20/2015		
How many days	2 days in south, 2 days north	9/25/2015	Training will consist of two, 2- day trainings. The first will take place in New Castle, on November 5th and 6th with eight people. The second will take place in Sussex/ Kent, on November 12th and 13th with eight people.	
How much time would have to be set aside for the coaches after they are certified? Still worried that they will not be able to do this since they are Independent Contractors. Could lose potential good therapists if too much work is involved and they are not compensated or will CDW be able to compensate after the mini grant is not there?	Each will have to go through a 2 day training if they are going to do the RBI.	11/20/2015		
How will we match up trained FSCs with the number of trained interventionists to be able to complete the necessary RBIs done and submit videos by March 15th?	<i>Birth to Three: Yes, as we do these 20 RBIs we have said ideally is it 20 people doing it. But, what I did when I was doing some of my videotapes is I took someone who had not been trained and I sat down with her, explained things and she was my second</i>	10/14/2015 & 11/13/15	Birth to Three: Yes, as we do these 20 RBIs we have said ideally is it 20 people doing it. But, what I did when I was doing some of my videotapes is I took someone who had not been trained and I sat down with her, explained things and she was my second	
If provider does the RBI without the service FSC, how does it get put on the IFSP?	It is not ideal, you have the hand-off issue. Maybe would could develop a flow chart, we need to develop a clear process. We need to get this done so the information is shared apporpriately.	11/20/2015		
Observation and checklist frequency (initial, annually, "high flyers")	We do not have a plan yet for this, we will develop as we go	11/20/2015		
Payment for training	See <i>Paying for RBIs during pilot</i> in <i>OTHER</i> section	9/25/2015		

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Role of coaches	If we have a future training, the agency specific coaches would be there to assist, as other people get trained in your agency w/o min-grant...the coach in agency would decide how to do the follow-up to the training- everyone will go through the initial 2 day training, coaches w/in agency will help you get to fidelity. Kristin and CA will come in and do 2 day training and internal coaches will be responsible for scaling up.	11/20/2015		
Set up a separate sub-committee for CEUs		11/20/2015		
The test that is to be taken on the 15th, how is it administered? What happens if unable to meet deadlines due to not getting referrals or scheduling issues?	It was sent electronically, submit back to CA & Kristin. Results will be given after the 15th. There are multiple options for getting the RBI practice, hopefully should allow enough flexibility to get it done. Priority heirarchy of new referrals, annual updates and other children being seen within agency.	11/20/2015		
The training didn't address the different procedures for RBI referrals.	For the purpose of the mini-grant, the referral process stays the same but with more communication between providers and FSCs/ CDW	11/20/2015		
timeframe of when training will come to CDW staff	What we know is this group has to figure out how to roll out additional trained providers, CDW can move as quickly as their supervisors would like- supervisors can think about their internal timeframe and get back to us- go back to teams and ask what they think would be a good timeframe. Right now, we can do 8 at a time. Keep in mind, there is great merit with providers and service coordinators meeting to learn/train together.	11/20/2015, 2/3/16	2nd Interviewer Training held at CDW north and south January 2016. First Interviewer Training North will Be March 10th & 11th at Easter Seals in NCC South will be April 7th & 8th at Child Development Watch in Milford	
Timeline for RBI/ When is training over?	We would like to have most people trained within 5 years. When will training end- the 2 day training is actually training-anything after that is TA, consultation, continuing support. The concept of training has evolved, when do you consider your training as an OT or PT complete? Never, you are always learning. This is an ongoing process and we will continue to be in contact and provide support.	11/20/2015		
Training, Round TWO-March 2016	March	12/9/2015		

