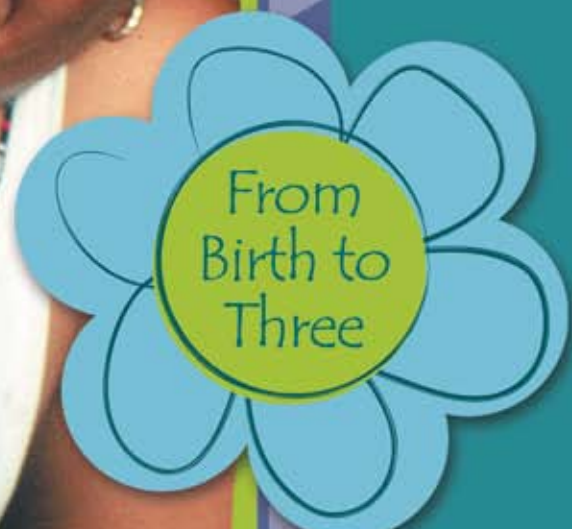


# Family Handbook



NEW MEXICO  
DEPARTMENT OF  
HEALTH



**A Guide to Early  
Intervention  
in New Mexico**

## Our Contact List

TITLE	NAME	TELEPHONE #
Our Local FIT Agency	_____	_____
Our Developmental Specialist	_____	_____
Our Service Coordinator	_____	_____
Other IFSP Team Members	_____	_____
_____	_____	_____
_____	_____	_____
Our Primary Doctor	_____	_____
Our Specialist Doctor	_____	_____
Our Nurse	_____	_____
Other Contacts	_____	_____
_____	_____	_____
_____	_____	_____
Our Family Liaison (PRO)	_____	_____

## Timelines for Our Individualized Family Service Plan (IFSP)

EVENT	DATE
Date referred to FIT Provider	_____
Date of our initial IFSP (within 45 days)	_____
Date of our IFSP review	_____
Date of our annual IFSP	_____

PLACE AGENCY LABEL OR STAMP HERE



**NEW MEXICO DEPARTMENT OF HEALTH**  
**Family Infant Toddler Program**  
 1190 St. Francis Drive • PO Box 26110  
 Santa Fe, NM 87502-6110  
**(877) 696-1472 (Toll-Free)**  
[www.health.state.nm.us/ddsd/fit](http://www.health.state.nm.us/ddsd/fit)



### WHAT'S IN YOUR FAMILY HANDBOOK?

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<b>About Your Family Handbook</b>	<b>3</b>
<b>The Family Infant Toddler (FIT) Program</b>	<b>5</b>
An introduction to the FIT Program, its core values and processes, as well as an overview of early intervention	
<b>Getting Started in the FIT Program</b>	<b>7</b>
A description of how a referral is made, what service coordination is and how to prepare for an evaluation	
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A list of organizations in New Mexico and around the country	

With each birth, families begin to hope and dream for their child's future. You may be receiving new and difficult information concerning your child that you never expected you would hear. You may have been worrying about your child's development for some time and are just now having your suspicions confirmed. Or maybe your family has been told that your child is at risk for developmental delays.

This Family Handbook has been developed especially for New Mexico families. We hope you will find it helpful as you begin learning about how early intervention services can support your role in enhancing your child's learning and development. The New Mexico Family Infant Toddler (FIT) Program can help your family explore options and resources available to you in your community and assist you in setting new directions for this unfamiliar and sometimes confusing journey.

We understand that you know your child best. Therefore, you will be making the decisions concerning supports and services for you and your child. Your observations and thoughts are important to share with the caring professionals who will be part of your team.

We know that it can be a difficult time right now. You may be feeling overwhelmed or wonder what the future holds. The FIT Program can help link you with other families who have "been there" ... families who understand some of the emotions you are experiencing. They have no magic answers but are willing to listen and share their own experiences.

We encourage you to find and follow the dreams, hopes and wishes you have for your family. There will be many opportunities for learning and growth on the road ahead. We hope this handbook will be helpful to you and your family on your journey through early intervention.

**The New Mexico Department of Health  
FIT Program Staff**



# Welcome

Your Family Handbook will be your family's guide to the Family Infant Toddler (FIT) Program and the early intervention system. It will help you put the pieces of the early intervention puzzle together — pieces that can, at first, seem confusing. You will learn about how supports and services can meet your child's and family's needs and about your rights within the FIT Program.



### USING YOUR FAMILY HANDBOOK

#### As a Reference >>

We understand that people are giving you a lot of new information, and it may be hard to take it all in. Your Service Coordinator will go over your Family Handbook with you, but we hope that you and your family will sit down and go through it also — perhaps when things are not so hectic. You will need different information at different times. For example, the world of early intervention has its own language. Your handbook lists some of the most common terms and acronyms and defines them. You will be able to refer to your Family Handbook for information or clarification. You may want to keep it in a three-ring binder along with other important information and documents you receive.

#### As an Advocacy Guide >>

Your Family Handbook will offer useful tips for how you can better advocate for your child's and family's needs.

#### As a Workbook >>

The Family Handbook has several worksheets and tips to help you think about questions to ask or to guide you in making decisions for your child and family. You and your Service Coordinator can decide when and how you want to use these tools.



### Where Are Early Intervention Services Provided?

Young children learn from interacting and playing with you and other family members, as well as others such as a babysitter or childcare worker. Toddlers also learn through play with other children. That's why early intervention is generally provided in the places where your child typically lives, learns and plays. This may include your home, a childcare setting, recreation centers or other community settings. Early intervention staff will help you identify the learning opportunities that can be found in your child's typical daily routines such as playtime, mealtime and bath time. Early intervention professionals will help you identify everyday routines, activities and places that provide learning opportunities for your child.

### How You Know If Your Child Will Receive Early Intervention Services

Early intervention can help with the development of children who have delays, or it can assist in preventing delays in children who may be at risk due to medical or environmental concerns. The next section of the handbook, *Getting Started*, will give you more detail about the evaluation and eligibility determination process. Based on what is learned from an evaluation, you and other members of your IFSP team will decide if your child is eligible for the FIT Program. But it is up to your family to decide if you want to begin early intervention services. You can accept some services and decline others.

#### WHAT IS AN ADVOCATE?

An advocate is a person who is knowledgeable about the person or cause they are supporting and is comfortable expressing his or her thoughts and opinions in support of the person or cause.

