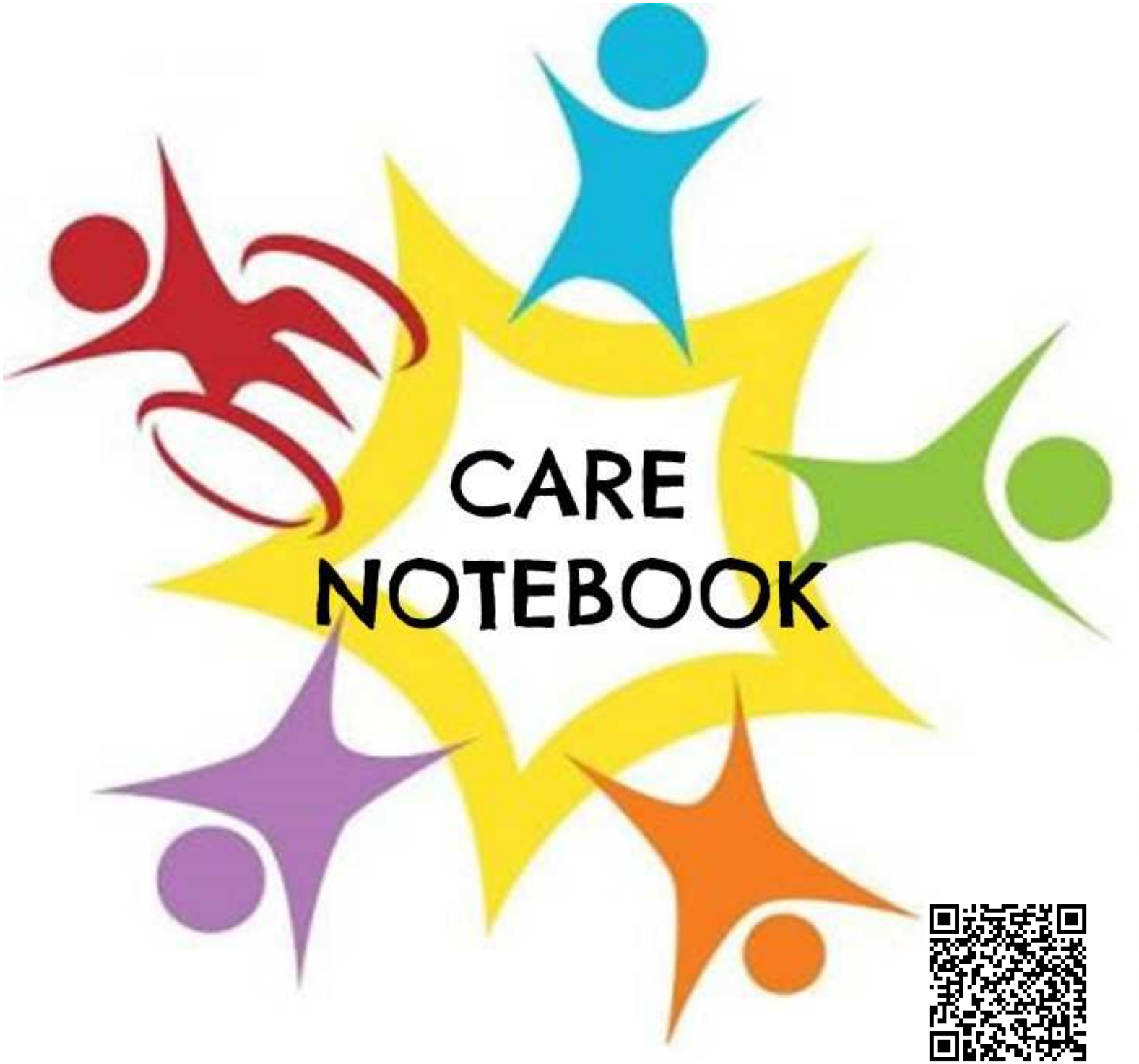
Child's Name:



SCAN FOR INFO

Care Notebook for Families with Children and Youth with Special Needs Polk County, North Carolina

Note To Providers

Care Notebooks are a great resource for families and for you too!

They can become an important part of your intake and orientation process for families with children with special health care needs. Please consider developing a policy for your Agency to always use this Care Notebook for each new client and throughout your service period for best results.

INTRODUCTION TO THE CARE NOTEBOOK

What is this notebook for?

- A way to simplify record keeping and store information about many services available to you and your child.
- A place to collect and organize the important papers that accumulate as your child grows.
- To keep track of information you receive for and about your child as he or she journeys through childhood and beyond.

How to get the most out of this notebook:

- Take your notebook with you to all scheduled appointments.
- Update the information in each section when you get new information.
- Review your child's health care with any health care provider or anyone who is not familiar with your child.

Make this notebook work for you:

- Create your own sections.
- Remove and rearrange pages to fit your needs.
- Personalize it with drawings, stickers, photographs, and special articles you find helpful.

SCAN FOR INFO

ACKNOWLEGEMENTS

The basic content of this notebook was revised from the Mission Children's Hospital Family Support Network of WNC notebook, and edited by the Care Notebook Sub-Committee of the Innovative Approaches grant project through the Polk County Health and Human Services Agency and Polk Community Resources Collaboration.
The Innovative Approaches Initiative is supported through the NC Division of Child and Family Well-Being

With special thanks to the Polk County Schools Occupational

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assembling of this Care Notebook.

Innovative Approaches

Partnering. Navigating. Thriving.

Polk County

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

SCAN FOR INFO

Revised 2024

Table of Contents

Chapter 1: All About Advocacy

Overview of Advocacy Skills
Exceptional Children Assistance Center (ECAC) Circle of Support
Advocacy and Leadrship.Tips for Families: Everyday Leadership Skills

Chapter 2: All About Me

Quick Reference
Important Contact Information
My Child's Care Coordinator
All About My Child
Things You Need to Know About My Child to Support Them
My Child's Birth Story

Chapter 3: Medical Home Support

Medical Home Support Patient Center Medications Medical Home
Medical Development History Height and Weight Log
My Child's Baby Teeth My Child's Permanent Teeth Finding a Dental
Home Medication Log
My Child's Allergies
Equipment Log
Emergency Department(Room) Visits/Hospitalization Appointments and Questions
My Child's Emergency Medical Care Plan
How To Plan Emergencies
Emergency for Children with Special Needs

Chapter 4: Birth to Preschool (0-3 years old)

Questions to Ask Your Providers
All About Me
Evaluation and Assessments
Communication Advocacy Skills IFSP/ Progress Data Transition To Preschool
Useful Resources
Track Your Child's Development Milestones
Notes to Take to the Individual Family Service Plan IFSP
Issues and Resolutions
Transition to the Preschool Plan Vision for the Future Form
Early Intervention

Chapter 5: Pre-School Program Plan (3-5 years old)

What is a Family Partner with VAYA Health
Notes To Take To The Individual Education Plan (IEP)
IEP Issues / Resolution Log
Notes / Issues for Review at the Next IEP Meeting
Vision for the Future Form

Chapter 6: Pre-K through Adulthood (5-21 years old)

Difference between IEP and 504 Plan
Terms to Know
IEP Checklist
IEP Meeting
After the IEP MEeting
Working with Your Child Teacher
School Information
Notes to Take to the Individual Education Plan (IEP) IEP
Issues/ Resolutions Log
Note /Issues for review at the Next IEP Meeting Vision
for the Future Form

Chapter 7: Transition to Adulthood

Transitioning to Adulthood
Quick Summary of Transitions
Healthcare Transtion Timeline
Transition to Adulthood
Guidance Transition Action Care

Chapter 8: Mental Health/Developmental Disability

Mental Health
Additional Services for Child and Family
Support Appointments and Questions

Chapter 9: Public Program/Financial Resources

Medical Waivers
What You Should Before You Apply For Social Security Disabilities Benefits
Prescription Assistance Program
Community Alternative Program Referral Process
Healthcare Coverage
Innovation Waiver and Registry of Unmet Needs

Chapter 10: Legal Papers

Special Needs Legal and Financial Concerns Legal
Health Issues Fact Sheet
Medical Power of Attorney

Chapter 11: Helpful Website, Resource Form

Acronym Index
Helpful Websites
Recreation
Make a Calendar
Diet Tracking Form

All About Advocacy

Parental advocacy is crucial for children with special needs. Parents are the primary experts on their children's unique needs and can effectively communicate these needs to the professionals involved in their care.

By advocating for their children, parents can help ensure that their children receive the appropriate services, accommodations, and support. This can help children with special needs reach their full potential and develop a sense of self-advocacy.

Additionally, parental advocacy can drive positive change in the educational, medical, and community systems, creating a more inclusive environment for all children.

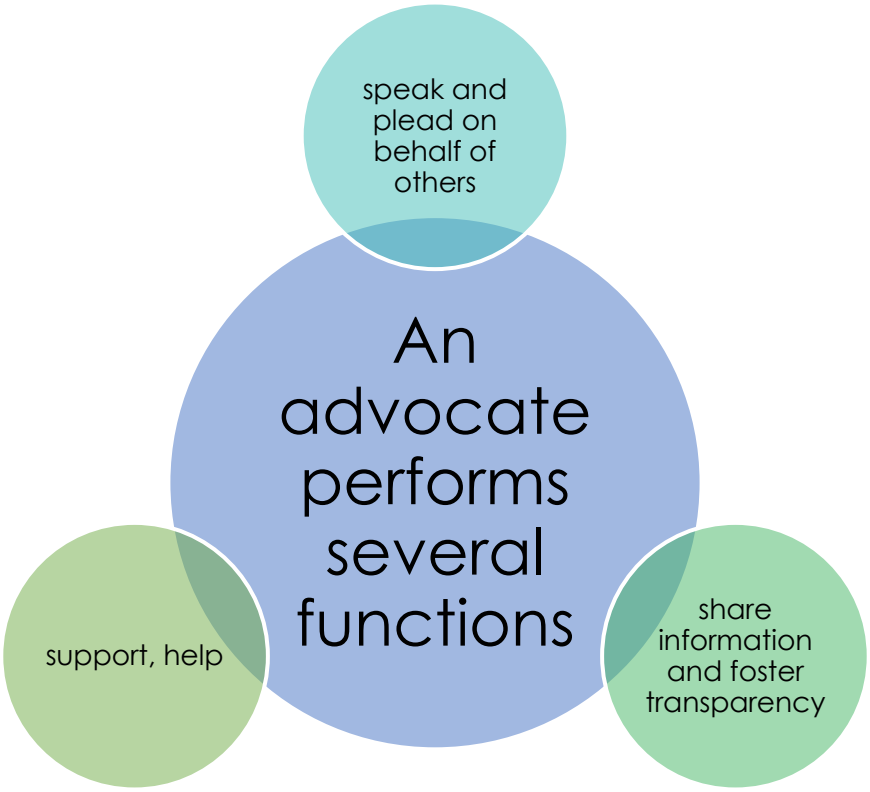
Quick Reference

- **All about Advocate**
- **All about Exceptional Children Assistance Center- ECAC**
- **Circle of Support**
- **Advocacy and Leadership: Tips for families. Everyday leadership skills**

ALL ABOUT ADVOCATES

Why?

