



Connecting

Connect

Family Support is the Heart of our Mission.

December 2012 - February, 2013

Volume 17, Number 4

New Early Intervention Model

Families will experience the new team model of services for their children



A baby squeals happily as she sits on the floor and bangs on pots and pans with a wooden spoon. She tries banging a lid, then a big pot, then a little one. After a few more tries she bangs repeatedly on one particular pot—she has learned the pots produce different sounds, and that pot has the sound she likes best.

Another toddler stretches higher and farther each time he tries to pull himself up onto the sofa. It takes many tries before he learns how to lean his weight and roll just the right way in order to clamber up on his own.

Are these scenarios just meaningless play in the daily life of a child? Or are these simple activities something much more?

Scientists have confirmed what many parents have long understood intuitively—many everyday activities such as play are essential exercises for growing minds and bodies. Those daily activities plus interactions with family and care-

givers at the earliest time periods of life are the most crucial for development and can have long reaching effects throughout life. Parents can help their young child with a disability learn specific skills they need by incorporating particular activities into their daily routines.

Early Intervention—the services provided to children up to their 3rd birthday to address delays in development—is a field undergoing significant changes in response to research that recognizes the family as the primary influence in effecting

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Join the Movement • March 20, 2013

Arizona Gives Day

Claim Raising Special Kids as your charity of choice. See how your participation can help Arizona families of children with disabilities and special health care needs. Visit azgives.org or QR on page 15. PLUS! Meet our new Resource Development Associate on page 13.

www.raisingpecialkids.org

Staff Spotlight

Brianna Carreras, Administrative Assistant



Brianna with her husband and daughter

Brianna's daughter, Viviana was born a little less than five years ago with extremely low muscle tone that left her unable to walk, sit, stand, eat, or breathe on her own.

Viviana was almost three years old before the family received a diagnosis of Congenital Myasthenia Syndrome. Her condition requires nearly 24-hour life support. Brianna explained, "95 percent of our energy is dedicated to seeing to it that her needs are met. She requires the use of a ventilator and tracheostomy tube for breathing, a G-tube for feeding, a wheelchair for mobility, a central line for medication and various orthotic devices for support. The extent of her needs is such that we are constantly managing her care alongside medical specialists, ordering numerous medical supplies, and coordinating what seems like never-ending doctor appointments. Since she is mentally alert and personable, we are constantly looking for strategies that will entertain her and also provide education and mental stimulation."

After a friend told Brianna about Raising Special Kids, she was matched with a volunteer mentor through the Parent to Parent program. "I found it to be an invaluable connection," she said.

She also explained, "It takes extraordinary persistence to navigate state and federal systems, insurance companies, nursing agencies, and hospitals. I've been through so many emotions in raising a child with a complex medical history, and I feel that my persistence and dedication has given me the experience and compassion to help other families. I understand how the frustration and exhaustion are built into your daily routine."

Brianna has brought her experience to bear in assisting everyone who calls our office with patience and compassion. "I love the people I work with, and I love having the opportunity to make a difference to families like my own on a daily basis."



**Raising
Special Kids**®
families helping families

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Parent to Parent support is the heart of Raising Special Kids. Information about local services, educational programs, advocacy, or special health care needs is available in both Spanish and English. Services are provided at no charge to families in Arizona. Raising Special Kids is a 501(c)3 non-profit organization.

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change for a child. It also supports the view that development is an integrated process. All areas of a child's development interact and influence each other, and children learn through the daily interactions they experience with family and caregivers. Early Intervention (EI) service programs in each state were created in response to studies showing intervention during the critical early years of development contributes to school readiness and better outcomes throughout life for individuals with disabilities.

Early Intervention services are concerned with all the basic and brand new skills that babies typically develop during the first three years of life, such as:

- physical (reaching, rolling, crawling, and walking)
- cognitive (thinking, learning, solving simple problems)
- communication (talking, listening, understanding)
- social/emotional (playing, feeling secure and happy)
- self-help (eating, dressing).

More recent studies have shown the way services are delivered has a great impact on outcomes. This has resulted in changes across the country during the last decade to bring EI programs in line with research-based models. Karie Taylor M.A., Acting Executive Director of the Arizona Early Intervention Program (AzEIP) explained, “When AzEIP began making changes there were about 10 states that were moving or had already moved in the same direction. Today, close to 30 states have a similar approach to providing services in their early intervention programs.”

Programs delivering EI services are mandated in Part C of the Individuals with Disabilities Education Act (IDEA) and overseen by the U.S. Department of Education/Office of Special Education Programs. In Arizona, children may be referred to AzEIP by anyone, including their family or a professional working with them, to determine if the child is eligible for early intervention services. Depending on need, children found eligible may receive services such as Speech Therapy, Physical Therapy, Occupational Therapy, vision or audiology services, nutrition services,

Developmental Special Instruction, psychological or social work services.

Until now, a typical week for a parent of a child enrolled in early intervention services may have included visits from two or three different therapists or a developmental specialist, each working independently or for different agencies. A system is not currently in place for these professionals to coordinate their services for a child with each other. As a result, the parent may need to relay progress updates, questions and new priorities or concerns between multiple service providers. Often each professional focuses on one specific area of development. It is then left to the parent to integrate separate recommendations together into their daily routines and follow the different programs. This can be confusing. Families must find providers and schedule visits, which can be frustrating and time consuming. When the parent has new concerns or questions, it may take weeks to identify a professional who will address the concern.