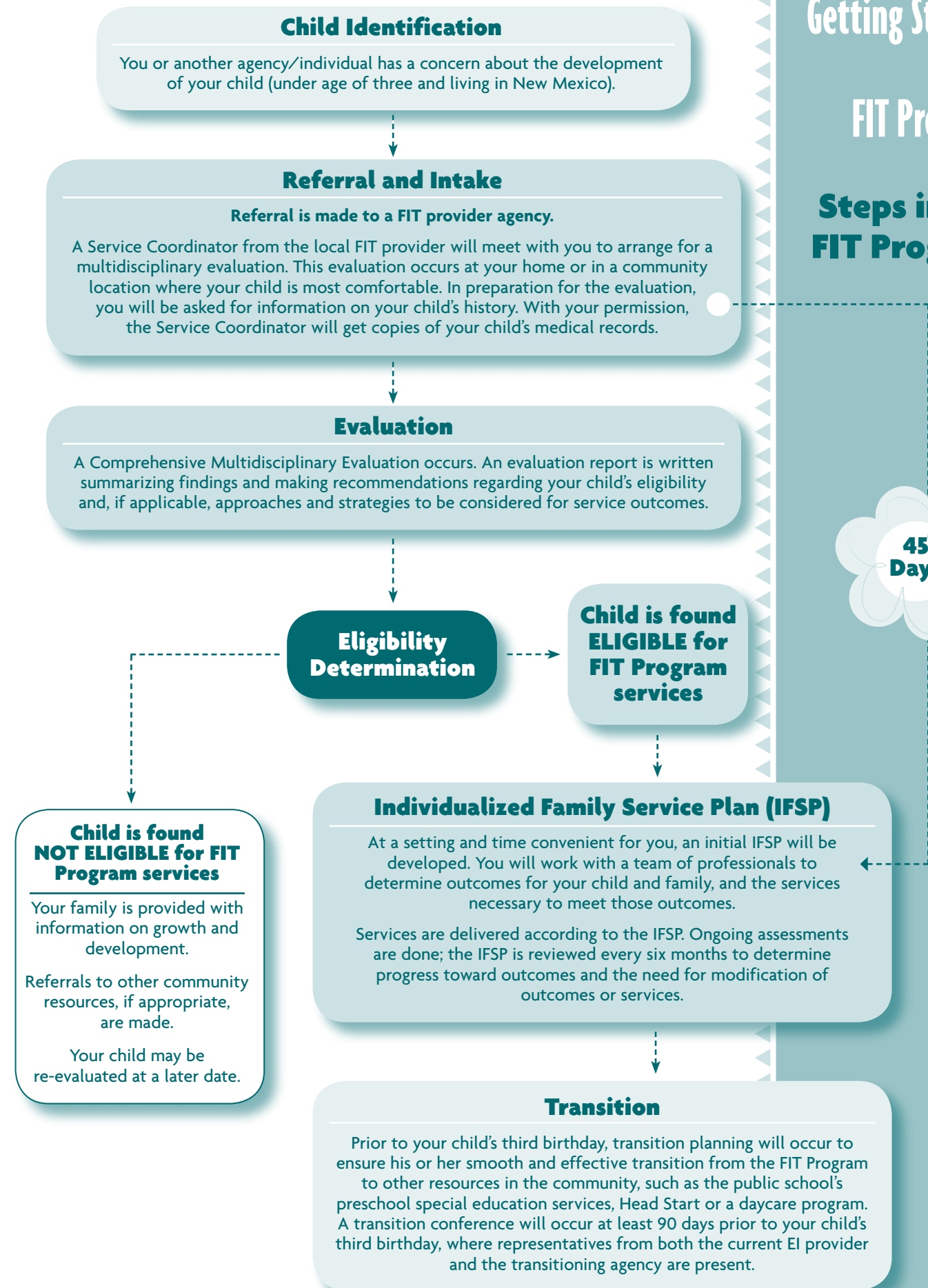
#### TIPS ON BEING A SUCCESSFUL ADVOCATE FOR YOUR CHILD

**No** one knows your child as well as you do, so you are the most qualified to be your child's best advocate. You know his/her routines, likes, dislikes and everything else that makes your child unique. This makes you a valued member of the team.

**You** determine your level of involvement in the program. You will not be penalized for speaking out or denying particular services for your child or family. Share your child's and family's strengths and needs with everyone involved. Identify your family's goals for the process. Speak out if you have questions or disagree! You are an equal partner. Ask questions! Express your concerns as they surface. Progress and change cannot happen without discussion. Ask about different service options and the types of services offered by different providers. Take part in every step of the entire process.

**Stay informed.** Ask for progress reports and keep copies of them and any documentation or information you receive, as well as letters or notes you make. You may need to refer back to them later.

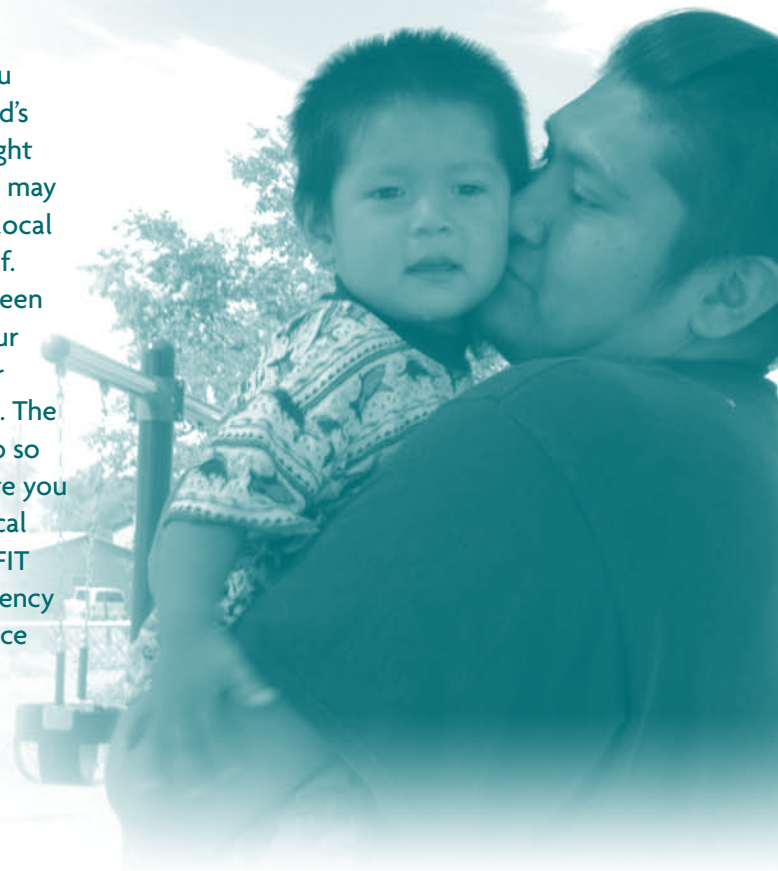
**You** may want to look for further information by attending trainings or conferences or by simply using the Internet or your local library.



# Getting Started in the FIT Program

## Referral for Early Intervention

As the parent or legal guardian, you may have concerns about your child's development or situations that might affect his or her development. You may already have made contact with a local early intervention program yourself. Alternatively, a referral may have been made, with your permission, by your doctor, a childcare worker or other professional who knows your child. The person making the referral must do so within two working days of the date you give your permission. Either the local Children's Medical Services (CMS) FIT worker or the local FIT provider agency will receive the referral and a Service Coordinator (see below) will meet with your family to explain early intervention and help plan your child's evaluation.



### WHO IS THE SERVICE COORDINATOR?

When you are referred for services, a Service Coordinator is assigned to you. At the time of your first Individualized Family Service Plan, or IFSP, meeting, you will get to choose an ongoing Service Coordinator who will work with you throughout your time in early intervention. The following may be options for service coordination in your community:

- A Service Coordinator who works for a local FIT provider agency;
- A Service Coordinator who works for CMS; or
- If your child is medically fragile, your Service Coordinator will be from the Medically Fragile Case Management program.

Each family will have only one Service Coordinator. You may change your Service Coordinator at any time. You may do this by contacting the director of the program currently providing service coordination for your family.

### WHAT DOES THE SERVICE COORDINATOR DO?

Your Service Coordinator is available to:

- Help you understand information given to you;
- Inform you of your rights within the FIT Program;
- Help you get the evaluations and assessments your child needs;
- Let you know what services are available and how to get them;
- Coordinate and assist in the development and review of the IFSP;
- Make sure you receive the services that are on your IFSP;
- Help you access support services, such as parent groups;
- Help you resolve concerns if they arise;
- Assist in the development and implementation of a transition plan for after early intervention;
- Refer you to other services, such as child care, health or family support services; and
- Help you become your child's best advocate.

An evaluation involves professionals trained in different areas, such as a developmental specialist and a therapist who use assessment tools to look at your child's abilities and needs. This information is used to determine eligibility for the FIT Program, as well as for recommending outcomes and strategies.

At least two professionals from two different fields of expertise will partner with you to conduct an evaluation. The evaluation must involve assessment activities in the following areas of development:

- Adaptive or self-help skills such as bathing, feeding, dressing, toileting
- Cognitive skills such as thinking, learning, reasoning and problem-solving
- Communication skills such as understanding and using words or gestures
- Physical development such as vision, hearing, movement and health
- Social emotional development such as feelings, getting along with others and relationships

Your Service Coordinator will ask you to sign your consent for the evaluation to take place. They may also ask for a "release of information" so they can get a copy of your child's medical records and any other relevant documents.

### Planning for Your Child's Evaluation

You and your Service Coordinator will discuss who will be on your evaluation team — based on the concerns and priorities you see for your child. The team may include professionals from your local FIT provider agency and/or from a team such as the Early Childhood Evaluation Program (ECEP) at the University of New Mexico (UNM).

The evaluation may take place where your child usually spends the day so that your child feels most comfortable.

When scheduling the evaluation with your Service Coordinator, think of the best time for you and your child. You might think about the times when he or she is most awake. The evaluation may be done on more than one day so that the team can get to know your child and your child can feel more comfortable with them. The evaluation must be completed within 45 days of your referral to the FIT Program. If needed, your family can choose to delay the evaluation — for example, if your child is ill.