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<p>We had five-day training in 2 days, are we being trained with fidelity. Will trickle down be trained with fidelity? Everyone's interpretation can be different and some key points can be missed.</p>	<p>the 5 day training was a train the trainer, most other states use the 2 day training to build capacity. The large piece of the 5 day was practice, that is why we are stressing the practice piece, that is all that is really missing from the 5 day. For fidelity, using the checklist and communicating with all of us and your internal provider supports. All of the information received in the certification training was given in our 2 day training and provided in the slides.</p>	<p>11/20/2015</p>		
<p>What about part time contractors who get 1 or 2 cases a week? Why/ how would they want to/ have to get trained?</p>	<p>the purpose of having all do the RBI is that you get such rich information and build such great relationships, the hand off to someone who is not involved does not have that relationship.- ALSO, attaching CEUs to the trainings would entice part timers to buy-in and take the training.</p>	<p>11/20/2015</p>		

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<p>At the training in the North, there was some discussion about the one provider would not want another provider to do an RBI on one of their families because they would not be able to discuss the results with the therapist that did the RBI and worried about some territorial issues. Since our therapists don't write the goals now how is this any different from having the goals written for a provider going in with someone else who wrote the goals for them? On the flip side, how would this be any different from 1 therapist in an agency who would be doing RBI for same agency? For example, we have 1 ECE who is trained to do the RBI, that one goes out to the RBI and there is another ECE on the team. The family likes the RBI process and the interviewer asking the questions and then request for a change in therapists and wants the interviewer as their new ECE.</p>				
<p>Can RBI be done after evaluation and services are determined or is it always before initial IFSP?</p>				
<p>CDW process for letting non-trained FSCs know what is going on when being paired with a trained person to perform an RBI for mini-grant phase.</p>				
<p>Discuss the 15 hour daycare rule and 2 RBIs.</p>				
<p>For the purpose of the mini-grant phase, the hierarchy of pairing of trained CDW & Providers</p>	<p>Trained Provider with Trained FSC , Trained Providers/SC with auditor from training, Trained provider with non-trained FSC</p>	<p>11/20/2015</p>		
<p>For the purpose of the mini-grant, RBIs can be administered to new referrals, children due for an annual IFSP or someone else's child that is due for an IFSP. Discuss coordination of communication and logistics.</p>				
<p>For the purpose of the RBI, is the 30 month age restriction in effect?</p>	<p>For the purpose of the mini-grant, we will administer an RBI on any age child if eligible for CDW service.</p>	<p>11/20/2015</p>		
<p>Has ROI been determined yet? When is it being done and how should it be reported?</p>		<p>2/4/2016</p>	<p>See RBI FLOW Chart from 2/4/16 Call</p>	

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How do we report RBIs being completed? Does this go on a separate report?				
How is paperwork handled?				
How to handle timeline challenges (cancellation, illness etc.)				
How will the Eco map be shared with the interventionist?				
Identifying provider agency	Provider agency will be determined based on the child's needs if the child is EC and MDA team can make a note recommending Most Likely Service Provider (MLSP) for a DD child. If there is a question, go to Informed Clinical Opinion (ICO).	9/25/2015	Provider agency will be determined based on the child's needs if the child is EC and MDA team can make a note recommending Most Likely Service Provider (MLSP) for a DD child. If there is a question, go to Informed Clinical Opinion (ICO).	
In the future after the mini grant, will the FSC then become the 1st interviewer or will it always be the provider?				
Insurance will deny if more than one discipline is working on the same goal, discuss how to avoid.				
Is FSC gatekeeper of paperwork?				
May need/ administer separate interviews if parents are separated, re-visit this discussion.				
Paying for RBI's during pilot	Birth to Three has drafted a mini-grant to fund training and conducting RBIs for the first year utilizing partial funding from the Department of	9/25/2015 10/14/15 11/20/15	20 RBIs per mini-grant. If an agency has 2 slots, they will receive 2 min-grants for a total of 40 RBIs. These RBIs can be split between 2 to 4 therapists ensuring	
Paying for RBI's long term, CPT codes	We will work towards July 1st to have a more sustainable way to pay for the RBI.	9/25/2015		
Providers and FSCs have different annual dates, how do we make sure FSCs and Providers are communicating in an efficient way to maximize our opportunity to administer RBI and get family on the path of functional outcomes?				
RBI as assessment tool for Developmental Delay (DD) children	Traditional assessment tool will be used to determine eligibility, MDA team can make a note recommending Most Likely Service Provider (MLSP) for the RBI. Once eligible, RBI performed to inform IFSP.	9/25/2015 & 10/14/15	Traditional assessment tool will be used to determine eligibility, MDA team can make a note recommending Most Likely Service Provider (MLSP) for the RBI. Once eligible, RBI performed to inform IFSP.	
RBI as assessment tool for Established Condition (EC) children.	RBI counts as MDA and helps fill initial IFSP	9/25/2015	RBI counts as MDA and helps fill initial IFSP	