Good special education services are intensive and expensive. Resources are limited. If you have a child with special needs, you will likely need to utilize various types of information, skills and tools to get what your child needs.



Who?

There are several different kinds of advocates.

One of the most critical advocates? **Parents!**

Parents are natural advocates for their children!

Other types of advocates include:

- Educational advocates
- Lay advocates
- School Personnel
- Lawyers

What?

Effective advocacy includes several important components. These include:

- ✓ Gathering Information
- ✓ Learning the Rules of the Game
- ✓ Planning and Preparation
- ✓ Keeping Written Records
- ✓ Asking Questions | Listening to Answers
- ✓ Identifying Problems
- ✓ Proposing Solutions



Adapted from Wrights Law: www.wrightslaw.com

ecac exceptional children's assistance center
Empowering Families★Improving Lives

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Follow us on social media!

Overview of Advocacy Skills

Gather Information
Advocates gather facts and organize documents to learn about a child's disability and educational history. Advocates use facts and independent documentation to resolve disagreements and disputes with the school.

Learn the Rules of the Game
Advocates educate themselves about their local school district. They know how decisions are made and by whom. Advocates know about legal rights of both parents and children. They also know which words to avoid. *For example, a child with a disability is entitled to an "appropriate" education, not the "best" education.*

Plan and Prepare
Advocates know that planning prevents problems. Advocates do not assume that school personnel will tell them about rights and responsibilities. Preparing for meetings, creating agendas, writing objectives, and using meeting worksheets and follow-up letters to clarify problems are all tools in an advocate's tool belt.

Keep Written Records
Because documents are often the keys to success, advocates keep written documentation. They know that if a statement is not written down, it "was not said". They make requests in writing and write polite follow-up letters to document events, discussions, and meetings.

Ask Questions | Listen to Answers
Advocates are not afraid to ask questions. When they ask questions, they listen carefully to answers. "Who, What, When, Where, Why, and How" are critical questions.

Identify Problems
Advocates learn to define and describe problems from all angles. They use their knowledge of interests, fears, and positions to develop strategies. They do not waste valuable time and energy looking for people to blame.

Propose Solutions
Advocates know that parents negotiate with schools for special education services. As negotiators, advocates discuss issues and make offers or proposals. They seek "win-win" solutions that will satisfy parents and schools.



The Exceptional Children's Assistance Center (ECAC) is now also North Carolina's Family-to-Family (F2F) Health Information Center! In addition to helping families navigate the special education system, we also specialize in helping families navigate health related systems in NC. Some commonly asked questions are:

1. Does my child qualify for Medicaid?
2. How do I apply for the Innovations Waiver?
3. My child was recently diagnosed with a disability or health condition. Can you help us figure out where to start?
4. We just moved to North Carolina. Can you help us figure out how to navigate the systems for kids with special needs in North Carolina?
5. My family doesn't seem to qualify for anything. Are there resources for us?

We support providers too! Have a question? Call us at **1-800-962-6817**. You can also email **Christy Moore**, Family-to-Family Health Information Center Program Lead at **cmoore@ecacmail.org**.

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Empowering Families★Improving Lives

Visit our website:

www.ecac-parentcenter.org

Find us on social media:

ECAC is not a legal services agency. We cannot and do not provide legal representation or advice, and information contained in this document should not be considered as such. This document is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as a part of an award totaling $93,175 with 0 percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, not an endorsement, by HRSA, HHS, or the U.S. Governments. For more information, please visit HRSA.gov.

Your name: _____ Date completed: _____



ACTION STEP #1

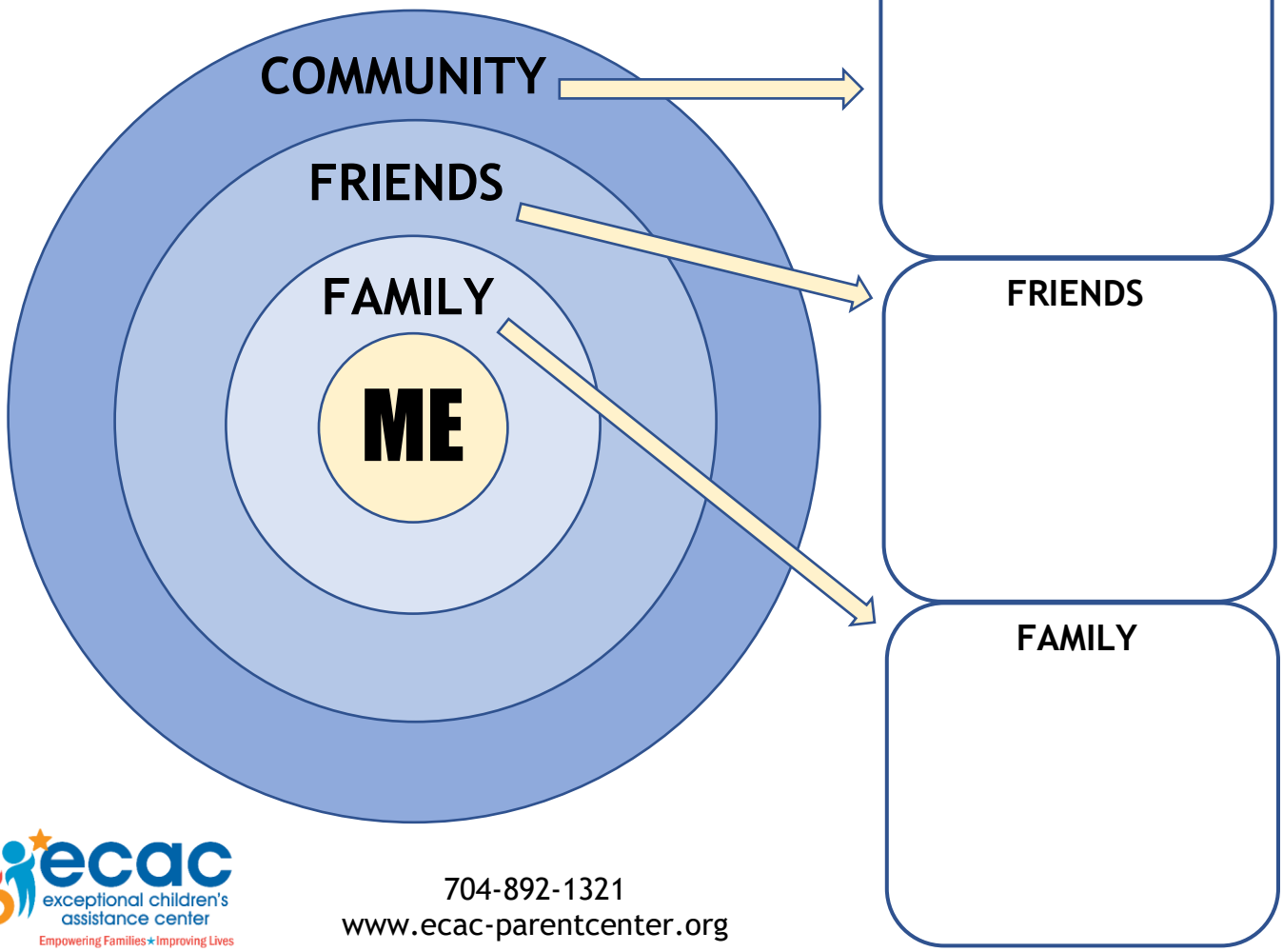
Whose got your back? Who do you rely on for support?

When making choices or setting goals, it can be helpful to know whom you can count on. Different people may be helpful in different situations. Use the boxes below to write down the names of people who you know that you can ask for support or help.

Examples of who might be in the Community Circle: Providers such as Counselors and Therapists, Teachers, Helpful Neighbors, Community Members, Coaches, Co-workers

Examples of who might be in the Friends Circle: Friends, Classmates Teammates and Extended Family, Fellow Church Members

Examples of who might be in the Family Circle: Parents, Caregivers, Siblings, Close and Trusted Friends and other Supportive Family Members



ecac
exceptional children's assistance center
Empowering Families★Improving Lives

704-892-1321
www.ecac-parentcenter.org



Advocacy and Leadership—Tips for Families: Every Day Leadership Skills

You use powerful leadership skills and abilities as you manage your household every day and guide your children in the little and big tasks of life. Here are just a few of the leadership skills you use every day.

Lead	**Lead by example.** Act as a role model and hold yourself to high standards, such as being fair and honest and following through with commitments.
Communicate	**Communicate and actively listen.** Use two-way communication without interrupting, and make your points calmly and clearly.
Negotiate	**Negotiate.** Include everyone in making decisions when possible, but be able to make the final decision when necessary.
Value	**Value feelings.** Understand and manage your own emotions and recognize and value the emotions of other people.
Motivate	**Motivate and inspire others.** Engage people in ways that boost their enthusiasm and confidence about completing a task or achieving a goal.
Be Positive	**Be positive and flexible.** Maintain a positive attitude by staying upbeat and optimistic. Be able to adjust and adapt when things do not go as planned.
Accept	**Accept mistakes**. See mistakes as an opportunity for growth and learning.

This document was developed with funds from Grant #90HC0014 for the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start, and Office of Child Care, by the National Center on Parent, Family, and Community Engagement.
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Reflection Activity

Review the list of leadership skills. Which ones do you use often? Which ones do you want to use more often? Write down your thoughts.