You will play an important part in the evaluation. Evaluation team members will talk to you about your child's strengths and needs and will ask you to be involved in the assessment activities. Much of the evaluation will involve play with your child to see what he or she can do. The evaluation team will also ask you questions about your child's development — for example, "How many words does he say?" "How does he let you know if he is hungry?" "Tell me about bedtime — how is that going?"

To help you in preparing for your child's evaluation and assessment, you may want to think about these questions and take any other information with you that will help.

### HOW YOU CAN HELP WITH YOUR CHILD'S EVALUATION

- Plan the most comfortable environment for your child's evaluation, so your evaluation team can get the clearest picture of your child.
- Sit beside or hold your child.
- Join in with the assessment activities.
- Tell team members if what they are seeing is typical for your child.
- Help the team see your child's strengths and needs.
- Comfort and support your child.
- Ask questions and offer your opinions about how your child's evaluation is going.

# Getting Started in the FIT Program

## An Evaluation for Your Child

## Evaluation Worksheet

You may find this worksheet helpful in preparing for your child's evaluation.

1. How was your pregnancy and your child's birth?
2. How has your child's health been?
3. Has your child had any other tests or evaluations?
4. What concerns do you have about your child's development (ability to talk or communicate needs, ability to walk or move about, eating or feeding problems, health issues, hearing or vision problems)?
5. What interests your child? What excites him? What frustrates her?
6. Who are the most important people in your child's life?
7. What is the effect of your child's needs on your family?
8. In what ways does your child perform everyday activities — like communicating with you and with others (pointing, using special words or sounds, using eyes) or moving about (walking, crawling, rolling, using specialized equipment)?
9. What types of things does your child do well (communicating needs, playing with others, walking, running)?
10. What other information can you provide that will give a more complete picture of your child? (Are there brothers or sisters in the home? How is the house arranged or adapted for your child? What are the best ways of interacting with your child?)

Someone from the evaluation team will go over the results of your child's evaluation with you. You will also get a written copy of the report(s). The report should be written in easy-to-understand terms, but if there is anything that is unclear, be sure to ask! Your Service Coordinator can help get answers to your questions.

### Determining If Your Child is Eligible

A team that includes you, your Service Coordinator and professionals who were part of the evaluation determine your child's eligibility for the FIT Program. The team will consider information from medical and other records, assessment results and professional judgment in determining eligibility under one of the four FIT Program eligibility categories. Your child's eligibility will be documented in his or her record, and is only shared with people for whom you have signed a release.

### What If Your Child is Found to be Not Eligible?

If the team decides, based upon the evaluation, that your child is not eligible for the FIT Program, your Service Coordinator will help you explore other supports or resources in your community. The Service Coordinator can also give you copies of a screening tool, which you can use to monitor your child's development. If you have concerns in the future, your child may have another evaluation. If you disagree with the results of the evaluation you can appeal by calling the FIT Program toll-free at (877) 696-1472.

### FIT PROGRAM ELIGIBILITY CATEGORIES

1. Developmental Delay of 25% or more in one area of development
2. Established Condition that has a high probability of causing a developmental delay such as vision or hearing loss, Down Syndrome, Cerebral Palsy, etc.
3. At Risk due to medical or biological factors such as low birth weight or prematurity
4. At Risk for Developmental Delays due to environmental conditions that could affect your child's development

## Results of the Evaluation



**Individualized** – The plan will be written specifically for your child and family.

**Family** – The plan will focus on changes you want to see for your child and family as a result of your participation in early intervention. These changes are referred to as “outcomes.”

**Service** – The plan will include details of the early intervention services your child and family will participate in – including how, when, where and how often services will be delivered.

**Plan** – The plan is a written document that can be changed as your child and family’s needs change.

You and the early intervention professionals will work as a team to develop a plan called the Individualized Family Service Plan (IFSP). This plan is unique to your child and family. As a parent, you will work with the members of your team to decide:

- What things your child is doing well that you would like to build upon and strengthen.
- What you would like to see changed for your child and family as a result of early intervention.
- What will need to happen to help make these changes occur. (This will be a description of the people who will interact with your child and family, and the activities that will be worked into your routines to help make these changes happen.)
- What kinds of early intervention services will be provided to help you and other people in your child’s life make the identified changes happen.

### Your Initial IFSP

Your family’s first IFSP meeting will be held within 45 days of the referral to the FIT Program, unless you need to delay the process (for example, if your child is sick and the evaluation must be delayed). Your Service Coordinator will help you plan and prepare for your IFSP meeting. Your Service Coordinator will coordinate the meeting with you and will invite the people you want to attend. These people will make up your IFSP team.

### Your IFSP team includes:

- You (parent(s), guardians, foster or surrogate parents)
- Your Service Coordinator
- Other professionals (developmental specialist(s), therapist(s), nurse, doctor)
- Other people you’d like to include (family, friends, childcare provider, babysitter)

If certain people cannot attend the meeting, they may give their input in writing or by telephone ahead of time.

### THINGS TO THINK ABOUT WHEN PLANNING YOUR IFSP MEETING

- **When** would be a convenient time for the meeting?
- **Where** is the best location for the IFSP meeting — living room, kitchen table, childcare center?
- **Who** do you want to be there — developmental specialist, therapist, grandma, older sibling, doctor, childcare worker, etc.?
- **Will** you need an interpreter (for example, if English is not your primary language)?

### Preparing for Your IFSP Meeting

Your Service Coordinator will help you prepare for your IFSP meeting by helping you think about what’s important for your child and family. They may offer you materials to complete in your own time or sit down with you and ask you a number of questions about your concerns, priorities and resources. This “family assessment” can help your family think about what you want as a result of early intervention. This process is optional for families.

#### STRATEGIES FOR A SUCCESSFUL IFSP

**Plan** to have enough time so the meeting doesn’t feel rushed.

**Be prepared** — make a list of questions or issues you want to discuss at the meeting. (The worksheet on page 14, “Things to Consider As You Prepare to Develop Your Family’s IFSP,” may be helpful.)

**Listen** to what other team members have to say.

**Be clear** about what you want.

**Ask questions** if you don’t understand something.

**Don’t be afraid to ask for help!**

**Make sure you understand** who will be following up on what after the meeting.

### What Is Written in Your IFSP?

Your IFSP must include the following:

- A summary of your child’s present abilities, strengths and needs.
- A section on your family’s concerns, priorities and resources (with your agreement).
- Outcomes that you choose for your child and your family.
- Details of the early intervention services that can help you meet your child’s and family’s outcomes including what, where, when and by whom. (A list of early intervention services can be found on page 15.)
- A plan for transition for when your child leaves early intervention (at least six months before your child turns three).

The IFSP is a document that will change as your child’s and family’s needs change. It should always reflect the current services and supports you are receiving.

### YOUR IFSP MEETING

You are an important member of the IFSP team and your input and questions are extremely valuable. At the meeting, a lot of information and ideas will be shared. Along with your fellow IFSP team members, you will accomplish these things:

- Review all the information that has been gathered about your child.
- Talk about your concerns and priorities as well as your family’s strengths and resources (such as medical insurance and family support).
- Develop the outcomes (changes) you want for your child and family. For example — “We want Sam to be able to play with his brother.” “We would like to meet other parents.” Or, “We need help with child care.”
- Describe activities or strategies that will help you make progress toward the outcomes.
- Discuss which people in your child’s life will best be able to participate in these activities and what they need to do.
- Decide on which services could help you meet your child’s and family’s outcomes.
- Discuss the way progress toward meeting the outcomes will be reviewed.

### THINGS TO CONSIDER AS YOU PREPARE TO DEVELOP YOUR FAMILY'S IFSP

I would describe my child to others as ...

What's working for us is ...

The biggest challenges we are facing right now are ...

What I worry most about is ...

What I would like to be able to do with my child is ...

We'd like more information about ...

As a family, we need help with ...

The current resources and strengths of our family are ...

There are a number of early intervention services available to help your child.

