

# Velo-Cardial-Facial Syndrome (VCFS)

## **An overview:**

- SB1612 and what it means to ECI Programs
  - Information about the Syndrome
    - Next steps

# First, some background:

- SB 1612 passed during the 2009 legislative session
- Effective September 1, 2009
- Law contains requirements that ECI must implement

## From the law:

- Each agency that provides intervention services to young children shall provide information regarding VCFS to the parent of a child who is known by the agency to have at least two of the following conditions:

Hypotonicity

Nasal regurgitation during feeding on an infant with no history of cleft palate

Communication delay

Recurrent ear infections along with a diagnosis of cardiac anomaly, feeding disorder, cleft palate, or submucosal cleft

Articulation disorder


Resonance disorder

Fine motor or gross motor skills delay

# “shall provide information regarding VCFS”

The law prescribes the information that must be provided:

- Symptoms, diagnosis, treatment options
- Information on state agencies and nonprofit resources, parent support groups, Medicaid waiver programs
- Recommendation for follow up with a health care provider
- Explanation that the conditions listed won't necessarily result in a diagnosis of VCFS
- **DARS ECI will provide materials.**

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- As you learn about VCFS today, please begin thinking about how to implement these requirements in ECI Policy and in your program practices.

# What is VCFS and why is this so important?

Dianne Altuna, M.S./CCC-SLP

# What do you need to do?

- Provide input:
  - Suggest procedures for implementation
  - Suggest needed policy additions
  - send to [Christine.watkins@dars.state.tx.us](mailto:Christine.watkins@dars.state.tx.us)
  - Send no later than August 5 (one week)
- Attend next webinar (August 12, 2009)
- Train staff
- Monitor implementation by staff