	Ways I use this skill now	What I want to do to strengthen this skill
Lead		
Communicate		
Negotiate		
Value		
Motivate		
Be Positive		
Accept		

For more information about this resource, please contact us:
PFCE@ecetta.info | 1-866-763-6481

All About My Child

- **Quick Reference**
  - Child's Home Address
  - Primary Care Doctor/Medical Home Provider
  - Urgent Care/After Hours/Advice Nurse
  - Family Contact Information
  - Allergies
  - Insurance Information

- **Important Contact Information**

- **My Child's Care Coordinators**

- **All About My Child**

- **Things You Need to Know to Support Them**

- **My Child's Birth Story**

QUICK REFERENCE

Child's Name: Child's DOB:

Child's Home Address:

Primary Care Doctor/Medical Home Provider

Name: After hours Phone:

Phone Number: Fax:

Urgent Care - After Hours - Advice Nurse

Name:

Phone:

Family Contact Information

Name/Relation to child: Work Phone:

Home Phone: Cell Phone:

Name/Relation to child: Work Phone:

Home Phone: Cell Phone:

Emergency Contact: Relationship:

Home Phone: Work Phone:

Cell Phone:

Allergies

Food, Medication, etc.:

Insurance Information

Insurance: Policy #:

Phone: Subscriber #:

Fax #: Contact Person:

Insurance: Policy #:

Phone: Subscriber #:

Fax #: Contact Person:

IMPORTANT CONTACT INFORMATION

Life-Threatening Emergency: Call 911 or 988

Primary Care Doctor - Medical Home

Name:

Address:

City: Zip:

Care Coordinator:

Phone: Fax:

Hours: Email:

Urgent Care - After Hours - Advice Nurse

Name:

Address:

City: Zip:

Phone: Fax:

Hours: Email:

Primary Hospital

Hospital:

Information Phone Number:

Address:

Emergency Room Phone Number:

Special Transportation

Transportation Agency:

Contact Name: Phone:

Address:

Transportation Agency:

Contact Name: Phone:

Address:

*Child has a medical alert bracelet for: _____

Medical Equipment Supplier

Supplier: Product:

Contact: Phone:

Address: Fax:

Hours: Email:

Notes:

Community Agencies

Agency: Service:

Contact: Phone:

Address: Fax:

Hours: Email:

Agency: Service:

Contact: Phone:

Address: Fax:

Hours: Email:

Home Nursing Agencies

Agency: Service:

Contact: Phone:

Address: Fax:

Hours: Email:

Notes:

Agency: Service:

Contact: Phone:

Address: Fax:

Hours: Email:

Notes:

Infant Program - Preschool - School

School: Teacher:

Address: Phone:

Notes: Email:

School: Teacher:

Address: Phone:

Notes: Email:

Child Care Provider

Name: Phone:

Address: Email:

Notes:

Name: Phone:

Address: Email:

Notes:

Respite Care Provider

Name: Phone:

Address: Email:

School Nurse

Name: Phone:

Address: Email:

Notes:

Dentist - Orthodontist

Name: Phone:

Address: Fax:

Hours: Email:

Notes:

Social Worker

Name: Phone:

Address: Email:

Notes:

Specialist Doctors - Therapists - Other Care Providers

Provider: Specialty:

Clinic: Phone:

Address: Fax:

Hours::: Email:

Provider: Specialty:

Clinic: Phone:

Address: Fax:

Hours: Email:

Provider: Specialty:

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Pharmacy Used for Prescriptions

Pharmacy: Product:

Pharmacist: Phone:

Address: Fax:

Hours: Email:

Pharmacy: Product:

Pharmacist: Phone:

Address: Fax:

Hours: Email:

Public Health Department - Nurse

Name: Phone:

Address: Email:

Nutritionist

Name: Phone:

Address: Email:

Other

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Public Health Department - Nurse

Name: Phone:

Address: Email:

Nutritionist

Name: Phone:

Address: Email:

Other

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

Name: Phone:

Title/Agency: Notes:

MY CHILD'S
CARE COORDINATORS

Agency:

Care Coordinator: Phone:

Address: Fax:

City: Zip:

Notes:

Agency:

Care Coordinator: Phone:

Address: Fax:

City: Zip:

Notes:

Agency:

Care Coordinator: Phone:

Address: Fax:

City: Zip:

Notes:

Agency:

Care Coordinator: Phone:

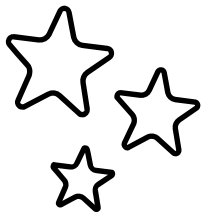
Address: Fax:

City: Zip:

Notes:



All About My Child



My Child's Family

Parents/Caregivers:

_____

_____

Sibling(s):_____

_____

Other people who live with us:

_____

Pet(s):_____

My Child's Favorite:

Color:_____

Animal:_____

Activity:_____

Food:_____

Book:_____

Movie:_____

Character:_____

Song:_____

Things to do: _____

Put picture of your child here.

THINGS YOU NEED TO KNOW
ABOUT MY CHILD TO SUPPORT THEM

Child's Full Name:_____ **Date of Birth:**_____

Name Child Prefers:_____ **Allergies:** _____

Child Communicates Using: (e.g. speech, preferred language, sign language, communication device, etc.)

Things My Child Does Well/Strengths: (e.g. dresses by self, is polite, loves to read, is very affectionate)

Things My Child Likes: (e.g. our pet, music, fresh air, high fives)

Things My Child is Working On: (e.g. expressing emotions, advocating for themselves, eye contact)

Things That Upset My Child: (e.g. loud noises, bright lights, textures/fabrics, waiting a long time)

When my child gets dressed, you may assist by:

When my child eats or drinks, you may assist by:

When my child takes their medication, they prefer to: (e.g. take with food, water, etc.)

My child's mobility needs are: (e.g. can transfer independently, needs help getting in car, needs additional time)

Other behaviors to be aware of: (e.g. sometimes runs away, talks to strangers, pulls hair when upset)

MY CHILD'S BIRTH STORY

Date of birth:

Medical Home Support

A medical home is an approach to providing inclusive and high-quality primary care. The National Resource Center for Patient/Family Centered Medical Home says a Medical Home should be:

- ***Accessible***
- ***Coordinated***
- ***Compassionate***
- ***Culturally Effective***
- ***Family Centered***
- ***Continuous***
- ***Comprehensive***

If your child is birth – 21 years old and a Medicaid recipient

Call: Blue Ridge Community Health Services 828-894-2222

BRCHS can help families navigate the Medicaid and Health Care system. And, provides Medicaid and NC Health Choice recipients with a medical home and Primary Care Provider (PCP).

- Working with you to establish your child with a medical home and helping you build a strong relationship with them.
- Working with every health care provider that your child sees to ensure he/she gets the best treatment.
- Referring your family to other community agencies to address your family's needs and concerns.

Empowering **YOU** to be your child's best healthcare advocate.

If your child is birth – 5 years old and you need more help

Call: Care Management for At-Risk Children (CMARC)

Henderson Co. Health Department ----------	828-692-4223
Buncombe Co. Health Department ----------	828-250-5096
Polk Co. Health Department--	828-894-8271

If your child qualifies, CMARC will at no charge:

- Help your family identify your strengths and concerns
- Connect you with other services and resources
- Identify ways to strengthen the parent-child relationship
- Provide information, support and ongoing education

If you have private insurance or no insurance

Call: Your Medical Home Provider/Doctor

Children with Special Health Care Needs Help Line
1-800-737-3028 or email: CYSHCN.Helpline@dhhs.nc.gov

NC Division of Public Health: Children & Youth with Special Healthcare Needs

https://publichealth.nc.gov/wch/families/cyshcn.htm

PCMH
Patient-Centered Medical Home

What Does a Patient-Centered Medical Home (PCMH) Mean for You?

It means *Access 24/7*.
It means *Teamwork.*
It means *All your health needs.*
It means *Coordination, finally!*
It means *Today's technology.*

Access 24/7

You can get advice quickly from the care team outside of visits. You can often get appointments the same day.

All Your Health Needs

The team treats you as a whole person, not just as one illness. They will work with you and your family on:

- Prevention and wellness, helping you work towards a healthy lifestyle.
- Both physical and mental health issues such as depression or anxiety.
- A plan of care for any major health problems.

Teamwork

Your primary care doctor or nurse attends to your care directly. He or she also leads a highly skilled team of people who work with you. The team can include nurses, counselors, pharmacists, medical assistants, and specialist doctors.

Coordination

Finally! Your medical home organizes:

- Results from labs, specialists, and hospitals involved in your care.
- All medications you take, over the counter and prescriptions from any doctors.
- Services you receive in your community, such as programs to stop smoking or lose weight.

Today's Technology

Information Technology helps your medical home team:

- Keep you up to date. Remind you when you need care, testing, or new information.
- Send prescriptions right to the pharmacy.
- In some offices, let you go online to schedule visits, request prescriptions, get test results, and see your personal health record.

A MEDICAL HOME is the kind of primary health care you and your child deserve. It is not a place, it is a partnership with your primary care provider.

As you pursue your child's health journey, you make stops at different places (specialists, community supports, pharmacy, hospital, mental health). Ideally, your primary care provider will help guide you along the way. [1]

YOU CAN MAKE MEDICAL HOME IMPROVEMENTS[2]

You can help your practice make changes so that it is a true MEDICAL HOME! The following are a few things to think about and discuss with your child/youth's primary care provider:

1. *How can we, as parents, help you provide an even better MEDICAL HOME for all patients and families in the practice?*
2. *Does the practice have a 'family advisory council' that informs and advises the practice on how to improve their patients' experience? If not, how can we work together to create one?*
3. *How can we work together to develop:*
    - *Easy-to-read, understandable information describing the practice and how patients and families can access appropriate care (e.g., patient brochure, Web site)?*
    - *A patient satisfaction survey?*
    - *Improved physical access to the practice?*
    - *An updated list of community resources for patients/families?*

Let your doctor know how important these improvements are to you and your child/youth's care.

[1] Patient-Centered Primary Care Collaborative
[2] National Center for Medical Home Implementation

MEDICAL & DEVELOPMENTAL HISTORY

Child's Name: **Birth Date:**

Pregnancy History

Mother's age at start of pregnancy:

Length of Pregnancy: Maternal Weight Gain:

Prescribed or over the counter medications taken during pregnancy (include vitamins):

Month first felt baby move: Months

During pregnancy, baby was: Quiet Active Very Active

As the pregnancy progressed, were there any changes in your baby's activity level? If yes, please describe:

Concerns, complications, or illnesses during pregnancy:

Previous number of pregnancies: Number of living children:

Describe any difficulties during previous pregnancies:

Labor and Delivery

Labor for my child was: Uncomplicated Complicated / Difficult

Describe any difficulties:

Was internal fetal monitoring used during labor?

Did membranes rupture?
If yes, number of hours prior to delivery:

Were you awake during delivery?

Labor was Spontaneous Induced

Was anesthesia used?
If yes, what type?

Type of birth:

- Vaginal: Head First Breech Forceps used
- Cesarean Section. Reason for C-section:

Baby was born: Full-term Late Premature (If premature, # of weeks:)

Birth / Early Infancy

Birth weight: Length:

Head Circumference: APGAR score at 1 minute:

Did baby cry immediately? APGAR score at 5 minutes:

Did baby need help with breathing?	If yes, how long?
Baby was in hospital_____days _____weeks	
Was baby in NICU (neonatal intensive care unit)?	If yes, how long?
Was medication prescribed for the baby?	If yes, describe reason.
While in hospital, did baby require special care after birth (such as therapy, evaluation by a specialist)?	If yes, describe reason.