- Assistive Technology** Equipment, devices and/or products, including those acquired commercially, modified or customized, that increase the functional abilities of children with developmental delays (such as a communication device or seating chair).
- Audiology** Testing a child's hearing and other auditory services (including hearing aids or specific training regarding amplification needs).
- Developmental Consultation** (Special Instruction) The design of and consultation on developmentally appropriate activities that families and caregivers can include in the child's typical day and may include activities within all developmental areas.
- Family Training, Counseling and Home Visiting** By social workers, counselors and other qualified personnel to assist a family in understanding their child's behavior and improve child and family interaction and other parenting skills.
- Health Services** Helping a child benefit from other services, including clean and intermittent catheterization, tracheostomy care, tube feeding, changing dressings or ostomy collection bags, and consultation with service providers concerning special healthcare needs.
- Medical Services** Diagnostic or evaluation services by a licensed physician used to determine a child's medical status and how it may affect development.
- Nursing Services** Health assessments and nursing education to prevent health problems or improve functioning and administration of treatments.
- Nutrition Services** Provided by a dietitian/nutritionist who evaluates the child's nutritional needs.
- Occupational Therapy** Helping children gain skills needed for play and daily living activities, designing and providing adaptive and assistive devices, as well as addressing the sensory motor and fine motor needs of the child.
- Physical Therapy** Helping families and caregivers to enhance the child's movement abilities (including crawling, standing, walking and balance) through therapeutic activities, appropriate positioning, and with adaptive and assistive devices that can be incorporated into the child's typical day.
- Psychological Services** Counseling, psychological and developmental testing and analysis and interpretation of a child's behavior.
- Respite Services** Respite services may also be available through the Developmental Disabilities Supports Division (DDSD). Respite services can provide a break from childcare to caregivers. Please ask your Service Coordinator for more information.
- Service Coordination** Assisting families through the intake, evaluation and eligibility determination process and facilitating the IFSP process. Service Coordinators also provide information about and make referrals to other community resources, and coordinate and ensure the delivery of all services.
- Social Work Services** Assessing a child within the family setting, counseling and developing social skill-building activities for a child.
- Speech-Language Therapy** Helping families and caregivers to enhance the child's understanding of language and develop communication skills, which may include speech, signs and gestures.
- Transportation** Transportation arrangements to enable families to get to any early intervention services that are provided at a location other than the family's home.
- Vision Services** Evaluation and assessment of vision, visual and mobility training, as well as referral of medical and other professional services necessary.

Your IFSP must be reviewed at least every six months. You can meet whenever you think it would be helpful for your team to get together and review the plan. At your annual IFSP review, a new document will be developed. Some of the information may be carried forward from the previous plan. As with your initial IFSP you can choose who will attend the IFSP review meeting and assist in the planning of where and when the meeting will take place.

### Where Will Services Take Place?

Services can be provided in settings where your child typically spends his or her day. This can include your home, other family members' homes, childcare or other community settings. It is important for people who spend time with your child to be familiar with activities and opportunities to enhance your child's development. The early intervention staff will give you ideas of how to incorporate learning activities into your child's typical daily routines, such as play times, meals and bath time.

Starting on page 17, you will find a copy of a blank IFSP form. The form used by your service provider may not look just like this, but it should contain similar information. You may find it helpful to review this prior to your IFSP meeting so you will know what to expect.



### PLACES WE GO — THINGS WE DO

You may want to let your IFSP team know about places where you and your child spend time such as childcare, library, a grandparent's home, parks, babysitter's home, toddler group, etc., so your child's learning and development can be supported in these settings. You may also want to list places you would like to go and activities you would like to do with your child.

**Places We Go** >> \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Things We Do** >> \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**With Whom** >> \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**When** >> \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



## New Mexico Family Infant Toddler Program

Your Program Logo here

### INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP)

Referral Date: \_\_\_\_\_ Referral Source: \_\_\_\_\_

IFSP Date: \_\_\_\_\_ Exit Date: \_\_\_\_\_

**This Plan is the:** (check one and include date)  
 Interim IFSP OR  Initial IFSP OR  IFSP Review OR  Annual IFSP (requires new form)

Expected Date for IFSP Review: \_\_\_\_\_  Date Transition Plan Added \_\_\_\_\_

Expected Date for Annual IFSP Meeting: \_\_\_\_\_ Dates IFSP Revised: \_\_\_\_\_

**Designated Service Coordinator:** \_\_\_\_\_  
(Service Coordinator's Name, Agency) (Telephone Number)

**Child's Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  Female  Male

Social Security Number: \_\_\_\_\_ Medicaid Number: \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Parent/Guardian Name:** \_\_\_\_\_

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_

Physical Address: \_\_\_\_\_

County of Residence: \_\_\_\_\_ Primary Language Spoken in Home: \_\_\_\_\_

**Race/Ethnicity:**  American Indian/Alaskan Native - Tribe: \_\_\_\_\_  Black or African American  
 Hispanic or Latino  White (not Hispanic)  Asian or Pacific Islander  Unknown

**Date Eligibility was Determined:** \_\_\_\_\_ (See Evaluation Report for further information)

**Date Eligibility Determination was Updated:** \_\_\_\_\_

**Current Eligibility for the Family Infant Toddler Program** (check one):

Developmental Delay  Established Condition  Biological/Medical Risk  Environmental Risk

Child is NOT eligible. Referred to: \_\_\_\_\_

ICD-9 CM Code 1: \_\_\_\_\_ ICD-9 CM Code 2: \_\_\_\_\_ ICD-9 CM Code 3: \_\_\_\_\_

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### Everyday Routines, Activities, and Places

Young children learn best through routines and activities that they are interested in and that they participate in often. It is helpful for us to know where your child regularly spends time so that together we can plan for early intervention supports and services for your family.

<p><b>Where and with whom does your child spend time?</b> (Please tell us a little about your child's and family's routines and activities. In addition to your child's day-to-day activities, you might want to tell us about some of the things that you do every now and then that are important to your child/family, like visits to friends and family members, religious or spiritual celebrations, community and/or cultural activities).</p>	<p>Describe activities that your family <b>would like to do now or in the future</b> and that you would like some help with. (If there is nothing like this that is important to you right now, we will just write "none".)</p>
<p>Describe the people, toys, activities, routines, and places your child <b>enjoys</b> the most:</p>	<p>Describe the people, toys, activities, routines, and places your child finds <b>challenging or difficult</b>:</p>

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### Family Concerns, Priorities, and Resources

(related to enhancing the development of their child)

<b>Family Concerns and Priorities</b> ( <input checked="" type="checkbox"/> ONLY what the parent wants to share)	<b>What Was Done (include dates)/ Follow Up Needed if Any</b>
<p><b>I would like to learn ways to help my child:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> With crying/colic   <input type="checkbox"/> Calm down   <input type="checkbox"/> Sleep/bedtime</li> <li><input type="checkbox"/> Eat better/nutrition</li> <li><input type="checkbox"/> See better      <input type="checkbox"/> Hear better   <input type="checkbox"/> Sit up      <input type="checkbox"/> Stand up</li> <li><input type="checkbox"/> Move around      <input type="checkbox"/> Use hands or fingers better</li> <li><input type="checkbox"/> Talk or communicate (express) wants and needs</li> <li><input type="checkbox"/> Better understand what other people communicate</li> <li><input type="checkbox"/> Learn new things                      <input type="checkbox"/> Play with toys</li> <li><input type="checkbox"/> Have fun with children              <input type="checkbox"/> Express feelings</li> <li><input type="checkbox"/> Behave/deal with challenging behaviors</li> <li><input type="checkbox"/> Use the toilet                              <input type="checkbox"/> Dress himself/herself</li> </ul> <p><b>Other:</b></p> <p><b>I want more information about:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Playing with my child</li> <li><input type="checkbox"/> Ideas for involving brothers, sisters, and friends</li> <li><input type="checkbox"/> Meeting with other families who have similar concerns</li> <li><input type="checkbox"/> Child care    <input type="checkbox"/> Respite      <input type="checkbox"/> Managing stress</li> <li><input type="checkbox"/> More ways to have fun as a family</li> <li><input type="checkbox"/> My child's condition or disability</li> <li><input type="checkbox"/> Finding or working with doctors/dentist</li> <li><input type="checkbox"/> Equipment, supplies and/or assistive technology</li> <li><input type="checkbox"/> Money for costs related to the special needs of my child</li> <li><input type="checkbox"/> Housing, job, food &amp;/or phones    <input type="checkbox"/> Safety              <input type="checkbox"/> Legal issues</li> <li><input type="checkbox"/> Getting a GED or other schooling   <input type="checkbox"/> Substance abuse</li> </ul> <p><b>Other information I would like</b> (please describe):</p>	
<p><b>Family Resources:</b> (include family, friends, community groups, financial supports, etc. that are helpful to you)</p>	

In addition to the information you have already provided, is there anything else you would like to tell us that would be helpful in planning supports and services with you to address what is most important to your child and family? (Use back of page). I choose **NOT** to share information about family concerns, priorities and resources. [            ]  
Parent Initials

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### Child/Family Outcome

**Outcome # \_\_\_\_\_**

What we want to see for our child/family as a result of early intervention supports and services.