To address concerns families have expressed under the current model, Arizona began implementing the team-based model of service delivery in 2007. Under this model each family is assigned a core team with an occupational therapist, speech and language pathologist, physical therapist, and developmental special instructionist. Other specialists are included as needed to address areas, such as behavioral concerns, vision, and hearing. As new priorities, questions or concerns come up, the parent and the Team Lead have access to other team members through joint visits and participation in team meetings.



The new team-based model of delivering EI services involves a “paradigm shift” in perspective, explained Maureen Casey, former head of AzEIP’s Interagency Coordinating Council (ICC) for Infants and Toddlers and parent of a child who received EI. Teams will include professionals from a variety of

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disciplines who meet together regularly and share updates about the child and family. One member will serve as a team lead to communicate recommendations and coordinate services with the family. As an integral part of the team, families will be involved in making team decisions and prioritizing outcomes. Casey explained, “EI should be a participatory process that involves building on the child’s experiences and coaching families toward confidence and competence in working with their child.”

The family focus of services means the family or caregivers are not mere bystanders, and through a coaching process with the team lead and other team members, they are deeply involved in the process of developing strategies to support outcomes for their child that are important to their family. Strategies are developed using what the family has available and within the context of their regular daily routines. This results in the family being able to practice skills with their child in a meaningful way between visits from the team lead without adding extra work to their day.

Of the approximately 5,500 families currently enrolled in AzEIP, about 40% are already receiving team-based early intervention services. Following program evaluation and some modifications to the model, the remaining families will be transitioning into team-based service delivery beginning in March 2013. This will occur over a period of approximately four months.

Annette is a parent who has experienced the team approach in receiving services for her son, Ethan. She said, “I prefer the coaching method. My husband and I are the head of ‘Team Ethan,’ and the therapists all bring



Occupational Therapy for Ethan

different things to the table. They find things around our home to help teach a skill to Ethan, and they coach us on how to use them.”

Megan’s family received services under the current model. She recalled, “Coordinating all the therapists was definitely challenging. There were many appointments with different professionals, and they were all telling us to work on different things—sometimes it

KEY PRINCIPLES

1. Infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts.
2. All families, with the necessary supports and resources, can enhance their children’s learning and development.
3. The primary role of a service provider in early intervention is to work with and support family members and caregivers in children’s lives.
4. The early intervention process, from initial contacts through transition, must be dynamic and individualized to reflect the child’s and family members’ preferences, learning styles and cultural beliefs.
5. IFSP outcomes must be functional and based on children’s and families’ needs and family-identified priorities.
6. The family’s priorities, needs and interests are addressed most appropriately by a primary provider who represents and receives team and community support.
7. Interventions with young children and family members must be based on explicit principles, validated practices, best available research, and relevant laws and regulations.

seemed so unrealistic. I think the team model would help keep it organized.”

A video featuring Casey discussing team-based Early Intervention can be viewed from Raising Special Kids’ website: www.raisingpecialkids.org. Free trainings: *IFSP Basics*; *Turning 3, What’s Next?—AzEIP to Preschool Transition*; and *Functional Outcomes* are listed in the calendar on page 6. For more guidance on this topic, call Raising Special Kids at 602-242-4366 or 800-237-3007.

Resource Online

- Video tutorials on Arizona’s team-based model: <http://bit.ly/UMtWLR>

Early Intervention Services: Now vs. Team-based

What Do EI Services Look Like Now?	What Will EI Services Look Like in the Team-Based Early Intervention?
Family receives support from the IFSP team, which includes service coordinator and the individual providers identified on the IFSP.	Family receives support from IFSP team, which includes service coordinator, the Team Lead, others identified on the IFSP, other core team members (PT, OT, SLP, DSI), and as needed, psychologist, social worker, and ASDB Vision/Hearing Specialist.
Service coordinators search for service providers among existing contracts, and the family chooses a provider, if available, for each service.	AzEIP team-based early intervention programs provide core team services (PT, OT, SLP, and DSI), social work and psychology. Team Lead is selected from the AzEIP team-based program or ASDB Vision/Hearing Specialist, as appropriate.
More than one regularly occurring IFSP service may be identified for a child and family.	One primary service provider (Team Lead) with skills to best meet the family's needs works with the child/family on a regular basis with support from core team (OT, PT, SLP, and DSI) and the psychologist, social worker and ASDB Vision/Hearing Specialist, as appropriate.
Most families are referred to the AzEIP team-based early intervention services program for screening, AzEIP and agency (DDD or ASDB) eligibility, child and family assessment and the development of the initial IFSP. If eligible for DDD or ASDB, the family is transitioned to a new service coordinator and the family no longer has contact with the first team they met after the referral.	AzEIP team-based early intervention program will provide on-going IFSP services so the family won't have to change teams after the initial planning process. Family will also have support from other core team members and the psychologist, social worker and ASDB's Vision/Hearing Specialist, as appropriate.
IFSP service providers may work for different agencies resulting in fragmented services.	IFSP service providers on core team, psychologist, and social worker all work for AzEIP team-based early intervention program.
IFSP service providers work independently and are generally unable to collaborate/communicate to meet needs of the child/family. Families have to share information/updates multiple times, with each provider.	IFSP service providers and other team members will meet and share information with each other regularly, so everyone will have the same information. Families only have to share information with Team Lead who will share with other team members. Families can participate in team meetings by phone or in person as much as they like.