Describe any difficulties with the baby immediately after birth:

Did the baby have difficulties during the first months:	_____Feeding	_____Sleeping
	_____Alertness	_____Movement
	_____Jaundice	_____Other:

Has your child had any of the following illnesses? If yes, list at what age.

_____Chicken Pox	_____German Measles	_____Hepatitis	_____Mumps
_____Whooping Cough	_____Meningitis	_____Measles	_____CMV

Other:

Has your child had difficulty with any of the following? If yes, list at what age.

_____Skin rashes	_____Anemia	_____Diarrhea	_____Speech
_____Breach holding spell	_____Coordination	_____Swallowing	_____Turns Blue
_____Frequent Falling	_____Sucking	_____Staring Spells	_____Vomiting
_____Respiratory Problems	_____Asthma	_____Fainting Spells	_____Dental
_____Ear Infections	_____Heart	_____Allergies	_____Feeding
_____Constipation	_____Special dietary considerations		
_____Other:			

Has your child seen a **vision** specialist?
If yes, give doctor's name and reason for visit.

Has your child seen an **ear** specialist?
If yes, give doctor's name and reason for visit.

Has your child had a **hearing test**?
If yes, give reason for visit.

Family Medical History

For the following, please check any conditions present in the child's biological family.
If checked, please explain in space provided below.

	Mother	Mother's Family	Father	Father's Family
Birth Defects:				
Inherited Disorder:				
Infant Deaths:				
Learning Problems:				
Intellectual Disability:				
Muscle Disease/Weakness:				
Neurological Disease:				
Substance Misuse:				
Mental Illness:				
Vision Disorder:				
	Mother	**Mother's Family**	**Father**	**Father's Family**
Hearing Disorder:				

Epilepsy/Seizures:

Diabetes:

Behavior Disorders:

Emotional Disorders:

Other health problems:

Explanation:

Does any OTHER family member have difficulties similar to your child's?
If yes, please explain.

Child's Developmental Milestones

List the age that your child first did the following.

	Age:		Age:
Held head steady when being carried		Drank from a cup	
Rolled from back to tummy		Responded to name	
Sat up		Said first word	
Crawled on hands and knees		Fed self with fingers	
Pulled to standing		Used a spoon	
Walked holding on to things		Spoke with 3 or more word phrases	
Walked alone		Toilet trained	
Age you first suspected your child had a problem			

Social History

List any siblings or other people living in household.

Name:	Relation:	Birth Date:

Other Information

HEIGHT & WEIGHT LOG

Date:	Height:	Weight:	Percentile:	Head Circumference:	Comments related to child's growth:

MY CHILD'S BABY TEETH

Record when your child's teeth emerge and are lost in the diagram below.

The following chart shows when primary teeth (also called baby teeth or deciduous teeth) erupt and shed. It's important to note that eruption times can vary from child to child.

UPPER TEETH	WHEN BABY TOOTH EMERGES	WHEN BABY TOOTH FALLS OUT
Central Incisor	8 – 12 Months	6 – 7 Years
Lateral Incisor	9 – 13 Months	7 – 8 Years
Canine (Cuspid)	16 – 22 Months	10 – 12 Years
First Molar	13 – 19 Months	9 – 11 Years
Second Molar	25 – 33 Months	10 – 12 Years

LOWER TEETH	WHEN BABY TOOTH EMERGES	WHEN BABY TOOTH FALLS OUT
Second Molar	23 – 31 Months	10 – 12 Years
First Molar	14 – 18 Months	9 – 11 Years
Canine (Cuspid)	17 – 23 Months	9 – 12 Years
Lateral Incisor	10 – 16 Months	7 – 8 Years
Central Incisor	6 – 10 Months	6 – 7 Years

EQUIPMENT LOG

Keep an ongoing record of the equipment that your child uses (such as a wheelchair, communication systems, etc.). Draw a single line through or use a highlighter to line out equipment that your child no longer uses so it is easy to spot current information.

Date:	Equipment:	Model #:	Serial #:
Vendor Name:		Vendor Phone:	____Rent ____Own
Financially Responsible Agency:		Other Information:	
Date:	Equipment:	Model #:	Serial #:
Vendor Name:		Vendor Phone:	____Rent ____Own
Financially Responsible Agency:		Other Information:	
Date:	Equipment:	Model #:	Serial #:
Vendor Name:		Vendor Phone:	____Rent ____Own
Financially Responsible Agency:		Other Information:	
Date:	Equipment:	Model #:	Serial #:
Vendor Name:		Vendor Phone:	____Rent ____Own
Financially Responsible Agency:		Other Information:	
Date:	Equipment:	Model #:	Serial #:
Vendor Name:		Vendor Phone:	____Rent ____Own
Financially Responsible Agency:		Other Information:	
Date:	Equipment:	Model #:	Serial #:
Vendor Name:		Vendor Phone:	____Rent ____Own
Financially Responsible Agency:		Other Information:	
Date:	Equipment:	Model #:	Serial #:
Vendor Name:		Vendor Phone:	____Rent ____Own
Financially Responsible Agency:		Other Information:	
Date:	Equipment:	Model #:	Serial #:
Vendor Name:		Vendor Phone:	____Rent ____Own
Financially Responsible Agency:		Other Information:	

MY CHILD'S PERMANENT TEETH

The following chart shows when permanent teeth emerge. Record when your child's permanent teeth emerge.

UPPER TEETH	WHEN TOOTH EMERGES	MY CHILD'S TEETH EMERGED: *RIGHT SIDE*	*LEFT SIDE*
Central Incisor	7 – 8 Years		
Lateral Incisor	8 – 9 Years		
Canine (Cuspid)	11 – 12 Years		
First Premolar Molar (First Bicuspid)	10 – 11 Years		
Second Molar (Second Bicuspid)	10 – 12 Years		
First Molar	6 – 7 Years		
Second Molar	12 – 13 Years		
Third Molar (Wisdom Tooth)	17 – 21 Years		

LOWER TEETH	WHEN TOOTH EMERGES	MY CHILD'S TEETH EMERGED: *RIGHT SIDE*	*LEFT SIDE*
Third Molar (Wisdom Tooth)	17 – 21 Years		
Second Molar	11 – 13 Years		
First Molar	6 – 7 Years		
Second Premolar (Second Bicuspid)	11 – 12 Years		
First Premolar (First Bicuspid)	10 – 12 Years		
Canine (Cuspid)	9 – 10 Years		
Lateral Incisor	7 – 8 Years		
Central Incisor	6 – 7 Years		

Finding the Right Dental Home

FOR YOUR CHILD OR YOUTH WITH SPECIAL NEEDS



Dental care is important because problems in the mouth can affect the health of the body. Children and youth with special health care or developmental needs should generally follow the same standards of care for children of all abilities. However, additional support may be needed. It is important to talk to your dentist about any physical or medical conditions, medications, allergies, and/or behavioral needs that may require some accommodations for your child. This checklist may help families have an ongoing positive relationship and experience with the dental care team for a life-long practice of healthy smiles!

Instructions: Check the box if the dental office provides the service that supports your child or youth.

THIS IS IMPORTANT			WHY?
	Yes	No	
1. Does the dental office accept your insurance and have flexibility in payment plans if needed?			Payment options allow parent/caregiver to plan and budget for dental care either prior to or after the visit.
2. Does the dental office need any health history paperwork before the first visit?			It may take time to get medical records or complete forms.
3. Does the dental office offer scheduling flexibility to become familiar with the setting and staff?			This allows the family to see the office, meet the dental team and ask questions prior to the actual exam.
4. Does the dental office offer scheduling flexibility to support your child/youth's schedule and routine?			Children/youth who experience frequent medical needs, sensory or anxiety issues, or a range of appointments/therapies may need special scheduling considerations.
5. Is the dental office accessible to your child/youth in a wheelchair or with other mobility equipment (if needed)?			The Americans with Disabilities Act (ADA) requires dental offices to serve children, youth and adults with special health care needs and make accommodations for those using wheelchairs, walkers or any other mobility equipment.
6. Is the dental office able to provide communication support like Sign Language interpreters with enough notice before a visit?			The parent/caregiver needs to notify dental office about special communication needs like American Sign Language (ASL) interpreters or assistive technology, well in advance of visit.
7. Are you allowed to remain with your child/youth in the exam room?			The parent/caregiver's presence may reduce the child/youth's anxiety and increase their comfort with the dental care.
8. Does the dental office have a private exam room available?			A private exam room may prevent distractions or overstimulation of a child/youth with sensory challenges, anxiety, etc.

THIS IS IMPORTANT			WHY?
	Yes	No	
9. Does the dental office allow your child/youth to bring a comforting object (toy, blanket) into exam or treatment room?			Allowing a child to bring a comfort item can reduce anxiety and increase trust and cooperation.
10. Does the exam room comfortably and physically accommodate your child/youth with mobility equipment (if needed)?			If a wheelchair fits parallel to the dental chair, a child/youth may be able to transfer into the dental chair for the exam. A dental chair with movable armrests may allow an easier transfer for a child/youth.
11. Does the dental office allow for using the same exam room and dental team during your child/youth's visits?			Consistency and routine may lessen anxiety and allow the child/youth and parent/caregiver to build positive relationships with familiar dental care team members.
12. Does the dental team allow your child/youth time to adjust to the exam room and get ready for the dental exam?			Allowing additional time for a child/youth to adjust to the exam room and dental team builds trust and comfort level.
13. Does the dental team talk with you about any special ways to interact with your child/youth?			Dental team asks the parent/caregiver ahead of time about any concerns or strategies to help the child/youth have the best dental experience possible. Dental care team can also suggest strategies such as the TELL, SHOW, DO approach: tell child what they are about to do, show child what the instrument may do, then do the procedure.
14. Does the dental team discuss behavioral support options if your child/youth has trouble remaining still?			Examples may include other seating options, music, noise cancelling headphones, sunglasses, or TV. Options including sedation, anesthesia or restraints require advance informed consent by parent/caregiver.
15. Does the dental team encourage your child/youth and family to ask questions?			The dental team encourages questions before and after the visit.
16. Are special dental care instructions written in an easy to understand format?			Special care instructions are written, easy to understand and in a family's first language.
17. Does the dental office have coverage for emergencies after hours or on weekends?			The parent/caregiver needs to know when and where to go for dental injuries or emergencies that occur outside of normal office hours.