**What will progress look like?**

(Include the date, what the child/family will do, and how you will know it is happening. For example "By his first birthday (1/1/03) his parents report Johnny crawls on hands and knees from his bedroom to living room")

**Our Strategies:**

WHO will do WHAT in WHICH Everyday Routines, Activities and Places?\*

\* Supports and services must be provided to your child in settings that are natural or typical for children of the same age (natural environments). If, as a team we decide that we cannot achieve an outcome in a natural environment, we need to describe how we made that decision and what we will do to move services and supports to natural environments as soon as possible.

**This outcome cannot be achieved by providing supports and services in natural environments because:**

**We will work toward providing supports and services in natural environments to achieve this outcome by (describe plan and timeline):**

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### Present Abilities, Strengths, and Needs

A developmental evaluation/assessment was recently completed with your child and/or ongoing assessment information has been gathered. This information helps us understand your child's developmental strengths, as well as some of the things that are challenging for your child and may be affecting how he is able to participate in family and community activities. This is the place where we SUMMARIZE what we have discovered so that our plan fits well with your child's developmental strengths and needs.

**Indicate the dates and types of evaluation or assessment reports that were used to develop this summary:**

Child's Age: \_\_\_\_\_ (circle which: chronological / corrected)

**Summary of Relevant Health Status (Including Vision and Hearing)**

Primary Care Provider:

**Using My Hands and Moving My Body (Gross and Fine Motor Skills)**

Things I like and things I do well:

Things that I don't like and that I need help with:

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### Present Abilities, Strengths, and Needs

Understanding and Communicating (Receptive and Expressive Language)	
Things I like and things I do well:	Things that I don't like and that I need help with:
Playing, Thinking, Exploring (Cognitive Skills)	
Things I like and things I do well:	Things that I don't like and that I need help with:

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### Present Abilities, Strengths, and Needs

Expressing and Responding to Feelings and Interacting with Others (Social and Emotional)	
Things I like and things I do well:	Things that I don't like and that I need help with:
Eating, Dressing, and Toileting (Self-help or Adaptive Skills)	
Things I like and things I do well:	Things that I don't like and that I need help with:



Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### Individualized Family Service Plan - Signatures

The following individuals have participated in the development of this ISFP and/or will assist in carrying it out. (This form must also be used to document signatures of participation in the 90-Day Transition Conference.)

**Note:** The IFSP team must include parent(s)/guardian; service coordinator; person(s) directly involved in conducting the evaluations and assessment; others as requested by parents (family, friends, advocates); and personnel providing services to the child and family.

Print Name (Role/discipline Licensure/Certification)	Signature	Date	Method of Participation	Agency/Contact Information

In addition to the team members listed above, this IFSP should also be mailed\* to:

Primary Care Provider: \_\_\_\_\_

Other: \_\_\_\_\_

\* Complete authorization to release form

#### Informed Consent by Parents/Guardians

I have received a written copy of and verbal explanation of my rights in the FIT Program including the right to:

Participate An evaluation Give consent A plan within 45 days	Confidentiality Prior written notice of meetings Review your records Understand information (in native language)	Submit a complaint Help to resolve Disagreements
---	---	--

I participated fully in the development of this plan; and

I give consent for this Individualized Family Service Plan (IFSP) to be carried out as written; or

I do not accept this ISFP to be carried out as written however I do give consent for the following service(s) to begin: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

#### How to Get the Most From Early Intervention Services

- Make sure you are home and/or make sure that your child's caregiver knows when the early intervention services have been scheduled.
- Arrange for services at times that are good for you and your family.
- Write down appointment dates and times.
- Participate when early intervention services are provided.
- Ask questions!
- Try out the activities and ideas that your early intervention professional shows or describes to you.
- Take a break from early intervention activities — sometimes play can just be play!
- Involve other family members (grandparents, brothers and sisters) in early intervention activities.
- Make learning activities fun!
- Find teachable moments in everyday routines such as shopping, mealtime, playtime, etc.
- Take time for yourself!

#### How Can You Meet Other Parents?

There may be opportunities through your local FIT provider agency for you to meet other parents with children who have or who are risk for developmental delays. Sometimes play groups, parent groups or other functions are times to meet other parents. Parents Reaching Out is a parent-run organization that offers many ways for you to network with parents across New Mexico. They can connect you with another family who is experiencing similar issues with their child. You can reach **Parents Reaching Out toll-free at (800) 524-5176**.

#### Parents Reaching Out can:

- Let you know about parent groups.
- Help connect you (by phone or in person) with other parents.
- Inform you of parent training opportunities.
- Provide you with information on state and national resources.
- Send you information.
- Connect you with a family liaison who is knowledgeable about early intervention.
- Let you know of opportunities for giving input to improve early intervention services in New Mexico.
- Help you prepare for transitioning from the FIT Program to other services.

**Native American families may also get training through Education for Parents of Indian Children with Special Needs (EPICS). Please call (505) 867-3396.**

#### BEING AN EFFECTIVE PARENT ADVOCATE

- Remember that you are an important member of the IFSP team.
- You are the person who knows your child the best.
- Know your family's rights and responsibilities.
- Let team members know about your child's and family's strengths and needs.
- Take part in every step of the early intervention process.
- Ask questions!
- Speak out if you have a suggestion or disagree.
- Keep copies of reports, your IFSP, medical information you receive, as well as any letters or notes that you make.
- If you have concerns about your services, talk to your Service Coordinator as soon as possible.
- Ask about parent groups in your community or nearby town.
- Find out information by attending trainings, conferences and by using the Internet or library.

**What Is Transition?**

As your child approaches his or her third birthday, your Service Coordinator will talk with you about options for your child after he or she leaves the FIT Program. A transition plan will describe what needs to happen to make the transition smooth and successful. Transition plans may also be used if you are moving to another community, if your child is starting or leaving childcare, or if your child has been in the hospital for a significant length of time and is returning home.

**What Are Your Options for Transition?**

After your child leaves the FIT Program, he or she may go to:

- Head Start
- Special education services (through your local public school district)
- Private childcare or preschool setting
- Other community supports

You may want to visit potential transition sites to get to know your options. Your Service Coordinator will help you think about which environment and program would be best for your child. Your Service Coordinator also will help you understand the eligibility requirements for the various programs.

**When Will Your Child Transition?**

Early intervention through the FIT Program is available until your child turns three years of age. If your child turns three during the school year and is eligible for public school special education services, your child may transition at any point from the beginning of that school year to the beginning of the following school year. For example, if your child turns three in January, you may choose to do the transition to public school during the August before his or her third birthday, the next August or at any date during that school year.

**WHAT TO EXPECT FOR YOUR TRANSITION MEETING**

**Your family should:**

- Share your hopes and concerns for your child;
- Ask about supports for your family beyond early intervention; and
- Ask questions about anything that is unclear.

**Early intervention staff will:**

- Share information about your child's progress;
- Help write a transition plan that details the steps for transition;
- With your permission, make sure the new program has all the information they will need about your child (evaluation and assessment information, a copy of the IFSP, etc.); and
- Help you identify additional community resources and supports.

**School district/Head Start/preschool staff will:**

- Explain the eligibility requirements and your rights;
- Explain the process for applying/registering;
- Discuss options for the delivery of services your child will need; and
- Help determine whether any additional evaluations will be needed prior to transition.

**What Will Your Transition Plan Include?**

Your transition plan will detail the steps your family, your IFSP team and the school district, Head Start and/or childcare staff will take to ensure the smooth transition to a new program. The plan should include:

- What is to be done (for example, "Visit the school");
- Who is to do it (for example, "Parent and Service Coordinator"); and
- Timelines for completion.

The steps in the plan may include things like visits to the new setting by you and your child as well as other supports for your family beyond early intervention.