Table courtesy of Arizona Early Intervention Program

Raising Special Kids Calendar

Disability Empowerment Center, 5025 E. Washington St., #204, Phoenix, AZ 85034

Our office location is a fragrance-free environment, please avoid wearing fragrances.

Register through our online calendar or call 602-242-4366 or 800-237-3007.

IFSP Basics

For parents of children birth to 3. Learn the basics of the process for developing an Individualized Family Service Plan.

Sat. 2/16/13, 1:30 - 3:00 pm

Turning 3, What's Next?

AZEIP to Preschool Transition

Learn how to transition your child from AZEIP services to preschool services provided by the school district.

Sat. 2/16/13, 3:30 - 5:00 pm

Positive Behavior Support

Training on effective techniques for behavior management.

Sat. 1/12/13, 10:00 - 12:00 noon

Tue. 2/12/13, 6:00 - 8:00 pm

Tue. 3/26/13, 6:00 - 8:00 pm

Understanding 504

Learn about the rules and regulations of a 504 Plan and how it differs from the IEP (IDEA).

Thu. 2/7/13, 6:00 - 8:00 pm

Parent/Professional Collaboration

Techniques for effective advocacy. What to ask, how to ask for it.

Tue. 3/26/13, 6:00 - 8:00 pm

IEP Basics

Learn about the purpose of IEPs, parents' role in the process, and how to prepare for meetings.

Thu. 1/17/13, 6:00 - 8:00 pm

Sat. 2/16/13, 9:00 - 11:00 am

Tue. 3/5/13, 6:00 - 8:00 pm

Advanced IEP Training

Receive an in-depth view of the IEP and strategies to help maximize the potential of each student. (Recommended: First attend IEP Basics.)

Thu. 2/21/13, 3:00 - 5:00 pm

The Journey to Adulthood

Provide parents with information about physical, emotional and social changes that adolescence and puberty bring to every child.

Thu. 2/21/13, 6:00 - 8:00 pm

Getting and Keeping the First Job

Assist young adults and parents with identifying the importance of employment for youth with disabilities and special needs.

Sat. 3/9/13, 1:00 - 3:00 pm

High School Transition

Learn how the transition plan in a student's IEP in high school can prepare for higher education, employment, and life in the community. Resources discussed.

Sat. 3/9/13, 10:00 - 12:00 noon

Bully-Free Environments

Learn how to recognize bullying, respond effectively, and build positive solutions.

Sat. 1/12/13, 1:00 - 3:00 pm

Tue. 3/19/13, 6:00 - 8:00 pm

Guardianship

Turning 18, What's Next?

Making the decision; understanding the process. Learn what guardianship involves before your teen turns 18. You will also learn about alternatives to guardianship.

Thu. 1/17/13, 6:00 - 8:00 pm

Thu. 2/7/13, 6:00 - 8:00 pm

Tue. 3/5/13, 6:00 - 8:00 pm

Resilient Relationships

Create and maintain a healthy couples relationship through the journey of raising a child with special needs.

Tue. 3/19/13, 6:00 - 8:00 pm

Transition from Preschool to Kindergarten

Learn eligibility differences and strategies for an effective transition into school age services.

Thu. 1/10/13, 10:00 - 12:00 noon

Sat. 2/16/13, 11:30 - 1:00 pm

Organizing Your Child's Records

Bring your child's special education, ISP, therapy and medical records to this "make and take" session to create your own filing system.

Sat. 3/9/13, 10:00 - 12:00 noon

IDEA: What You Need to Know

Parents learn about their rights and responsibilities under the Individuals with Disabilities Education Act (IDEA). Learn about the law that guarantees a free appropriate public education for students with disabilities and the role of parents in special education.

Thu. 2/21/13, 6:00 - 8:00 pm

Functional Outcomes

Helps parents identify goals for their child's IFSP (Individual Family Service Plan) or ISP (Individual Service Plan). Learn how to work with therapists and providers to support your child's developmental progress.

Sat. 3/9/13, 1:00 - 3:00 pm

IEP 1-to-1 Consultation

Bring your child's IEP for review, as well as your questions and concerns.

Call for an appointment:

602-242-4366 or 800-237-3007

Attendance at all workshops is at NO COST.

www.raisingpecialkids.org

CALENDARIO EN ESPAÑOL

Por favor llamar al 602-242-4366 o 800-237-3007 para confirmar su asistencia a los talleres.
Disability Empowerment Center, 5025 E. Washington St., #204, Phoenix, AZ 85034.
Somos una oficina libre de fragancias.

El Comportamiento Positivo

El vínculo entre las familias las intervenciones y el apoyo conductual positivo es muy importante.

Viernes 1/11/13 10:00 - 12:00 pm
Viernes 3/15/13 10:00 - 12:00 pm

Conceptos Basicos del IEP

Aprender acerca del propósito del IEP a través de una visión general del documento y reunión.