Checklist developed by Children and Youth Branch, Women's and Children's Health Section

For more information on resources to support children with special health care needs, please call or email the **Children with Special Needs Helpline** at 1-800-737-3028 or CYSHCN.Helpline@dhhs.nc.gov

Adapted from:

- Dental Office Consideration Checklist. An Oral Health Professional's Guide to Serving Young Children with Special Health Care Needs https://www.mchoralhealth.org/SpecialCare/pdf/M2-DentalOfficeConsiderations.pdf
- Family Satisfaction Questionnaire. An Oral Health Professional's Guide to Serving Young Children with Special Health Care Needs https://www.mchoralhealth.org/SpecialCare/pdf/M2-FamilySatisfactionQuestionnaire.pdf
- "Oral Health Care for Children with Special Health Care Needs: A Guide for Family Members/Caregivers and Dental Providers," Oklahoma Dental Foundation, November 2013
- "Dental Practices: An Abbreviated Accessibility Survey" NC Office on Disability and Health

MEDICATION LOG

Pharmacy:_____Phone: _____

Date Started:	**Date Stopped:**	**Medication:**	**To Treat (condition):**	**Dose/Route:**	**Time Given:**	**Prescribed By:**	Side Effects:

MY CHILD'S ALLERGIES

Food Allergies:

Medication Allergies:

Other Allergies (cats, dogs, dust, grass, etc.)

EMERGENCY DEPARTMENT (ROOM) VISITS / HOSPITALIZATIONS

DATE:	HOSPITAL:	REASON:	OUTCOME:

Appointments and Questions



Use this form to help you prepare for upcoming doctor visits and keep notes about the appointment.

Appointment Date & Time	Provider	Questions to Ask at Appointment
Referrals/Follow up tests		**Answers**

Appointment Date & Time	Provider	Questions to Ask at Appointment
Referrals/Follow up tests		**Answers**

Appointment Date & Time	Provider	Questions to Ask at Appointment
Referrals/Follow up tests		**Answers**

MY CHILD'S
EMERGENCY MEDICAL CARE PLAN

If your child has frequent emergency issues, consider putting together an emergency medical care plan. A care plan is away to share information about your child with others. The plan is written information about how to best care for your child's health needs. Health Care Plans can be different based on disability and how/where it is intended to be used. There are many templates available online or talk to your child's doctor about creating a care plan together.

Communication is Key!

A care plan may include:

- What medicines your child takes and when
- Caregiver/parent contact information
- Allergies
- Medical conditions
- What foods your child should avoid
- How often your child gets physical therapy
- What to do for your child in an emergency
- How to get in contact with your doctor after hours
- Specific support staff to contact
- Flagging your child's folder to identify as 'special needs'

Who would receive a copy of a care plan:

- Child's doctors, therapists, nurses, respite providers
- Childcare provider, teachers, school nurses, emergency medics
- Grandparents, neighbors, friends
- Leave a care plan at home, at work, in your car, in your purse, etc.

Children at risk for medical emergencies should consider wearing a medical bracelet or necklace to help emergency providers quickly recognize that the child has a special need.



How to Plan for Emergencies

You and your family members may not be in the same place when an emergency happens. It is important to plan ahead and talk about what you will do before, during and after an emergency. You need to talk about how you will get to a safe place, get in touch with each other and get back to each other.

Emergency Plan

Emergencies and disasters can happen any time and any place. These situations can result in power outages, limited access to medical attention and medications, and a need for supplies. All families should have an emergency plan in place; families of children with special needs will need an emergency plan that addresses the unique needs of their child.

Planning is key! If there is a child with special healthcare needs in your family, you and your family can prepare by developing a written emergency care plan and practicing your plan. For example, a plan can include medicines or assistance devices that your child needs. If possible, let your child help make the plan.

Important questions to consider:

1. Does your family have a written emergency plan?
2. Does your family have communication plan?
3. Do you have a plan if you and your children are not together when an emergency strikes?
4. Do you have an emergency kit with medication and other medical necessities?
5. What will you do if your child has a service animal?
6. Do you have a transportation plan and evacuation route?

Emergency Kit Checklist for families with CYSHCN
https://www.cdc.gov/childrenindisasters/checklists/special-healthcare-needs.html

It is important to ensure you and your family are as self-sufficient as possible if you need to evacuate, and update your emergency kit at least once a year.

Here are some resources to help you and your family in a true emergency.

Centers for Disease Control and Prevention (CDC) - Children and Youth with Special Healthcare Needs in Emergencies
https://www.cdc.gov/childrenindisasters/children-with-special-healthcare-needs.html

Medical Essential – Duke Energy

Customers with medical needs should make preparations in advance for extended outages due to storms or other causes. Medical Essential may be assigned to a customer's account if a member of the customer's household is chronically or seriously ill, handicapped, or on a life-support system. For more information about this service, call 1-800-943-6914.

Ready.gov

Go-to source for emergency planning for families and individuals, including planning templates.
https://www.ready.gov/disability

NC 211 is an information and referral service provided by United Way of North Carolina. Families and individuals in all 100 counties in North Carolina can call to obtain free and confidential information on health and human services within their community. Available in most languages, NC 211 is open 24 hours a day, seven days a week, 365 days a year.

Mobile Crisis Management (MCM) We are a team of behavioral health professionals, available 24 / 7 / 365, that provides intensive, on-site intervention to people of all ages who are experiencing a crisis due to mental health disturbances, intellectual/developmental disabilities, or addiction. Our goal is to safely stabilize the person at home, work, school, or wherever in the community the crisis occurs.

Emergency Information Form for Children With Special Needs

Last name:

Date form completed By Whom	Revised	Initials
	Revised	Initials

Name:	Birth date:	Nickname:
Home Address:	Home/Work Phone:	
Parent/Guardian:	Emergency Contact Names & Relationship:	
Signature/Consent*:		
Primary Language:	Phone Number(s):	

Physicians:

Primary care physician:	Emergency Phone:
	Fax:
Current Specialty physician: Specialty:	Emergency Phone:
	Fax:
Current Specialty physician: Specialty:	Emergency Phone:
	Fax:
Anticipated Primary ED:	Pharmacy:
Anticipated Tertiary Care Center:	

Diagnoses/Past Procedures/PhysicalExam:

1 .	Baseline physical findings:
2.	
3.	Baseline vital signs:
4.	
Synopsis:	
	Baseline neurological status:

Last name:

Diagnoses/Past Procedures/Physical Exam continued:

Medications:	Significant baseline ancillary findings (lab, x-ray, ECG):
1.	
2.	
3.	
4.	Prostheses/Appliances/Advanced Technology Devices:
5.	
6.	

Management Data:

Allergies: Medications/Foods to be avoided	**and why:**
1.	
2.	
3.	
Procedures to be avoided	**and why:**
1.	
2.	
3.	

Immunizations

Dates							**Dates**					
DPT							Hep B					
OPV							Varicella					
MMR							TB status					
HIB							Other					

Antibiotic prophylaxis: Indication: Medication and dose:

Common Presenting Problems/Findings With Specific Suggested Managements

Problem	Suggested Diagnostic Studies	Treatment Considerations

Comments on child, family, or other specific medical issues:

Physician/Provider Signature: **Print Name:**

Does Your Child (age birth-three) Have Special Needs?

Early Intervention is a system of services designed to support families with children who have, or are at risk for, disabilities. Early intervention professionals work in partnership with parents to help children develop their knowledge and skills to reach their potential.

Examples of Early Intervention Services are:

If your child is birth – 3 years old

Call: Children's Developmental Services Agency (CDSA)

WESTERN NC (Buncombe , Cherokee , Clay, Graham , Haywood , Henderson , Jackson , Macon, Madison, Swain, Transylvania Counties)---------- **828-251-6091**
Polk----------704-450-5440

You know your child best, if you believe your child has a developmental delay or disability, contact your CDSA to make a referral.

CDSAs assure that children from birth - 3 ears of age receive service mandated under Part C of the Individuals with Disabilities Education Act (IDEA). They are the point of referral for the North Carolina Infant-Toddler Program (ITP).

Once your child is proven eligible, you may choose to enroll in the ITP. If you decide to enroll in the ITP, remember that you are your child's first and best teacher and advocate . Be an active participant in the program to help guide important decisions about your child and the supports and services he or she may need.

If your child is birth – 5 years old

Case Management for High Risk Pregnancies: (828-899-1002

Call: Care Management for At-Risk Children (CMARC)
Polk Co. Health Department 828-894-8271

If your child qualifies, CMARC will at no charge:

- Help your family identify your strengths and concerns
- Connect you with other services and resources
- Identify ways to strengthen the parent-child relationship
- Provide information, support and ongoing education

Need Further Assistance

The North Carolina Infant Toddler Parent Handbook is a helpful guide to understanding early intervention services in North Carolina.

FIRST Resource Center----------828-277-1315
Family Support Network of WNC----------828-213-0033
Exceptional Children's Assistance Center (ECAC)---------- 1-800-962-6817

Download the CDC's free Milestone Tracker app at **cdc.gov/MilestoneTracker**

Questions to Ask Providers

Effective communication is the key to building strong relationships with your child's Early Intervention Service Providers.

Tips for Communication

Get to know your providers by building relationships and communicating often. Ask questions that are important to you and your family. How we ask questions is important, make sure to pay attention to your nonverbal communication. Make sure you are practicing active listening skills. After getting to know your provider, if it seems like the match is not a good fit, you can contact your Early Intervention Service Coordinator to discuss your options.

Building Relationships

- Ask the provider what they prefer to be called.
- How long have they been working in this field?
- What led them to this career?
- You may want to ask if they smoke (children can be exposed to toxins on hands and clothing).
- If you have pets, ask if they mind being around animals.
- Ask any questions that are important to you and your family.

Nonverbal Communication Matters

- Your body language and tone of your voice can make the person you are speaking with more or less responsive to hearing your point of view.

Practice Active Listening

- Active listening involves paying close attention to what the other person is saying. You can ask clarifying questions and repeat back to them what you heard them say.

Questions for Service Coordinators

- Do I need to pay each session or will you bill me?
- Are these services covered by my insurance?
- How often will we review the services my child receives?
- How should I contact you if I have concerns?

Questions About Communication

- Will appointments be scheduled in advance or do I need to schedule after each visit?
- What happens if we need to reschedule?
- How do I reach you after hours or in an emergency?
- Do you communicate with our child's physician?

Questions about Services

- What is the goal of this type of service and how does it help?
- How will I be involved with my child’s services?
- Do I need to get any special items or do you provide materials for us?
- Are there resources where I can find equipment to borrow or rent?
- How will you respond if my child gets upset or frustrated?
- What happens if the problems get worse or I do not see any improvement?
- If I don’t agree with the service plan, what do I do?

ecac exceptional children's assistance center
Empowering Families★Improving Lives

907 Barra Row, Suite 103 | Davidson, NC 28036 ecac@ecacmail.org | **1-800-962-6817**
www.ecac-parentcenter.org

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Child and Family Well-Being
NC Infant-Toddler Program (NC ITP)

https://www.ncdhhs.gov/itp-beearly

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All About Me

THIS SECTION PROVIDES A PLACE TO KEEP INFORMATION ABOUT YOUR CHILD.