On the following two pages, you will find a Transition Plan form to help you prepare for your child's transition, as well as a 90-Day Transition Conference form. (These forms may look different from the one used by your local FIT provider agency, but the content should be the same.)

If your child will be moving to another setting, such as Head Start or private preschool or childcare, you can make the transition at a convenient time close to your child's third birthday.

Your Service Coordinator will help your IFSP team begin transition planning at least six months before your child is eligible to transition. You and your team will meet with folks from the preschool or other programs to develop a detailed transition plan at least 90 days before the anticipated date of transition (but no later than 90 days prior to your child's third birthday). You may want to attend training on the transition process from Parents Reaching Out or your local FIT provider agency.

Date of your transition meeting » \_\_\_\_\_

Things to think about and do prior to the meeting »

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 90 Day Transition Conference

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### Transition Plan

Date of child's 3rd birthday: \_\_\_\_\_

Anticipated Date of Transition: \_\_\_\_\_

Date Transition Planning Began\*: \_\_\_\_\_

- Beginning of the school year in which my child turns 3
- Beginning of the school year following my child's 3<sup>rd</sup> birthday

[\*At least 6 months before child is ELIGIBLE to transition]

- Other date during the school year in which my child turns 3

Date for Transition Conference\*\*: \_\_\_\_\_

Date Child Exited from EI Program: \_\_\_\_\_

[\*\*At least 90 days prior to ANTICIPATED date of transition but no later than 90 days prior to third birthday.]

#### Priorities and goals for my child's transition:

Transition Planning Requirements	Action Steps / Activities	Person(s) Responsible	Date to be Completed
a) Discuss with parents about possible program options (including preschool special education services; NMSVH; NMSD; Head Start; child care and other community services).			
b) Provide opportunity for parents to meet and receive information from pre-school program representatives.			
c) Help the child and family prepare for the changes and adjustments to a new setting.			
d) With parental consent, pass on information (including evaluation and assessments and the IFSP).			
e) Assist parents to understand their rights and to develop advocacy skills.			
f) Schedule 90-day transition conference and invite participants.			
g) Other transition planning activities:			

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

A Transition Conference must be convened at least 90 days prior to the anticipated date of transition **but** no later than 90 days prior to the child's third birthday. Invite parents, early intervention personnel, local education agency, Head Start, and other community providers as appropriate.

\*Use **Signature Page** to document attendance/participation of team members.

90-Day Conference Requirements	Action Steps / Activities	Person(s) Responsible	Date to be Completed
a) Review with parents the program options for their child (including preschool special education services; Head Start; NMSBVI; NMSD; child care and other community services).			
b) With parental consent, transfer records (including evaluation and assessment information and current IFSP).			
c) Decide what other activities need to be completed before the child moves into the new service setting (including enrollment; immunizations; transportation issues, medical needs etc.).			
d) Review current evaluation and assessment information. Decide if any further evaluations are needed to determine eligibility prior to transition.			
e) Schedule IEP meeting date (at least 15 days before first day services are to be provided) if the child will transition into preschool special education.			
f) Help family to decide where their child will transition to and when.	Child will transition to:  Date:		
g) Decide if there is a need for post transition follow-up (including service coordination, consultation with new staff).			
h) Decide how to evaluate whether the transition process was smooth and effective.			

## Transitioning Out of the FIT Program

### What Is an Individualized Education Program?

If your child will transition to preschool special education services through your local public school district, an Individualized Education Program (IEP) will be written to describe how the school district will meet your child's educational needs. (You may also request to have or keep an IFSP when your child transitions.) The IEP will describe the services your child will receive, as well as the activities and strategies for meeting your child's goals. At the IEP meeting, participants will decide the location where services will be delivered. Written justification must be included in the IEP if your child will not be educated in settings with typically developing children.

Typically, special education services are provided during the regular school year. In order for services to be provided during the summer, the IEP must identify the need for an Extended School Year (ESY). Your Service Coordinator and other early intervention staff can attend your child's IEP meeting to ensure that the school staff is up to date with your child's progress and specific needs.

### What If You're Concerned About Your Child's Transition?

Transitions from one program to another can be a difficult adjustment for families. You may wonder how it will work out for your child and family in a new program with new staff. Many other parents of young children have been through this experience. You may wish to talk with a parent of an older child who has been through the transition process. Ask your Service Coordinator or call Parents Reaching Out to speak with another parent.

### Will You Continue to Receive Service Coordination After Your Child Transitions?

Your FIT Program Service Coordinator can continue to work with you and the new program for several months to ensure that the transition process is smooth and uninterrupted.

Ongoing service coordination, also known as case management, for families of children three years and older may be available from:

- Children's Medical Services (CMS)
- Step\*HI (for children with hearing loss)
- Medically Fragile Waiver (for children with severe medical involvement)
- Developmental Disabilities Waiver (for children with a developmental disability)

Each of these programs has its own eligibility requirements; waiver programs may have a waiting list. Your Service Coordinator can help you decide if any of these programs would be appropriate for your family.



## Overview

You are an important part of planning services for your child. No one knows your child better than you and your family! You are encouraged to speak up about your family's and child's needs. You can also review your child's evaluation and assessment and get information about how to help your child develop. You must agree to services for your child and sign the plan before these services begin.

### The Right to Have Your Child Evaluated

When your child is referred to the FIT Program, you have the right to an evaluation to determine eligibility. If you disagree with the results of the evaluation you can request for a due process hearing.

### The Right to Give Your Consent

Your FIT provider agency must have your consent in writing before any evaluations, assessments or services take place. You can consent to one service and refuse to accept another. Your provider must also have your written consent before sharing information about you or your child with others. You can withdraw your consent at any time.

### The Right to a Plan for Services within 45 Days of Referral

Within 45 days of referral, and if eligible for services, your family has the right to a written plan for services. This plan is called your Individualized Family Service Plan (IFSP) and includes early intervention services based on your family's needs. A team, including you, your Service Coordinator and early intervention staff, will meet to develop this plan. This IFSP team can also include family members, friends or advocates that you choose to help you decide what is best for your family and child. This plan is reviewed every six months or more frequently, according to your family's needs.

### Your family has a variety of rights throughout your time in the FIT Program.

Your family has the right to:

- Participate.
- Have your child evaluated.
- Give consent for evaluation, services and the exchange of information.
- Have a plan for services within 45 days of referral.
- Receive prior notice of IFSP meetings and evaluations.
- Understand fully each step in the FIT Program process.
- Confidentiality about your child and family.
- Review records.
- Help to resolve disagreements.
- Submit a complaint.

Your Service Coordinator will review your rights with you when you begin in the FIT Program. Also, you will receive detailed written notification of your rights when you enter the program and periodically during the time you receive early intervention services and supports. Furthermore, your Service Coordinator will review your rights with you when they apply to the services that you and your family will receive. If you have any questions about your rights, talk to your Service Coordinator. You may also call the FIT Program toll-free at (877) 696-1472.

Below is an overview of your rights. (For more detailed information, please refer to the Notice of Child and Family Rights & Safeguards in the New Mexico Part C Early Intervention System available from your Service Coordinator.)

### The Right to Participate

Your participation in the FIT Program is voluntary. It is up to you to decide to participate in the program. If you accept services, you will determine the level of your participation.

### The Right to Prior Notice of IFSP Meetings and Evaluations

You will have meetings with your service providers during your time in the FIT program. Meetings must be held at a time and place that is best for you. Each time you meet you must be told about it in writing or orally in a language you understand. You must receive notification of the meetings or evaluations in advance so that you can arrange to have family members or others at the meeting. Each notice should include the following information about the meeting:

- Where and when it will be
- Who will be there
- Purpose of the meeting
- What records, reports or tests will be used
- Information about your rights to confidentiality

### The Right to Understand

You have the right to receive answers to questions about your child's development, about services and about the FIT Program from your local FIT provider agency. Ask for help from the staff if you don't understand. If needed, you have the right to receive a translation orally in your native language, in sign language or in Braille.

### The Right to Confidentiality

All information about your child and family is confidential. Sometimes, your early intervention provider will need to obtain or share information about your child to determine eligibility or to arrange for services. Your early intervention provider must get your permission to request or share information with other agencies or service providers. It is up to you if you want to share this information. Only early intervention staff members who are involved with you and your child may look in your files. No one else may look at your files without your permission. Your early intervention provider must keep a record of who looks at your files. You may ask for a

written explanation about how private information is protected by your early intervention provider. Your right to confidentiality is covered under federal law by both the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Family Educational Rights and Privacy Act (FERPA).