Lunes 1/7/13 10:00 - 12:00 pm

Conceptos Basicos del IFSP

Para padres de niños de 0 a 3 años de edad. Aprenda los pasos basicos del proceso para desarrollar un plan familiar de servicios individualizado.

Viernes 2/8/13 10:00 - 12:00 pm

Organizando los archivos de sus niños/as

Aprenda modos efectivos para organizar sus archivos. Los materiales son proveídos gratuitamente

Viernes 3/15/13 1:00 - 3:00 pm

Es su Hijo Blanco de Burlas?

Estrategias de Intervención para Padres de Niños con Discapacidades.

*Una forma de abuso en la escuela a través de la intimidación, tiranía y aislamiento.

Lunes 2/4/13 10:00 - 12:00 pm

Transición de Escuela Secundaria (High School)

Aprenda como el plan de transición en el IEP de su estudiante de Escuela Secundaria (High School) puede prepararlo para una educación superior, empleo, vida en la comunidad y recursos disponibles.

Viernes 3/8/13 10:00 - 12:00 pm

Al cumplir los 18 años, que sigue?

Tutela: Tomando la Decisión y Entendiendo el Proceso
Aprenda lo que la Tutela implica y sus alternativas antes de que su adolescente cumpla los 18 años de edad.

Lunes 1/14/13 10:00 - 12:00 pm

Lunes 3/4/13 10:00 - 12:00 pm

Destrezas para ser un Padre Defensor Eficaz

Usted aprenderá: Qué es ser defensor; Cómo mejorar sus destrezas de Abogacía; Cómo hacer una contribución significativa

Viernes 1/18/13 10:00 - 12:00 pm

Familias Resistentes

La estructura más básica para una relación de familia saludable, la habilidad de volver de un trauma o una situación difícil.

Lunes 1/21/13 1:00 - 3:00 pm

Para descripciones de talleres y más información, llame a nuestra oficina al 602-242-4366 o al 800-237-3007 o vea el Calendario en español en nuestra pagina web: www.raisingsspecialkids.org

Por favor llámenos para confirmar su asistencia a los talleres.

Vea la página 13 para el Foro de Padres como Compañeros.

Flagstaff

(Please see pg. 6 for workshop descriptions)

Positive Behavior Support

Institute for Human Development
Northern Arizona University

Wed., 1/23/2013, 5:00 - 8:00 pm

Bully-Free Environments and IEP Basics

Ganado Unified School District
Administration Conference Rm
Hwy 264, Ganado, AZ 86505

Tue., 02/12/2013, 5:00 - 8:00 pm

Journey to Adulthood

Institute for Human Development
Northern Arizona University

Wed., 02/27/2013, 5:30 - 7:30 pm

Bully-Free Environments

Second Mesa Day School
Main School Road
Second Mesa, AZ 86043

Wed., 03/27/2013, 5:30 - 7:30 pm

Getting and Keeping the First Job and

Understanding 504

Ganado Unified School District
Administration Conference Rm
Hwy 264, Ganado, AZ 86505

Tue., 03/26/2013, 5:00 - 8:00pm

High School Transition and Guardianship

Turning 18, What's Next?

Ganado Unified School District
Administration Conference Rm
Hwy 264, Ganado, AZ 86505

Thu., 04/09/2013, 5:00 - 8:00 pm



www.raisingsspecialkids.org

Tucson

IEP Basics

Murphy-Wilmot Library
530 N. Wilmot Rd., Tucson 85711

Wed. 1/23/2013, 6:00 - 8:00 pm

Parents as Partners Forum

Presented in Spanish ONLY

Spanish announcement on page 13

Friday, February 15, 2013

10:30 am - 4:00 pm

Registration begins at 10:30 am

Valencia Public Library

202 W Valencia Rd
Tucson, AZ 85706

Resilient Families and
Parents as Partners: Effective
IEP Team Skills

Registration Required
Call Raising Special Kids
602-242-4366 or 800-237-3007

Improving Systems of Care

Public Behavioral Health System and Health Homes

A new medical home pilot program established under The Patient Protection & Affordable Care Act (PPACA) is paving the way to improved mental health care services in Arizona. The program allows states to enroll Medicaid beneficiaries with chronic conditions, which include serious and persistent mental illness, into Health Homes.

The concept of Health Homes arose from the principles for Medical Homes established by the American Academy of Pediatrics and other national organizations to improve systems of care through shared information and coordination of varied types of care for an individual through a central point of contact. The PPACA defines six services related to a Health Home as:

- Comprehensive care management
- Care coordination and health promotion
- Comprehensive transitional care from inpatient to other settings
- Individual and family support
- Referral to community and social services
- The use of health information technology to link services

Building on these principles, the Arizona Department of Health (ADHS) has recognized the need for **integration of behavioral health and physical health care**. Its website says it is supporting a Health Home model of care delivery through “activities including educating healthcare providers, policy makers and the community as well as addressing systemic barriers to integration.” A specialized Regional Behavioral Health Authority (RBHA) for adults with Serious Mental Illness (SMI) Health Home is being created in Maricopa County beginning October 1, 2013 using a model based on the concepts in the Health Home provision of the PPACA.