IMPORTANT

My name is:

_____

My birthdate:

_____

My address:

_____

My parents' names:

_____

I live with:

_____

Primary language spoken in my home:

_____

Our phone number(s):

_____

_____

Emergency Contacts:

If a life threatening emergency, call 911

Hospital:

Name Phone

_____

Doctor:

Name Phone

_____

Neighbor or Family Member:

Name Phone

_____

PHOTO

OF YOUR CHILD

HERE

Hopes and dreams for my child:

_____

_____

_____

_____

IMPORTANT DOCUMENTS TO KEEP IN THIS SECTION:

"All About Me" List
(sometimes called a Positive Profile)
Include a list of your child's strengths, likes, dislikes, fears, etc. Be sure to update this as your child grows and changes

Things Someone Such as Caregiver, Babysitter, etc. May Need to Know to Support Your Child

Developmental Milestones
(space provided on back)

List of Friends, Neighbors and Play Groups
with contact information
(space provided on back)

Evaluations & Assessments

USE THIS SECTION TO KEEP TRACK OF YOUR CHILD'S EVALUATIONS & ASSESSMENTS.

IMPORTANT

Evaluations and assessments are a way of letting you know what your child does well and where he or she may need some help. They are not tests that your child either passes or fails. Your child's development will be assessed in several ways, including observations, parent interviews and more formal evaluations.

Information gathered through evaluations and assessments will be used to decide if your child needs early intervention services. This information will also help you choose the best types of supports and services for your child & family.



IMPORTANT DOCUMENTS TO KEEP IN THIS SECTION:

Statement of Your Child's Condition or Diagnosis
from NICU (hospital), doctor, therapist or other professional working with your child

Evaluations or Assessments About Your Child's Development
including social-emotional, adaptive communication, physical and cognitive development (thinking & learning skills)

Information Gathered Through Observation
including information gathered by parents (you) and care providers

Tip:

You know your child best and will play an important role in the evaluation process. Be prepared to share information with anyone evaluating your child including any concerns you may have. For example, tell them if your child is shy, his or her likes and dislikes, favorite activities, etc. Remember to ask for a copy of any evaluation reports to keep for your records!

Evaluations & Assessments

INFANT-TODDLER PROGRAM EVALUATIONS & ASSESSMENTS

will consider:

Your family's concerns, resources, priorities & daily routines.

Your family's perceptions of your child's abilities & needs related to participation in everyday routines & activities.

Your child's medical history & current health status.

Your child's cognitive development *(thinking & learning skills)*.

Your child's physical development *(moving, seeing & hearing abilities)*.

Your child's communication development *(understanding & using sounds, gestures & words)*.

Your child's social-emotional development *(responding to & developing relationships with others)*.

Your child's adaptive development *(daily living skills, learning to take care of one's self, like feeding & dressing)*.

EVALUATIONS/ASSESSMENTS LOG

Date	Type of Evaluation/Assessment	Evaluator's Name/Contact Info

Communication • Advocacy Skills

THIS SECTION PROVIDES A PLACE TO KEEP A RECORD OF LETTERS, NOTES, PHONE CALLS AND VISITS WITH PROFESSIONALS AND OTHERS.

COMMUNICATION TIPS

"Advocacy is speaking for another person or cause."

To be an advocate for your child, you must be able to effectively communicate your views and feelings to anyone who is working directly with your child or who is in a decision-making role. This includes IFSP team members (Individualized Family Service Plan), doctors, therapists, daycare providers or others.

Always remember to:

- *Keep the focus on your child and family.*
- *Make any requests in writing. Be sure to include the date and keep a copy for your records.*
- *Document important conversations with a follow-up letter or email.*
- *Send a thank you note after a meeting.*
- *It is okay to disagree with others' opinions or ideas but don't be disagreeable or aggressive.*
- *Keep an ongoing list of your concerns for your next doctor's appointment or your next meeting with your service coordinator, etc.*

IMPORTANT DOCUMENTS TO KEEP IN THIS SECTION:

Contact Log

(space on back)
Make notes immediately following each visit, meeting, telephone call, email, etc.

Written Correspondence

Keep any letters or notes between you and your Early Intervention Service Coordinator or other professional. Don't forget EMAILS. Print out and include them in this folder.

Meeting Notes

Remember to take notes at a meeting or ask someone to take them for you. This will be helpful when you are trying to remember exactly what people said, what next steps to take or what agreements were reached.

Remember:

Ongoing and effective communication between you, your Early Intervention Service Coordinator, and other service providers is important to meet the needs of your child and family.

Transition to Preschool

THIS SECTION PROVIDES A PLACE TO KEEP INFORMATION ABOUT GETTING READY FOR PRESCHOOL.

YOUR BABY IS GROWING UP! *Early intervention services end at age three and proper planning now will help to make the transition from early intervention services to preschool programs/services a smooth one. Your Early Intervention Service Coordinator will guide you through the process.*

Around your child's second birthday or at least six months before your child turns three, your Early Intervention Service Coordinator will discuss your child's transition with you and begin working on a transition plan. The plan will be included in your child's IFSP and will identify important steps to take and a timeframe for completing the steps.

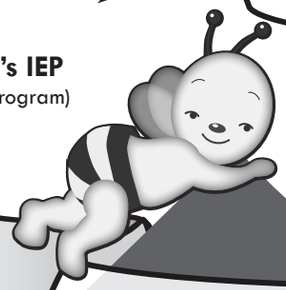
IMPORTANT DOCUMENTS IN THIS SECTION:

Transition Planning Notes & Documents
(provided to you)

Copy of the Transition Plan in Your Child's IFSP

Copy of Your Child's IEP
(Individualized Education Program) if eligible

When your child is between the ages of two years, three months and two years, nine months, your Early Intervention Service Coordinator will schedule a transition planning meeting. This will be a team meeting to:
Review *your child's progress and outcomes on the IFSP;*
Share *information about your family's concerns and priorities;*
Talk *about services for your child after they turn three; and*
Discuss *the need for any additional information or evaluations.*



At least one month before your child's third birthday, you will have a preschool team meeting. During this meeting you will discuss your child's eligibility for preschool services. If your child is eligible for preschool services, an IEP (Individualized Education Program) will be developed. Like an IFSP, the IEP will define the programs, supports and services your child will receive.

Tips:

Be in the know & be prepared:

The programs and services included in your IFSP are focused on the needs of your child ***and*** *your family. Your child's IEP (Individualized Education Program) will focus on the needs of your child, but may include parent education to help you work with your child.*

More information can be found in your Parent Handbook and by calling ECAC at 1-800-962-6817.

Transition to Preschool

CONVERSATIONS ABOUT TRANSITION

Date	Notes

ABC

MEETINGS

Date	Notes

Useful Resources

THIS SECTION IS A QUICK REFERENCE TO BE USED FOR COMMUNITY RESOURCES FOR MY CHILD.

IMPORTANT CONTACT NUMBERS:

Your local CDSA: 704-450-5440
(Children's Development Services Agency)

Your local school district's Preschool Coordinator *(three-four year olds)*:

Polk 828-894-3051

IMPORTANT INFORMATION TO KEEP IN THIS SECTION:

Local, State and National Support Groups or Organizations

Agencies/Organizations
that provide or may provide services for your child

Fun Things to Do and Recreation Programs

The Exceptional Children's Assistance Center, ECAC, is a private, non-profit parent organization committed to improving the lives and education of all children through a special emphasis on children with disabilities. ECAC has been the Parent Training & Information Center (PTI) for NC since 1983 and all of the services for families are free. For more information, call 1-800-962-6817 or visit www.ecac-parentcenter.org.

NC STATEWIDE RESOURCES

NC Early Intervention/ Infant-Toddler Program	www.beeearly.nc.gov	1-855-623-2759
Exceptional Children's Assistance Center (ECAC) *NC's Statewide Parent Training & Information Center (PTI)*	www.ecac-parentcenter.org	1-800-962-6817 *Parent Information Line*
NC Public Schools, Exceptional Children Division	www.ncpublicschools.org/ec	919-807-3969
North Carolina Office of Early Learning *(preschool)*	www.earlylearning.nc.gov	919-807-3946
NC Early Intervention Lending Library *(this library is free to use and maintained by ECAC)*	www.ncei-eclibrary.org	1-800-962-6817 *Parent Information Line*
NC Dept. of Health & Human Services	www.ncdhhs.gov	1-800-662-7030 *NC CareLine 24 Hour*
Arc of NC	www.arcnc.org	1-800-662-8706
Autism Society of NC	www.autismsociety-nc.org	1-800-442-2762
EasterSeals/UCP North Carolina	www.nc.easterseals.com	1-800-662-7119
Family Support Network of NC	www.fsnnc.org	1-800-852-0042
First in Families	www.fifnc.org	919-251-8368

More Useful Resources

Organization	Contact Info: Website/Phone/Email
Center for Early Literacy Learning	www.earlyliteracylearning.org
Center on Everyday Child Language Learning	www.cecll.org
Center on the Social and Emotional Foundations for Early Learning (CSEFEL)	www.vanderbilt.edu/csefel
Family Center on Technology and Disability	www.fctd.info • 202-884-8088
Frank Porter Graham Child Development Institute	www.fpg.unc.edu • 919-966-2622
IDEA: Individuals with Disabilities Education Act	http://idea.ed.gov *(Note: no "www." needed)*
National Center for Infants, Toddlers and Families	www.zerotothree.org • 202-638-1144
National Dissemination Center for Children with Disabilities (NICHCY)	www.nichcy.org • 1-800-695-0285
Early Childhood Technical Assistance Center (ECTA Center)	www.ectacenter.org • 919-962-2001
Partnerships for Inclusion	www.fpg.unc.edu/~pfi • 252-328-2940
Technical Assistance Center on Social Emotional Intervention for Young Children (TACSEI)	www.challengingbehavior.org • 813-974-9803
Wright's Law	www.wrightslaw.com



State of North Carolina • Department of Health and Human Services • Division of Public Health
www.ncdhhs.gov • www.beeearly.nc.gov

NC DHHS is an equal opportunity employer and provider.
8,000 copies of this public document were printed at a cost of $11,972.00 or $1.50 each. 06/13

Learn the Signs. Act Early.

Learn the signs of your child's development and act early if you ever have a concern.

To complete a milestone checklist, **download CDC's FREE *Milestone Tracker* app** or visit **cdc.gov/Milestones**, and talk to your child's doctor at every well-child visit about the milestones your child has reached and what to expect next.

