

## Answers to Questions Submitted During Webinar #6

Does not include questions that were answered during the webinar, either by the presenter or written “chat” response.

Q1: Is there documentation somewhere that indicates that “service coordinator” is a recognized credential that is bestowed upon completion of our ECI on the job training?

A1: The staff person should receive their service coordinator certification from their supervisor after they complete the required training as stipulated in 40 TAC §108.315.

Q2: Regarding SST and therapies on the same day: If a parent works and her only day off is Friday and the IFSP SST 4x and ST 4x. The daycare provider will not let us come into their home.

A2: There is no prohibition to receiving a therapy service on the same day as SST. As always, every provider must document for every service delivery event a description of the services that were provided, and the coaching or instruction to the family; the IFSP outcome(s) that was the focus of the intervention, and the child’s progress toward the identified IFSP outcome(s). The documentation of service by each discipline needs to convey the application of discipline specific knowledge, as distinct and different from what may have been done by another discipline with the same family.

In the webinar, there was discussion about services on the same day being a possible “red flag” to auditors because of actions by providers in other service delivery models. If you prefer that teams in your program limit the provision of services to a family on the same day, here are some suggestions for the scenario you have described:

1. Work with parent to assist the daycare provider in understanding the benefits of ECI services for both the child and the daycare staff.
2. Consider using a primary provider model of service delivery ([www.coachinginearlychildhood.org](http://www.coachinginearlychildhood.org)).
3. Consider providing services in the evening or on weekends.

Q3: What do we do when we have those families that we demonstrate an activity but the family is not very involved with the visit? Example: Mom is sitting on the couch texting during the visit.

A3: According to 40 TAC §108.501 SST must include skills training for family members, or other significant caregivers to ensure effective treatment and to enhance the child's development. Additionally, §108.1103 requires that all ECI services place an emphasis on enhancing the family's capacity to meet the developmental needs of the child. One of the goals of intervention should be to help this mother understand that, in order for her child to make optimal progress, she is the primary learner in every early intervention service.

Infants and toddlers are hardwired to learn from their primary caregivers. A core concept of ECI is the family's involvement. From the first contact with the family, staff need to explain to the parent that children learn through the relationship they have with their caregivers. Caregiver participation is critical to their child's success. There are many different strategies to engage parents and ensure they can implement the strategies between visits.

[http://developingchild.harvard.edu/index.php/resources/reports\\_and\\_working\\_papers/working\\_papers/wp1/](http://developingchild.harvard.edu/index.php/resources/reports_and_working_papers/working_papers/wp1/) (Young Children Develop in an Environment of Relationships) (<http://www.coachinginearlychildhood.org/cmisperceptions.php>)

- Q4: It was brought to our attention that if planned services are 2 times per month, if therapist does a make-up from last month and goes 3 times that month, then Medicaid won't pay for the 3rd visit even though it's a part of the total authorized visits.
- A4: You will not find the term "make-up" visit in the Code of Federal Regulations, the Medicaid State Plan, Medicaid regulations, Texas Medicaid Provider Procedures Manual, Medicaid Uniform Managed Care Contract, ECI rule, or ECI contract. Documentation of the service should include how the activity assists the child achieve the stated outcome and addresses an identified need regardless of when the service was provided.