### The Right to Review Records

Your early intervention provider keeps your child's records. You may ask your provider to see them or to give you a copy. If you disagree with information in your child's records, you may ask your early intervention provider to correct that information. If they disagree, you can request a FERPA hearing. The hearing must be conducted within 30 days and any individual, including an attorney, may represent you at the hearing. Your child's records will be kept at least five years after your family has left the early intervention system.

### The Right to Help with Resolving Disagreements

Sometimes, parents and early intervention program staff disagree regarding an evaluation, assessment or early intervention services. If there is disagreement, try talking with your Service Coordinator, who may be able to help resolve the disagreement informally. Each local early intervention program has a complaint procedure that can be used if you have a disagreement.

If you are not able to reach agreement with your early intervention provider, you can call the **FIT Program toll-free at (877) 696-1472** and ask for the staff person assigned to your early intervention provider. This person will try to help you resolve the disagreement. You may also request mediation or a hearing to resolve a disagreement.

**Mediation** is a process in which trained mediators help people communicate and make informed choices in order to find a resolution to their dispute. The mediator is impartial, neutral and unbiased. To request mediation please send a letter to the FIT Program manager.

The mediation meeting will be held within 30 days of your request. Choosing mediation as a way to resolve your disagreement does not deny your right to request a due process hearing.

Due process hearings involve a state-appointed hearing officer who reviews all information from all people involved. The hearing shall be carried out at a time and place that is convenient to you and other people involved. You may be advised and accompanied to the hearing by a lawyer or by someone with knowledge of the early intervention system. You may present evidence, confront and cross-examine, and require the attendance of witnesses. A written decision will be mailed to each person involved within 30 days from the day a request for a hearing is filed. To request a due process hearing you should send a letter to the program manager of the FIT Program (see address at right). While the hearing is in process,

your early intervention services will continue. Mediation will be offered to all individuals who submit a request for a due process hearing.

### The Right to Submit a Complaint

If you feel your early intervention provider or a state agency has ignored or violated a federal or state regulation regarding services to your child and family, you can write a letter of complaint to the FIT Program manager (see address at right). After receiving your written complaint a staff person will be assigned to investigate and gather information from you and others concerned. The FIT Program office will review all of the information and reach a decision about your complaint within 60 days.

The chart below illustrates the variety of options you have within the FIT Program to have your concerns addressed.

#### FIT PROGRAM MANAGER

**FIT Program Manager  
Developmental Disabilities  
Supports Division  
DEPARTMENT OF HEALTH**  
1190 St. Francis Drive  
PO Box 26110  
Santa Fe, NM 87502-6110

#### WAYS TO HANDLE YOUR CONCERNS ...

<b>I have a concern about my child's records or right to confidentiality.</b>	<b>LOCAL LEVEL » FERPA Hearing</b> Call your early intervention provider about your concerns and request a FERPA hearing.
<b>I want someone local to help me resolve my concern informally.</b>	<b>LOCAL LEVEL » Informal Process</b> Call your Service Coordinator or the manager of your local early intervention program to help you resolve your concern.
<b>I want someone local to help me resolve my concern formally.</b>	<b>LOCAL LEVEL » Provider Complaint Process</b> Contact the manager of your local early intervention program and request assistance with filing a complaint with their organization.
<b>I want someone at the state to help me resolve my concern informally.</b>	<b>STATE LEVEL » Informal Complaint Process</b> Call the Family Infant Toddler Program toll-free at <b>(877) 696-1472</b> and ask for the staff person assigned to your local early intervention program.
<b>I have a disagreement with my early intervention provider and would like to enter into mediation.</b>	<b>STATE LEVEL » Mediation Process</b> Send your request for mediation in writing to the FIT Program manager.
<b>I have a disagreement with my early intervention provider and would like to request a hearing.</b>	<b>STATE LEVEL » Due Process Hearing</b> Send your request for a hearing in writing to the FIT Program manager.
<b>I believe a Federal or State Regulation has been ignored or violated.</b>	<b>STATE LEVEL » Complaint Process</b> Send your complaint in writing to the FIT Program manager.

# ABCs of Early Intervention

This guide to phrases and acronyms will help you better understand the world of early intervention.

**Assessment** — An ongoing process including the use of tests and tools to identify your child's or family's needs and strengths.

**Assistive Technology** — Equipment, devices and/or products, including those acquired commercially, modified or customized, that increase the functional abilities of children with developmental delays (such as a communication device or seating chair).

**Audiology** — Testing a child's hearing and other auditory services (including hearing aids or specific training regarding amplification needs).

**BABYNET** — The statewide information and referral line, toll-free at (800) 552-8195.

**Child's Record** — The file that includes evaluations, reports, progress notes and the child's IFSP, all of which are maintained by the Service Coordinator.

**Consent** — Written permission or authorization that a family provides to proceed with an evaluation, services or to exchange personally identifiable information.

**Development** — The process of learning and mastering new skills over time; includes ability to move, communicate, think, see, hear and play with toys or other people.

**Developmental Consultation** (Special Instruction) — The design of and consultation on developmentally appropriate activities that families and caregivers can include in the child's typical day; may include activities within all developmental areas.

**Due Process Hearing** — A hearing involving a hearing officer who rules on evidence related to a disagreement between a parent and an early intervention provider.

**Early Intervention** — A collection of services provided by public and private agencies and mandated under law to support eligible children and their families in enhancing a child's potential growth and development from birth to age three.

**ECEP (Early Childhood Evaluation Program)** — An organization that works collaboratively with families and providers throughout the state to help enhance New Mexico's capacity to provide evaluation services for infants and young children.

**Eligibility** — Requirements your child must meet in order to receive early intervention services from the New Mexico Family Infant Toddler Program.

**ERAP (everyday routines, activities and places)** — Settings where your child typically lives, learns and plays. This may include your home, a childcare setting, recreation centers or other community settings, and your child's typical daily routines such as playtime, bath time and mealtime.

**Evaluation** — Determining your child's eligibility by gathering information about your child from records, assessments and using professional judgment.

**Family Training, Counseling and Home Visiting** — A service provided by social workers, counselors and other qualified personnel to help a family understand their child's behavior, and improve child and family interaction and other parenting skills.

**FIT (Family Infant Toddler) Program** — The program at the Department of Health that oversees the delivery of early intervention services in New Mexico through a network of public and private providers.

**Health Services** — Helping a child benefit from other services, including clean and intermittent catheterization, tracheostomy care, tube feeding, changing dressings or ostomy collection bags, and consultation with service providers concerning special health care needs.

**ICC (Interagency Coordinating Council)** — A council of members appointed by the governor to advise and assist the Department of Health's Family Infant Toddler Program in planning and promoting the implementation of a coordinated and family-centered service system in order to address the needs of infants and toddlers with or at risk of developmental delays, and their families.

**IDEA (Individuals with Disabilities Education Act) Part C** — The federal legislation that determines the implementation of early intervention by states.

**IEP (Individualized Education Program)** — The plan for services in public school special education programs for children with disabilities that may begin when a child reaches age three.

**IFSP (Individualized Family Service Plan)** — A written plan for your child's and family's desired outcomes and services to meet those outcomes during your time in the FIT Program.

**IFSP Team** — A team that includes you, your Service Coordinator and other professionals involved in providing ongoing services to your family and anyone else you'd like included (i.e., other family members, childcare staff, pediatrician).

**Intake** — Your first meeting with your Service Coordinator, when he or she explains your rights, describes the FIT Program and helps plan your child's evaluation.

**Mediation** — A way to settle a conflict so that both sides win. Parents and other professionals discuss their differences and, with the help of a trained and independent mediator, reach a settlement that both sides accept.

**Medical Services** — Diagnostic or evaluation services provided by a licensed physician — used to determine a child's medical status and how it may affect development.

**Natural Environments** — Settings that are natural or normal for the child's age peers who have no disabilities and include the home, childcare and other community settings.

**Nursing Services** — Health assessments and nursing education to prevent health problems or improve functioning and administration of treatments.