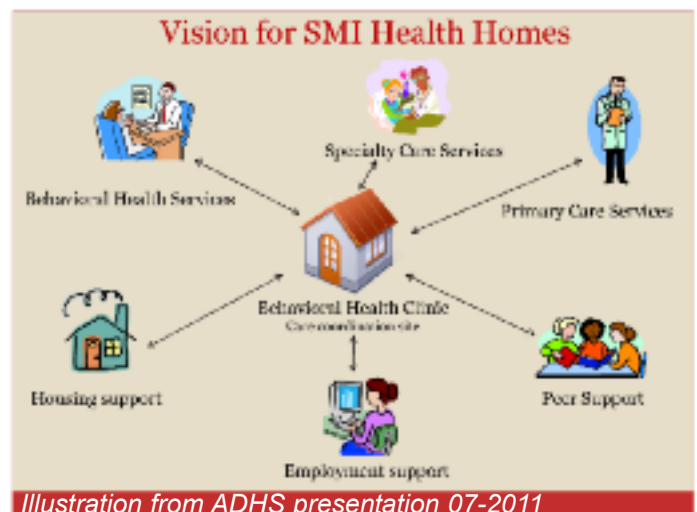
Advocates for improving health care systems are looking forward to similar integration of health services for children. Peggy Stemmler, MD MBA FAAP, Director, Best Care for Kids, Arizona Chapter-American Academy of Pediatrics said, “We have a golden opportunity to think about a new, whole-child



system that will reflect the needs of the child and family. We hope this vision will frame any future changes in the publicly funded health system.” She envisions an ideal integrated health care system that coordinates services from different fields of specialized care centered on the needs of the patient and family.

Arizona is showing signs of moving in this direction. Requirements for providers of integrated care in the new RBHA “must operate as a team that functions as the single point of whole-health treatment and care for all of a member’s health care needs.”

More information on Arizona’s plans for integration can be found on ADHS’ web page on integration activities: <http://ow.ly/gVUIB>.



Resources Online

- ADHS Integrated Behavioral Health and Primary Care: www.azdhs.gov/diro/integrated
- SAMHSA-HRSA Center for Integrated Health Solutions: www.integration.samhsa.gov

Services that Supplement Special Education

Supports You May be Able to Include in an Individual Education Program (IEP)

Some of the services available to students with IEPs may be designed to support the staff who provide services or modify the way materials and services are presented to the student. If the extra time or resources needed to plan or prepare for delivery of services are overlooked, follow-through on delivery of services to a student might be disrupted.



“It seems I’m always learning something new,” reflected one parent after learning about special education services that were not mentioned in IEP meetings she had attended during the previous three years. “I wish I’d known about this sooner.”

She had been surprised by an addition to her child’s IEP of a defined amount of time for the resource teacher to confer with her child’s regular education teacher each week about effective ways to present the fifth grade math curriculum to her child. “I did not think the regular education teacher methods were bad—they probably work really well for most of the students. The resource teacher mentioned some great ideas that I think can improve my child’s ability to absorb the material with less frustration. I didn’t think about the time involved for the teachers to meet and work out how to present the curriculum in a way that’s better for my child. I’m glad they will have the time defined for discussion about methods that are most effective for my child, monitor her progress, and make changes as needed.”

Supplementary Aids and Services

These may include accommodations and modifications to the curriculum, how content is presented or how a child’s progress is measured; direct services and supports to the child, and support and training for staff who work with the child. Examples (*from nichcy.org*):

- Supports to address environmental needs (e.g., preferential seating; planned seating on the bus, in the classroom, at lunch, in the auditorium, and in other locations; altered physical room arrangement)
- Levels of staff support needed (e.g., consultation, stop-in support, classroom companion, one-on-one assistance; type of personnel support: behavior specialist, health care assistant, instructional support assistant)
- Planning time for collaboration needed by staff
- Child’s specialized equipment needs (e.g., wheelchair, computer, software, voice synthesizer, augmentative communication device, utensils/cups/plates, restroom equipment)
- Pacing of instruction needed (e.g., breaks, more time, home set of materials)
- Presentation of subject matter needed (e.g., taped lectures, sign language, primary language, paired reading and writing)
- Materials needed (e.g., scanned tests and notes into computer, shared note-taking, large print or Braille, assistive technology)
- Assignment modification needed (e.g., shorter assignments, taped lessons, instructions broken down into steps, allow student to record or type assignment)
- Self-management and/or follow-through needed (e.g., calendars, teach study skills)
- Testing adaptations needed (e.g., read test to child, modify format, extend time)
- Social interaction support needed (e.g., provide Circle of Friends, use cooperative learning groups, teach social skills)
- Training needed for personnel

Nuevo Modelo de Intervención Temprana

Las familias experimentarán el nuevo modelo de servicios en equipo para sus hijos



Una bebé ríe alegremente sentada en el piso mientras golpea ollas y cacerolas con una cuchara de madera. Golpea una tapa, luego una olla grande y después una pequeña. Tras unos cuantos intentos más, golpea repetidamente una olla en particular: aprendió que las ollas producen sonidos diferentes y que esa tiene el sonido que más le gusta.