YOU KNOW YOUR CHILD BEST.

If your child is not meeting milestones or you are concerned about the way your child plays, learns, speaks, acts, or moves, talk with your child's doctor, share your concerns, and ask about developmental screening. Don't wait.

If you or the doctor is still concerned

1. Ask for a referral to a specialist and,
2. Call for a free evaluation to find out if your child can get services to help:
   - **If your child is under age 3:** Call your state or territory's early intervention program. Learn more and find the phone number at **cdc.gov/FindEI**.
   - **If your child is age 3 or older:** Call any local public elementary school.

For more on how to help your child, visit **cdc.gov/Concerned**.

DON'T WAIT.

Acting early can make a real difference!

For more information about your child's development and what to do if you have a concern, visit:

www.cdc.gov/ActEarly

OR CALL:

1-800-CDC-INFO (1-800-232-4636)

to request a FREE *Learn the Signs. Act Early.* Parent Kit or to get help finding resources in your area.

Centers for Disease Control and Prevention
www.cdc.gov/ActEarly
1-800-CDC-INFO

Developmental milestones adapted from Caring for Your Baby and Young Child: Birth to Age 5 (AAP, 2009) and Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents (AAP, 2008).

Track Your Child's Developmental Milestones

Milestones Matter!

How your child plays, learns, speaks, acts, and moves offers important clues about his or her development.

Download CDC's Milestone Tracker App

GET IT ON Google Play

Download on the App Store

Learn the Signs. Act Early.

NOTES TO TAKE TO THE INDIVIDUAL FAMILY SERVICES PLAN (IFSP)

This is a form to help you prepare for the Individualized Family Service Plan (IFSP) meeting. The IFSP is the plan for your child and family's support plan and services to be provided.

What are your main concerns about your child?

What are your child's strengths?

In order to put together a plan that is tailored to your child, rather than your child's diagnosis, please describe your child.

What is your child's diagnosis or qualifying condition?

Who diagnosed your child?

Who would you like to be at your IFSP?

What support does your family need? What services does your child need?

IFSP ISSUES / RESOLUTION LOG

Date:	Who was contacted:
	Phone #:
Description of Issue:	
Resolution:	

Transition to the Preschool Plan

The information below is helpful in planning your child's "transition" to preschool services 6 months prior to his/her third birthday. The process starts at 2 years, months most of the time.

This plan is specific to children who are receiving early intervention services through the CDSA.

⇨ **8-9 Months before your child turns 3 years old:**

- Your Service Coordinator will schedule a time to meet with you, starting the Transition process.
- Present at this meeting will be:
  - **Who**:
    - Parent and anyone you would like to invite
    - Children's Developmental Services Agency Service Coordinator
  - **What**:
    - Discuss what Transition means.
    - Review IFSP goals if needed.
    - With your help add a transition goal to the Individual Family Service Plan.
    - Get your permission to contact the Local Education Agency (LEA) to make a referral and talk.
    - Talk to the Preschool Program. You may also complete a Notification/Referral form if needed.

⇨ **5-6 Months before your child turns 3 years old:** with your permission

- The Children's Developmental Services Agency Service Coordinator will send the Notification and Referral form to Preschool Coordinator providing information about your child.
- The Children's Developmental Services Agency Service Coordinator will set up a Transition Planning Conference where you will meet the Preschool Coordinator and discuss the transition plan.
- Evaluations will be scheduled to be completed closer to your child's 3rd birthday.

⇨ **2-3 Months before your child turns 3 years old**

- The Preschool Coordinator will schedule a referral meeting where you will have the choice of what information and assessments will be reviewed by the school.
- A plan will be developed regarding specific tasks needed, who will be responsible to do them and when the tasks will be completed.

- The school will complete any assessments needed to help determine eligibility for services.
- Evaluations will be done during this time, such as: Speech, Motor, Assistive Technology, Psychological, Adaptive, Educational, etc.

⇨ **1-2 weeks before your child turns 3:**

- The Individual Education Plan meeting will be held to determine if your child is eligible for services with the school district.
    - **Who**
        - Parent Child Service Coordinator
        - Preschool Coordinator (Local Education Agency)
        - Regular Education Teacher
        - Special Education Teacher
        - Anyone you feel can support you in this meeting such as family, friends, etc.
        - You may also want to invite your CDSA Service Coordinator and therapists that are working with your child. You can choose to have a Care Managers through Care Management for At-Risk Children to follow your child's progress until five years of age. If so, it would be important to invite them to the IEP meeting.
    - **Why**: The Individual Education Plan is the map for your child's teachers and therapists who will be serving your child in the preschool program.

⇨ **Happy Third Birthday!**

If your child is found to be eligible for services, he/she will now receive services through your local Preschool program. The Individual Education Plan (IEP) is now active. Remember that the IEP can be changed if it is not working for your child! Make a note of who to call if you have questions.

VISION FOR THE FUTURE FORM

Most parents don't know this is a question in their child's IEP. It is such an important one! Bring a prepared statement to have put in the IEP. Think about short-term goals (current school year) and long-term goals (school career) when answering this question.

An example vision statement might be: *Our vision for John is that he'll be able to apply his caring heart and his desire to learn and socialize in an environment that will support his social and academic needs. We would like him to come to understand himself, and, in time, to be able to successfully manage his needs independently so that his gifts may shine. We would like to see him make continued improvement with his social skills, in addition to his academic skills, so he can enjoy lasting friendships throughout his school years and his life.*

Date:

Ideas for the future of my child (social skills, recreational skills, learning their dreams, your dreams, etc.):

Resources to make my child's dreams come true:

Early Intervention Resources

Polk County

Children's Developmental Services Agency
A child and their family may receive Infant-Toddler supports and services (developmental evaluations, assessment, & therapies) if the child is younger than age three and has a developmental delay or an established condition.
(704) 480-5440

Exceptional Children's Assistance Center
The ECAC is a private, nonprofit parent organization, committed to improving the lives and education of ALL children through a special emphasis on children with disabilities and special healthcare needs. ECAC helps parents navigate the special education system, know their rights, and use their voice. We provide information, support, training and resources to assist families caring for children with special needs from birth to age 26.
https://www.ecac-parentcenter.org/

Family Support Network of Western North Carolina
Family Support Network of WNC helps families access services & supports by providing families with information, emotional support, and social relationships to help them care for their children. Services include: Support Groups, Parenting Classes & Workshops
(828) 213-0047 MHAV.FamilySupportNetwork@HCAHealthcare.com
missionhealth.org/member-hospitals/childrens/family-support-network/

WNCSource
Free Early Head Start services for qualified children younger than age three. Child care classrooms for the children with comprehensive services of education, social service, parent involvement, nutrition & health. Families are involved in all facets of the program.
(828) 693-1711 www.wncsource.org

Polk County Schools: Exceptional Children
Provides observations, screenings, and when appropriate evaluations. Develops Individualized Education plans for qualifying children ages 3-5. Services include special education, speech/language therapy, occupational therapy, physical therapy (if child qualifies under Individuals with Disabilities Education Act (IDEA)).
(828) 894-3051

Women, Infants and Children (WIC)
WIC Supplemental Nutrition Program is designed to improve the health and well-being of low-income pregnant, breastfeeding and postpartum women, infants and children up to age five who are at nutritional risk by providing: Nutrition Education, Breastfeeding Education and Support, Referrals to Community Resources, Nutritious Foods, Free Language Assistance
(828) 894-8271 www.nutritionnc.com/wic

CMARC - Care Management for At-Risk Children
If your child qualifies, CMARC will at no charge: Help your family identify your strengths & concerns, connect you with a medical home and other resources, identify ways to strengthen the parent-child relationship, provide information, support and ongoing education, and provide an advocate to help your family navigate the health care system.
Blue Ridge Health 161 Walker St, Columbus, NC (828) 894-2222

Vaya Health
Vaya is a public managed care organization (MCO) that prioritizes whole-person health. We manage Medicaid, federal, state, and local funding to connect the people we serve to health care services and supports. Our specialty is helping individuals with needs related to mental health, substances use disorders, intellectual/developmental disabilities (I/DD), and traumatic brain injury (TBI). Anyone living in Vaya's region experiencing a crisis can get help by contacting Vaya's toll-free, 24/7 Behavioral Health Crisis Line at **(800) 849-6127**. Eligible individuals may also receive provider referrals and other information or resources about services and supports.

Polk County Schools Preschool Program
Provides PreK classroom services for 4 year olds with limited availability for 3 year olds. Programs are funded by Head Start, NCPreK, Exceptional Children Program, and tuition. All children in the program receive comprehensive, high quality, developmentally appropriate, early childhood experiences which lead to a positive educational start. Social service resources, family engagement activities, health, and nutrition services are integral to the program.
(828) 894-1030 **polkschools.org**

Public Health
Prevent. Promote. Protect.
Polk County

Parent Advisory Council
Polk County Health & Human Services Agency, Innovative Approaches, hosts a Parent Advisory Council (PAC). Families meet monthly to Engage, Connect, Inspire, and Advocate for a better care system for children with special needs. Supported by NC Division of Child & Family Well Being.
For more information, contact Rosanna Kingston by email at **rkingston@polknc.org** and by phone **(828) 899-0025**.
Visit the following link for a free care notebook!
https://www.polknc.gov/consolidated_human_services/public_health/innovative_approaches.php

Polk County Public Transportation System
Offering safe, reliable, door-to-door service
Medicaid Transport Available.
Call 3 days ahead **(828) 864-8203 Ext 1**

Does Your Child (age three-five) Have Special Needs?

The North Carolina Preschool Program focuses on your child's educational needs. The North Carolina Preschool Program offers a variety of services to help young children ages three to five years. The Preschool Program strives to educate the child to enable him or her to participate in daily activities.

Preschool Program services may include:

Audiology	Counseling
Interpreting	Occupational therapy
Orientation/mobility	Physical therapy
School Nurse	Social Worker
Speech/Language	Transportation

If your child is 3 – 21 years old

Call: Your Local Education Agency (LEA)

Henderson Co. Schools---------- 828-697-4566
Asheville City Schools---------- 828-350-7000
Buncombe Co. Schools ---------- 828-255-5972

Polk Co. Schools 828-894-3051

If appropriate, this program will:
- Evaluate your child
- Develop an Individual Education Plan (IEP)

- Provide special services for your child at child care or other suitable location
- Provide special education and related support services

If your child is birth – 5 years old

Call: Care Management for At-Risk Children (CMARC)

Henderson Co. Health Department ---------- 828-692-4223
Buncombe Co. Health Department ---------- 828-250-5096
Polk County Health Department ---------- 828-894-8271

If your child qualifies, CMARC will at no charge:

- Help your family identify your strengths and concerns
- Connect you with other services and resources
- Identify ways to strengthen the parent-child relationship
- Provide information, support and ongoing education

Need Further Assistance?