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<p>Sequence of initial meetings Developmental Delay (DD) children.</p>	<p>The process will start with the initial phone call during which the FSC will discuss coming to visit, a description about program including signing consents and advising that the visit will include talking about their day and will take about an hour. Schedule the MDA. If determined eligible, Call family to Discuss RBI- prepare family to think about typical day & prepare for 2 hour visit. Schedule home visit, develop ECO Map, RBI/ IFSP. Continue to be mindful of timelines, completed referral to IFSP has to be within 45 days.</p>	<p>9/25/2015 & 10/14/15, 2/4/16 Call</p>	<p>During initial phone call, the FSC will discuss coming to visit, a description about program including signing consents and advising that the visit will include talking about their day and will take about an hour, get consent for MDA, schedule home visit and MDA. If determined eligible, the FSC will call family to discuss coming to visit, advising that the visit will include talking about their day and will take about two hours, get consent for ROI, schedule home visit and check provider availability. During first home visit, develop Eco Map, sign ROI for providers, administer RBI and develop IFSP. The FSC will not have to fill out sections 2, 3 and 4 of the IFSP as they will get that information from the RBI. Type IFSP before returning for second visit. During second home visit, review typed IFSP, sign IFSP and discuss services. Continue to be mindful of timelines, completed referral to IFSP has to be within 45 days.</p>	<p>11/20/15The purpose of a Bayley is to know if they are eligible or not. EC, Over a year, will they still get a Bayley and a full MDA?? revisit sections of IFSP replaced by RBI for possible corrections.</p>
<p>Sequence of initial meetings Established Condition (EC) children.</p>	<p>The process will start with the initial phone call during which the FSC will discuss coming to visit, a description about program including signing consents and advising that the visit will include talking about their day and will take about two hours. The FSC will not have to fill out sections 2, 3 and 4 of the IFSP as they will get that information from the RBI. RBI can be initial MDA and IFSP. Identify provider between initial visit and second visit. Continue to be mindful of timelines, completed referral to IFSP has to be within 45 days.</p>	<p>9/25/2015 & 10/14/15, 2/4/16 Call</p>	<p>During initial phone call, the FSC will discuss coming to visit, a description about program including signing consents and advising that the visit will include talking about their day and will take about two hours and schedule home visit. During first home visit, develop Eco Map, sign ROI for providers. Check provider availability before second home visit. During second home visit, administer RBI which counts as MDA and initial IFSP. The FSC will not have to fill out sections 2, 3 and 4 of the IFSP as they will get that information from the RBI. Type IFSP before returning for third visit. During third home visit, review typed IFSP, sign IFSP and discuss services. Continue to be mindful of timelines, completed referral to IFSP has to be within 45 days.</p>	<p>11/20/15The purpose of the Bayley is to know if they are eligible or not. EC, Over a year, will they still get a Bayley and a full MDA?? revisit sections of IFSP replaced by RBI for possible corrections.</p>