Otro niño pequeño se estira y llega más alto y más lejos cada vez que intenta subirse al sofá. Le toma varios intentos aprender a inclinarse y moverse como debe para subir solo.

¿Son estas escenas simples juegos insignificantes en la vida diaria de un niño? ¿O estas actividades simples significan mucho más?

Los científicos confirmaron lo que muchos padres intuían desde hace tiempo: muchas actividades diarias, como los juegos, son ejercicios fundamentales para desarrollar la mente y el cuerpo. Esas actividades diarias y la interacción con familiares y cuidadores en las primeras etapas de la vida son determinantes para el desarrollo y pueden tener efectos de largo alcance en la vida. Los padres pueden ayudar a su pequeño con discapacidades a que aprenda habilidades específicas que le harán falta incorporando actividades particulares en sus rutinas diarias.

La intervención temprana –servicios que se les proporcionan a los niños hasta su tercer cumpleaños para atender retrasos en su desarrollo– es un campo que experimenta cambios importantes debido a las

investigaciones que reconocen que la familia es el principal motor de cambios en los niños. La intervención temprana apoya la corriente según la cual el desarrollo es un proceso integrado. Todas las áreas de desarrollo del niño interactúan y se influyen y los niños aprenden mediante la interacción diaria con sus familiares y cuidadores. Los programas estatales de servicios de Intervención Temprana (EI, por sus siglas en inglés) se crearon por los estudios que mostraban que la intervención en los primeros años, fundamentales para el desarrollo, mejoraba la preparación para la escuela y los resultados en la vida de las personas con discapacidades.

Según estudios más recientes, la forma en la que se prestan los servicios tiene un gran impacto en los resultados, por lo que se han hecho cambios en todo el país en la última década para ajustar los programas de EI a los modelos con base en investigaciones. Karie Taylor, M.A. y Directora Ejecutiva en funciones del Programa de Intervención Temprana de Arizona (AzEIP, por sus siglas en inglés), explicó que “cuando el AzEIP comenzó a hacer cambios, había unos 10 estados que también los estaban haciendo o que ya habían avanzado en la misma dirección. Hoy, cerca de 30 estados tienen un enfoque similar en lo que respecta a la prestación de servicios en sus programas de intervención temprana”.

Los programas de servicios de EI son obligatorios conforme a la Sección C de la Ley para la Educación de los Individuos con Discapacidades (Ley IDEA) y

están supervisados por la Oficina de Programas de Educación Especial del Departamento de Educación de EE.UU. En Arizona, los niños pueden ser referidos por cualquiera, incluso por sus familiares o profesionales que trabajen con ellos, al AZEIP para que determine si puede optar a servicios de intervención temprana. Dependiendo de las necesidades, estos niños

Los servicios de Intervención Temprana se refieren a todas las habilidades básicas y nuevas que los bebés suelen desarrollar durante los primeros tres años de vida, tales como:

- Físicas (alcanzar, rodar, gatear y caminar)
- Cognitivas (pensar, aprender, resolver problemas simples)
- Comunicativas (hablar, escuchar, comprender)
- Sociales/emocionales (jugar, sentirse seguro y feliz)
- De autoayuda (comer, vestirse)

pueden recibir servicios como terapia del lenguaje, terapia física, terapia ocupacional, servicios visuales o de audición, servicios nutricionales, instrucción sobre desarrollo especial, servicios psicológicos o de trabajo social.

Hasta ahora, para un padre inscrito en servicios de intervención temprana, una semana normal puede incluir visitas de dos o tres terapeutas diferentes o de un especialista del desarrollo, cada uno trabajando de forma independiente o para varios programas distintos. Actualmente, no existe ningún sistema establecido para que estos profesionales coordinen sus servicios para un niño. Por esta razón, es posible que el padre deba manejar información sobre el avance del niño, preguntas y nuevas prioridades o inquietudes de múltiples proveedores de servicios. Cada profesional suele enfocarse en un área de desarrollo específico. Luego es tarea del padre integrar recomendaciones hechas por separado en las rutinas diarias y seguir los diferentes programas, lo cual puede resultar complejo. Las familias deben encontrar proveedores y programar visitas, algo que toma tiempo y puede ser frustrante. Cuando el padre tiene nuevas preguntas o inquietudes, puede tomar semanas encontrar un profesional que atienda la inquietud.

Para atender los planteamientos que las familias han expresado con relación al modelo actual, en Arizona se comenzó a implementar un modelo de prestación de servicios en equipo a partir de 2007. Con este modelo, a cada familia se le asigna un equipo central con un terapeuta ocupacional, un patólogo del habla y del lenguaje, un terapeuta físico y un instructor de desarrollo especial. Se incorporan otros especialistas según sea necesario para atender áreas como problemas de comportamiento, visión y audición. Cuando surgen nuevas prioridades, preguntas o inquietudes, el padre y el líder del equipo tienen acceso a otros miembros del equipo mediante visitas conjuntas y participación en reuniones de equipo.