**Nutrition Services** — Provided by a dietitian or nutritionist who evaluates the child's nutritional needs.

**Occupational Therapy** — Helping children gain skills needed for play and daily living activities, designing and providing adaptive and assistive devices, as well as addressing the child's sensory motor and fine motor needs.

**OSEP (Office of Special Education Programs)** — The federal agency that oversees all state Part C programs. OSEP is dedicated to improving results for infants, toddlers, children and youth with disabilities ages birth through 21 by providing leadership and financial support to assist states and local districts.

**Outcomes** — Statements of changes you want for your child and family that are documented in your IFSP.

**Parent** — Includes the biological parent(s), guardian, acting parent (including foster parents) or surrogate parent (assigned by the state in situations where there is no other person to act as parent at the IFSP).

**Physical Therapy** — Helping families and caregivers to enhance the child's movement abilities (including crawling, standing, walking and balance) through therapeutic activities, appropriate positioning and with adaptive and assistive devices that can be incorporated into the child's typical day.

**Psychological Services** — Counseling, psychological and developmental testing and analysis, and interpretation of a child's behavior.

**Referral** — When a parent or professional (with the parent's permission) thinks that a child may benefit from early intervention services and makes contact with CMS (Children's Medical Services) or a local early intervention provider agency.

**Respite** — An additional family support service that may be available to give parents a break from the day-to-day care of their child. It is a "childcare" service that is provided by specially trained individuals.

**Service Coordinator** — A person who works with your family to help coordinate the evaluation, the IFSP and early intervention services as well as other community supports and resources for your child and family.

**Service Coordination** — Assisting families through the intake, evaluation and eligibility determination process, and facilitating the IFSP process. Service Coordinators also provide information about and make referrals to other community resources, and coordinate and ensure the delivery of all services.

**Social Work Services** — Assessing a child within the family setting, counseling and developing social skill-building activities for a child.

**Speech-Language Therapy** — Helping families and caregivers enhance the child's understanding of language and develop communication skills, which may include speech, sign language and gestures.

**Special Education** — Specially designed instruction and services to meet the education needs of children over the age of three. Provided by the local school district for children who are eligible in preschool or other settings.

**Strategies** — The methods and activities developed to achieve outcomes. Strategies are written into the IFSP.

**Transition** — The process of planning for supports and services for when your child will leave the FIT Program, or if you move to a new community.

**Transportation** — Arrangements to enable families to get to any early intervention services that are provided at a location other than the family's home.

**Vision Services** — Evaluation and assessment of vision, visual and mobility training, as well as referral for medical and other professional services necessary.

# ABCs of Early Intervention

# Family Resources...

## New Mexico

### ARC

3655 Carlisle Blvd NE • Albuquerque, NM 87110  
(505) 883-4630 • (800) 358-6493 (Toll-Free)  
arcnm@arcnm.org • www.arcnm.org

The ARC advocates for a reduction in the number of families struggling to support their family members and to guarantee that all persons with developmental disabilities and their families are served appropriately.

### Center for Development and Disability (CDD)

2300 Menaul Blvd NE • Albuquerque, NM 87107  
(505) 272-3000 • (800) 827-6380 (Toll-Free)  
cdd@unm.edu • www.cdd.unm.edu

The CDD operates a number of programs, including the Native American Network; Medically Fragile Case Management Program; Southwest Autism Network; Assistive Technology Program; Early Childhood Services Unit; and the Resource Center, which has a wide variety of books, journals and videos.

### Education for Parents of Indian Children with Special Needs (EPICS)

PO Box 788 • Bernalillo, NM 87004  
(505) 867-3396 • (505) 867-3398 (fax)

info@abrazosnm.org • www.abrazosnm.org

EPICS Project provides information and training for American Indian families who have children that are enrolled in or eligible for the Family Infant Toddler Program. EPICS provides training and advocacy assistance to professionals as well as parents.

### New Mexico Kids • Early Care Education and Family Support

www.newmexicokids.org

Here you can find information that supports childcare professionals, parents and health educators in New Mexico. The website goal is to support parents and early care and educational professionals to network and access information, technical assistance and resources.

### NM Public Education Department Special Education Bureau

www.ped.state.nm.us/seo/index.htm

The NM PED Special Education Bureau provides information regarding special education services available statewide.

### Parents for Behaviorally Different Children (PBDC)

1101 Cardenas Dr NE, Suite 202 • Albuquerque, NM 87110  
(505) 265-0430 • (800) 273-7232 (Toll-Free Parent Line)

emailinfo@pbdc.org • www.pbdconline.org

PBDC aims to support and strengthen families with children and youth with neurobiological, emotional and behavioral differences by advocating for systems change.

### Parents Reaching Out (PRO)

1920 B Columbia Dr SE • Albuquerque, NM 87106  
(800) 524-5176 (Toll-Free in New Mexico) • (505) 247-0192

info@parentsreachingout.org • www.parentsreachingout.org

PRO provides support, information and training to parents, educators and others on creating successful partnerships that will encourage and promote children's learning. PRO has a network of parents available to provide parent-to-parent support.

### Protection and Advocacy

1720 Louisiana Blvd NE, Suite 204 • Albuquerque, NM 87110  
(505) 256-3100 • (800) 432-4682 (Toll-Free)

nmpanda@nmprotection-advocacy.com • www.nmpanda.org

Advocates working together with people who have disabilities and their families in promoting and protecting their legal and service rights.



### NEW MEXICO DEPARTMENT OF HEALTH

#### Family Infant Toddler Program

1190 St. Francis Drive • PO Box 26110 • Santa Fe, NM 87502-6110  
(877) 696-1472 (Toll-Free) • www.health.state.nm.us/ddsd/fit

## National

### The Arc

1010 Wayne Ave, Suite 650 • Silver Springs, MD 20910  
(301) 565-5343 • info@thearc.org • www.thearc.org

A national organization of and for people with mental retardation and related developmental disabilities, and their families.

### Association for Birth Defect Children, Inc. (ABDC)

827 Irma Ave • Orlando, FL 32803  
(800) 313-2232 (Toll-Free) • (407) 245-7035

abdc@birthdefects.org • www.birthdefects.org

ABDC maintains the National Birth Defect Registry, which is used to match families of children who have the same or similar birth defects.

### Family Village

www.familyvillage.wisc.edu

A global community that integrates information, resources and communication opportunities on the Internet for persons with cognitive and other disabilities, for their families and for those who provide them services and support.

### Family Voices National Office

PO Box 769 • Algodones, NM 87001  
(888) 835-5669 (Toll-Free)

www.familyvoices.org

Family Voices is a national grassroots clearinghouse for information and education concerning the health care of children with special health needs. Working in partnership with health professionals and policymakers, they bring the family perspective to policy discussions and decisions.

### MUMS National Parent-to-Parent Support Network

150 Custer Court • Green Bay, WI 54301-1234  
(920) 336-5333 • www.netnet.net/mums

This organization has a database of more than 14,000 families from 45 countries covering over 2,500 rare disorders. Families whose children have the same or similar disorder can find support and information by exchanging valuable information about their children.

### National Information Clearinghouse for Children and Youth with Disabilities (NICHCY)

PO Box 1492 • Washington, DC 20013-1492  
(800) 695-0285 (Toll-Free) • www.nichcy.org

NICHCY is the national information and referral center that provides information on disabilities and disability-related issues for families, educators and other professionals. Their special focus is children and youth (birth to age 22).

### Office of Special Education Programs (OSEP)

Mary E. Switzer Building • 330 C Street SW • Washington, DC 20202  
(202) 205-5507 • www.ed.gov/offices/osers/osep

OSEP has primary responsibility for administering programs and projects relating to the free appropriate public education of all children, youth and adults with disabilities, from birth through age 21.

### TASH

29 W. Susquehanna Ave, Suite 210 • Baltimore, MD 21204  
(410) 828-8274 • www.tash.org

TASH is an international association of people with disabilities, their family members, other advocates and professionals fighting for a society in which inclusion of all people, in all aspects of society, is the norm.

### ZERO TO THREE

National Center for Infants, Toddlers and Families  
734 15th Street NW, Suite 1000 • Washington, DC 20005  
(202) 638-1144 • www.zerotothree.org

An organization dedicated to advancing current knowledge; promoting beneficial policies and practices; communicating research and best practices to a wide variety of audiences; and providing training, technical assistance and leadership development.