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Since we don't have team meetings, many our therapists do not know one another and it may be very difficult to discuss the cases amongst each other. Not sure if all the agencies have regular team meetings where they would have the opportunity to do this.				
The implementation team discussed the changes in first-visit requirements but how are we getting consents so we can contact providers?		2/4/2016	See RBI FLOW Chart from 2/4/16 Call	
Using the RBI to fill in the MDA				
What about children that may require multiple services/ split services and the implications regarding that.	It would be best to have the child's needs served within the same provider agency to avoid complications and duplication of services. Provider input: If split services are required, it would be best to have more than one provider attend the RBI to ensure accurate communication	9/25/2015 11/20/15		
What happens if twins have 2 completely different routines? What happens if you can't complete 1 RBI in 2 hours for twins? Long-term, how would this look when we don't have grant money?				
What happens when FSC asks for availability and provider can do it when initially asked but by the turnaround time, provider can no longer provide services?				
What information will be given in order to complete the RBI?				
What is the time table between RBI and services being referred and started?				
What should be turnaround time be between RBI and start of therapy?				
When to do the Eco map	First Home Visit for both (EC) and (DD) children, with the exception of training and first phase.	9/25/2015 & 10/14/15	First Home Visit for both (EC) and (DD) children, with the exception of training and first phase.	
Where to document most likely service provider per MDA team assessment	CDW Team to look at forms currently used and identify appropriate form and process	9/25/2015		
Who will be the gatekeeper/ how will providers get RBI referrals?	Long-term, will re-visit	11/20/2015		

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Do we share the RBI notes or only the outcomes				
Services - how to ensure more than one provider is not working on the same goal				
Do we need a discipline specific evaluation prior to starting services	Revisit, unclear on recording.	12/4/2015		
If provider does the RBI without the service FSC, how does it get put on the IFSP?	It is not ideal, you have the hand-off issue. Maybe would could develop a flow chart, we need to develop a clear process. We need to get this done so the information is shared appropriately.	11/20/2015		
Do we do an RBI 6 mos. and/or annually to update IFSP	initial and/or annually?	10/14/2015		
Are goals in order of importance on IFSP and, if so, how does the interventionist know?				
How will RBI and Eco map be in the IFSP? Will everyone be able to see this?				
There is no defined protocol for the first visit and completing the parts of the IFSP (1,2,3,5) typically done during the initial visit. Some of the required sections are not addressed in the RBI and it was never determined if these should be answered during the initial visit (transportation, opportunities to interact with other children, etc.)		2/4/2016	See RBI FLOW Chart from 2/4/16 Call	
We need to discuss how much time/effort should go in to capturing missed info. For example if you have general information about social relationships during the RBI but never get "exactly" how it's worded on the IFSP is that ok. What is "good enough" Are their things we want to make sure we get?				

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<p>Re-visit Speech services, evaluation, and parents rights regarding: Sue and Denise will address in a separate Provider meeting/ conversation.</p>	<p>Pages 6 in the notes from 10/14/15-<i>Some are concerned that this process is discounting the clinical judgment of the interventionist, it's absolutely more important than ever because you know what to do with that child to make sure they</i></p>	<p>11/20/2015</p>		
<p>What if a child doesn't have a large enough percent of a delay in speech but family still identifies speech as a priority, does family get services? Clinical judgment can be used but how do we fund services?</p>	<p>Sue and Denise will address in a separate Provider meeting/ conversation.</p>	<p>11/20/2015</p>		
<p>If goals are very specific (i.e., during meal time) does therapy need to be done over meal times?</p>				
<p>Are speech goals based off of RBI or assessments?</p>				
<p>After RBI is administered, does a discipline-specific interventionist do separate assessments?</p>				
<p>When we are writing the goals and giving measurement (4 out of 6 times over 1 month, etc.) will therapists be required to submit data or progress monitoring in order to see if goals have been achieved.</p>				
<p></p>				
<p>Use of RBI for COSF</p>				
<p>MEISR and COSF</p>	<p>(9/2/15) Helenann offered to try the MEISR- per 12/17/15 discussion during Assessment Practices Implementation team meeting- Lisa Savino and Helenann Stimer will try a MEISR at their scheduled 12/21/15 RBI. They can update team.</p>	<p>12/28/2015</p>		
<p></p>				
<p>Should we/can we revamp IFSP document</p>				
<p>Data system modifications</p>				
<p>Is there a way to identify the families that need RBI in DHSS Cares?</p>				