El nuevo modelo de prestación de servicios de EI con base en un equipo comprende un “cambio de paradigma” en perspectiva, explicó Maureen Casey, ex jefe del Concejo de Coordinación Interagencial (ICC) para Bebés y Niños del AZEIP, y padre de un niño que recibió EI. Los equipos incluirán profesionales de distintas disciplinas que se reúnen de forma periódica y comparten información actualizada sobre el niño y la familia. Un miembro servirá como líder del equipo para comunicar recomendaciones y coordinar servicios con la familia. Como parte integral del equipo, las familias participarán en la toma de decisiones del equipo y en el proceso de priorizar resultados. Casey explicó que “la EI debería ser un proceso participativo que trabaje con el desarrollo de las expe-



riencias del niño y enseñe a las familias a tener confianza y capacidad para trabajar con sus hijos”.

El enfoque familiar de los servicios significa que los familiares o cuidadores no son meros espectadores y que mediante un proceso de entrenamiento con el líder y otros miembros del equipo están muy involucrados en el proceso de desarrollo de estrategias para

apoyar los resultados de sus hijos que son importantes para su familia. Las estrategias se desarrollan utilizando lo que la familia tenga a su disposición y en el marco de sus rutinas diarias, lo cual permite que la familia pueda practicar las habilidades con su hijo de forma coherente entre las visitas del líder del equipo sin añadir trabajo adicional a su día.

De las casi 5,500 familias actualmente inscritas en el AzEIP, cerca del 40% ya están recibiendo servicios de intervención temprana con base en equipos. Después de evaluar el programa y hacerle algunas modificaciones al modelo, las familias restantes pasarán a servicios con base en equipos a partir de marzo de 2013. El proceso tomará unos cuatro meses.

Annette es una madre que ha experimentado el enfoque de equipo en los servicios que recibe para su hijo, Ethan. “Prefiero el método de entrenamiento. Mi esposo y yo somos los líderes del ‘Equipo Ethan’ y los terapeutas traen distintas cosas a la mesa. Buscan cosas en nuestra casa que ayuden a enseñarle una habilidad a Ethan y nos entrenan sobre cómo usarla”, explicó Annette.

La familia de Megan recibió servicios con el modelo actual. “Coordinar a todos los terapeutas era un verdadero reto. Había muchas reuniones con diferentes profesionales y todos nos decían que trabajásemos en diferentes cosas, a veces todo parecía poco realista. Creo que el modelo en equipo ayudaría a mantenerlo todo organizado”, indicó Megan.

Existe un video de Casey hablando sobre la Intervención Temprana con base en equipos en la página web de la organización Raising Special Kids: www.raisingpecialkids.org.

Entrenamientos gratis: *Plan Familiar Individualizado de Servicios; ¿Qué sigue al cumplir 3?—Transición del AzEIP al*

Preescolar y Resultados Funcionales, especificados en el calendario de la página 6. Para mayor información sobre este asunto, comuníquese con Raising Special Kids por el 602-242-4366 o el 800-237-3007.



PRINCIPIOS FUNDAMENTALES

1. Los bebés y los niños aprenden mejor mediante experiencias diarias y la interacción con personas familiares en entornos familiares.
2. Todas las familias, con el apoyo y recursos necesarios, pueden mejorar el aprendizaje y desarrollo de sus niños.
3. La función principal del proveedor de servicios de intervención temprana es trabajar con y apoyar a los miembros de la familia y cuidadores en la vida del niño.
4. El proceso de intervención temprana, desde el contacto inicial hasta la transición, debe ser dinámico e individualizado para reflejar las preferencias, estilos de aprendizaje y creencias culturales del niño y los miembros de la familia.
5. Los resultados del IFSP deben ser funcionales y estar basados en las necesidades del niño y los miembros de la familia y en las prioridades que se identificaron en la misma.
6. Las prioridades, necesidades e intereses familiares son mejor atendidos por un proveedor principal que represente y reciba apoyo comunitario y de equipo.
7. Las intervenciones con niños y miembros de la familia deben basarse en principios explícitos, prácticas validadas, la mejor investigación disponible y leyes y reglamentos pertinentes.

Community Notes

Foro de Padres como Compañeros

Presentado en Español

Viernes, 15 de febrero, 2013

10:30 am - 4:00 pm

Registración comienza a las 10:30 am

Biblioteca Pública de Valencia

202 W Valencia Rd
Tucson, AZ 85706

Habilidades efectivas del Equipo IEP

Aprenda habilidades efectivas para comunicación
Por qué es importante aprender habilidades de abogacía
Cómo ser miembro de un equipo de IEP

Familias Resistentes

Relaciones familiares saludables
Cómo manejar un trauma o situación difícil

Registración requerida
No habrá cuidado de niños
Certificados de Asistencia serán proporcionados
Almuerzo será proporcionado

Regístrese en línea en
www.raisingpecialkids.org

o llame a Raising Special Kids al
602-242-4366 o 800-237-3007

Sierra Vista Transition Conference

Saturday, February 9, 2013

9:00 am - 3:00 pm

Learn About High School Transition Plans
How your child can prepare to get and keep their first job
What guardianship is and what the process is

Presented In collaboration with the Arizona Department of Education Parent Information Network

*Presented in partnership with
Sierra Vista Unified School District*

Apache Middle School Library

3305 Fry Blvd., Sierra Vista, AZ 85635

**9:00am Beginning with the End in Mind:
Secondary Transition**

12:00 noon Getting and Keeping the First Job

1:30 pm Guardianship – Turning 18 What's Next?

Certificates of Attendance will be provided
Registration required for each workshop
No charge for parents or caregivers
Spanish interpretation available if requested
No childcare provided

To register please call
602-242-4366 or 800-237-3007

Register on line at www.raisingpecialkids.org



Kelly Watson

Resource Development Associate

Are you interested in making an investment in Raising Special Kids? Call Kelly today at 602-242-4366 X 205.

With more than 13 years experience in philanthropy development, she can help you decide how your support can best help Raising Special Kids.

Stay in the know

*Sign up for our weekly
Monday Memo Email*



Get a free weekly update on news, events, resources, workshops, conferences, support groups, and more. Sign up at **www.raisingpecialkids.org**.

DDD Provider Fair

*Sponsored by the
Division of Developmental Disabilities*

Steele Indian School Park, Phoenix

Saturday, January 26, 2013

10:00 am - 2:00 pm

For families and individuals receiving services through the Division of Developmental Disabilities. This fair provides opportunities to connect face to face with providers from the Valley. Meet providers offering respite, attendant care, habilitation and more.

Raising Special Kids News

CareScape's Dandelion Golf Classic Raised Record



Mitchell Owens, CareScape President and Joyce Millard Hoie, Raising Special Kids Executive Director, applauded by Board Member Paula Banahan.

Raising Special Kids is deeply grateful to the many dedicated volunteers who helped raise a record \$47,500 to benefit families at the 6th Annual Dandelion Golf Classic. So much hard work and many long hours went into making this annual fundraising event an invaluable support for parents raising children with special needs.

Our special thanks are dedicated to **Mitchell Owens, President of CareScape, Inc.** for his “above and beyond” efforts each year leading his team of amazing staff and volunteers to consistently raise the bar and meet extraordinarily high expectations. Raising Special Kids’ Board of Directors nominated Mitchell for a Spirit of Philanthropy award and proudly watched him recognized for his generous support of Raising Special Kids at the Greater Arizona Association of Fundraising Professionals Philanthropy Leadership Awards dinner on November 7.

Since the tournament began, Mitchell and CareScape have contributed more than \$200,000 to Raising Special Kids. We extend our heartfelt thanks to Mitch Owens and all tournament participants.



Kevin Bonner

New Board President

It is with immense gratitude that we bid farewell to Kevin Bonner as he takes leave from the position of President of the Board of Directors. Raising Special Kids thanks Kevin for his six years of dedicated service and unparalleled leadership through the economic challenges of recent years.

Raising Special Kids is delighted to welcome Paula Banahan to the position of President of the Board. In addition to her insight as parent of an adult child with a disability, Paula brings her experience as President and CEO of the New Hampshire Heart Institute, and she now serves as President for Banahan Communications.



Paula Banahan

Staff Appointment to State Panel

We are very pleased to announce the appointment of our Director of Family Support and Education, Christopher Tiffany, to Arizona’s Special Education Advisory Panel. This is a state-level commission for which membership is appointed by the Governor’s Office. Under the Individuals With Disabilities Education Act, each state has an advisory panel for the purpose of providing policy guidance in special education and related services for children with disabilities.



Christopher Tiffany

Thank You to our Tournament Sponsors

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In The Spotlight

Making a Difference in the Lives of Children Thank You for referring families to Raising Special Kids

August - October, 2012

A New Leaf
Arlett Townsend

ABIL

AFAA
Sarah Plato

Alhambra High School

Alhambra School District
Christina Carolan

Arizona Autism United
Paulina Tiffany

Arizona Care Providers
Jackie Rivas

Arizona Center for Disability Law

Arizona Chapter of the American Academy of Pediatrics

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Arizona Early Intervention Program

Arizona Pediatric Clinics

Arizona's Children Association
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Aurora Behavioral Health
Fred Burgmann

Autism Speaks
Amy Hummell

Banner Desert Medical Center
Heidi Solak

Cactus Children's Clinic
Dr. Stephen West

Cardon Children's Medical Center
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Care Connect Arizona
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Care1st Avondale Resource & Housing Center
Jennifer Griffin

Casa Grande Pediatrics
Lisa Smith
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Elva Torres

Chandler Unified School District

Child and Family Resources Inc
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Le Shelly Crank

City of Phoenix Early Head Start
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Community Information & Referral - Department of Defense, Civilian Crisis Nursery
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Deer Valley Unified School District
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Department of Economic Security - Children's Protective Services
Marilyn Gutierrez

Division Of Developmental Disabilities
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Lisa Eddy

Mountain Park Health Center
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Jeanne Kayser

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Sovereign Grace Church

St. Josephs Hospital & Medical Center
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August - October, 2012

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March 23 **A Special Day**
for
Special Kids!

**An event for families of children with
disabilities and special health care needs**
Saturday, March 23, 2013
10 am - 2 pm

McCormick-Stillman Railroad Park, Scottsdale
(located on the southeast corner of Indian Bend and Scottsdale Roads in Scottsdale)

**FREE train rides, carnival activities, carousel rides, games,
activity booths, clowns, face painting, petting zoo,
plus lots of food and ice cream...all for FREE!**

Registration required at the event.

Questions? Contact Raising Special Kids (En Espanol) 602-242-4366 or 800-237-3007.