FIRST Resource Center----------828-277-1315
Family Support Network of WNC----------828-213-0033
Exceptional Children's Assistance Center (ECAC)---------- 1-800-962-6817

Download the CDC's free Milestone Tracker app at **cdc.gov/MilestoneTracker**
Follow this link to the IEP Roadmap:
https://www.nchpad.org/fppics/NCHPAD_IEP%20Roadmap.pdf

What Is a Family Partner with Vaya Health? 800-849-6127

A Family Partner is someone with personal experience as the primary caregiver of a child, youth, or adult with complex needs. Because Family Partners have extensive experience navigating a wide range of child-serving systems, they are uniquely equipped to support other families in understanding, connecting with, and navigating the services and supports needed to meet their children's needs. Some of these services, systems, and supports include:

- The Child and Family Team process
- Medicaid: Standard and Tailored Plans
- Vaya Health
- Juvenile Justice and the court system
- Department of Social Services/child welfare
- School system
- Innovations Waiver and the Registry of Unmet Needs
- Mental Health services
- Intellectual/Developmental Disability services
- Guardianship
- Social Security Disability
- Substance Use services

Given their shared experiences, Family Partners can build meaningful relationships with families, allowing them to offer a critical layer of education, advocacy, and support. Family Partners provide unique assistance when working with families. Some of the things they can assist with are:

- Validating family members' experiences
- Assisting caregivers in learning the skills to be effective advocates for their children
- Guiding caregivers to understand, communicate effectively, and partner with service providers
- Connecting family members with training opportunities relevant to their needs
- Linking families to child collaboratives, Local Interagency Coordinating Councils (LICC), family advocacy groups, and other community organizations
- Utilizing System of Care (SOC) values in their work with families and service providers:
    - Family- and youth-guided
    - Individualized, strength-based support
    - Cultural competence
    - Shared responsibility and accountability to results
    - Interagency collaboration
    - Home- and community-based services
- Supporting families in overcoming barriers

Family Partners work collaboratively with SOC Coordinators to recruit SOC stakeholders onto child collaboratives and support all members' sustained participation. Family Partners also work actively with child collaboratives to develop strategies to promote and enhance family and youth participation.

For more information, including how to make a Family Partner referral, please contact: 1-800-849-6127 or systemofcare@vayahealth.com.

NOTES TO TAKE TO THE INDIVIDUAL EDUCATION PLAN (IEP)

This is a form to help you prepare for the Individualized Education Program (IEP). The term IEP is used to describe the plan for your child's education and the services provided through the school system. The meeting where the plan is created is called an IEP.

What are your main concerns about your child?

What are your child's strengths?

In order to put together a plan that is tailored to your child, rather than your child's diagnosis, please describe your child.

What is your child's diagnosis or qualifying condition?

Who diagnosed your child?

Who would you like to be at your IEP?

What type of school setting and support services do you believe your child needs?

IEP ISSUES / RESOLUTION LOG

Date:	Who was contacted:
	Phone #:

Description of Issue:

Resolution:

NOTES / ISSUES FOR REVIEW AT THE NEXT IEP MEETING

Date:	Notes:

VISION FOR THE FUTURE FORM

Date:

Ideas for the future of my child (social skills, recreational skills, learning their dreams, your dreams, etc.):

Resources to make my child's dreams come true:

Does Your Child (age 5-21) Have Special Needs?

Is your child showing developmental delays or having significant academic, physical, or emotional problems?

Your local school district can help determine if your child needs interventions or a specialized plan.

You are a team member in making these decisions and developing a plan.

Your child may need a Section 504 Accommodation Plan or Individual Health Plan

The 504 Plan is a plan developed to ensure that a child who has a disability identified under the law and is attending an elementary or secondary educational institution that receives federal funds and receives accommodations that will ensure their academic success and access to the learning environment.

Individualized Healthcare Plan (IHP) is a plan for "students whose healthcare needs affect or have the potential to affect safe and optimal school attendance and academic performance."

Your child may need an Individualized Educational Plan and special education services

Individualized Educational Plan (IEP) is a plan or program developed to ensure that a child who has a disability identified under the law; is attending an elementary or secondary educational institution and receives specialized instruction and related services.

Call: Your Local Education Agency (LEA)

Henderson Co. Schools ----------828-697-4566
Asheville City Schools ----------828-350-7000
Buncombe Co. Schools----------828-255-5972
Polk Co. Schools 828-894-3051

.....

Need Further Assistance?

See additional resources in the back of your care notebook.

FIRST Resource Center----------828-277-1315
Family Support Network of WNC----------828-213-0033
Exceptional Children's Assistance Center (ECAC) ----------1-800-962-6817

What is the difference between an IEP and a 504 Plan?

IEP Defined – Individualized Educational Plan (IEP) is a plan or program developed to ensure that a child who has a disability identified under the law and is attending an elementary or secondary educational institution receives specialized instruction and related services.

504 Plan Defined – 504 Plan is a plan developed to ensure that a child who has a disability identified under the law and is attending an elementary or secondary educational institution receives accommodations that will ensure their academic success and access to the learning environment.

Subtle but Important Differences – Not all students who have disabilities require specialized instruction. For students with disabilities who do require specialized instruction, the Individuals with Disabilities Education Act (IDEA) controls the procedural requirements, and an IEP is developed. The IDEA process is more involved than that of Section 504 of the Rehabilitation Act and requires documentation of measurable growth. For students with disabilities who do not require specialized instruction but need the assurance that they will receive equal access to public education and services, a document is created to outline their specific accessibility requirements. Students with 504 Plans do not require specialized instruction, but, like the IEP, the 504 Plan should be updated annually to ensure that the student is receiving the most effective accommodations for his/her specific circumstances.

Borrowed from: Molly's Place at the CHaD Family Center

TERMS TO KNOW

FAPE	•Children with disabilities have the right to a free and appropriate public education (FAPE). It ensures that each child receives an education that meets his/her individual needs.
IEP	•An Individualized Education Program (IEP) is a legally binding document that sets goals for an eligible child based on their unique needs and strengths. The IEP explains the services and supports the school will provide, and how progress will be monitored.
Present Level of Performance	•Present level of performance serve as the starting point for the coming year's IEP. Present level of performance focus on a child's strengths, needs, and grade level expectations for both academic and functional performance. Present levels play an important role in setting annual goals for the IEP.
LRE	•Least restrictive environment (LRE) means that students with disabilities have to be educated in the same setting as students without disabilities as much as possible, as long as their needs can be met.
Accommodation	•An accommodation is a change made because of a student's disability to allow them to participate and benefit from their education. Accommodations don't change what a child is expected to know.
FBA	•A functional behavioral assessment (FBA) is a process used to try to understand a child's challenging behaviors. It attempts to identify when and where specific behaviors occur, and the function of the behavior for the child. The school then writes a behavior intervention plan (BIP), which outlines how to address the issues.
Related Services	• Specialized services required for the student to benefit from special education. Ex: Physical therapy, counseling, and/or transportation.
Prior Written Notice	•Schools must tell parents in writing before changes are made or refused regarding a child's evaluation, eligibility or the child's special education program.
Procedural Safeguards	•Schools must give parents a writen explanation of the rights that they and the student have under IDEA. This is sometimes called the parent rights handbook.

907 Barra Row, Suite 102| 103
Davidson, NC 28036
www.ecac-parentcenter.org
704-892-1321 | ecac@ecacmail.org

Follow us on social media!

IEP Checklist:

in developing an effective and appropriate **I**ndividualized **E**ducation **P**rogram *or* **IEP** for your child is essential to your child's success.

While IEPs typically cover a 12-month period, they help to create the foundation for your child's future. Think of the adult your child will become. When planning, think well beyond just one year.

step ONE: Before The IEP Meeting:

The Individuals with Disabilities Education Improvement Act of 2004 (IDEA) requires schools to give parents of students with disabilities adequate notice to participate in the IEP meeting. This notice is called ***Invitation to Conference/Prior Notice.*** The NC Department of Public Instruction considers "adequate" notice to be 7-10 calendar days. The notice must be given to you in writing and in your native language.

Carefully review the invitation/notice and consider the following:

- ❒ Is the *purpose* of the meeting clearly stated?
- ❒ Is my child 14 years old or turning 14 during the next 12 months? If so, did he/she receive their own written invitation to the IEP meeting as required when planning for their transition to adulthood?
- ❒ Who is attending? What are their roles in the meeting?
- ❒ Are there any team member excusal requests attached to invitation?
- ❒ Is the Date/Time/Location convenient for your schedule?

Read, sign and return the Invitation to Conference/Prior Notice as soon as possible and keep a copy for your records. Include in writing any of the following that apply:

- ❒ Suggestions for alternative meeting dates or times, if necessary
- ❒ A request to participate by conference call or other way if you are unable to participate in person
- ❒ A list of whom you are inviting, if anyone
  - consider inviting a friend, relative, outside professional or note taker
- ❒ A list of concerns or issues that you wish to discuss: this is your ***agenda***
- ❒ A request for a copy of any proposed IEP draft, well in advance of the meeting
- ❒ Your approval or disapproval of any team member excusal request
- ❒ A note, if you plan to audio record the meeting

Be sure enough time has been scheduled for the meeting to discuss:

- **Items listed on the Invitation to Conference**
- **Concerns or issues on your agenda**

Organize!

Carefully organize your child's records/files in an order that works well for you. If you notice that you are missing an important document, ask your child's school for a copy.

Your child's records/files should include *(as appropriate for your child)*:

- ❒ Current and past IEPs
- ❒ Report cards
- ❒ Work samples
- ❒ Evaluation/assessment results
- ❒ Progress reports on academics and IEP goals
- ❒ Notes/email/phone call logs of communication about your child
- ❒ Functional Behavior Assessments (FBA)
- ❒ Behavior Intervention Plans (BIP)
- ❒ Other documents, such as Person-Centered Plan, tutor reports, behavior logs/reports, discipline referrals, medical records, therapy/ treatment reports, etc.

Prepare!

As you prepare for the IEP meeting, review your child's records/files and consider the following:

1. ***What has been accomplished?***
2. ***What has worked well?***
3. ***What needs more work?***
4. ***What are my concerns? What are my child's concerns?***

- ❒ Visit ECAC's web site, **www.ecac-parentcenter.org**, to download or review the following tools:
  - Positive Student Profile
  - Blank IEP documents and other worksheets or forms
  - NC Policies Governing Services for Children with Disabilities
  - NC Procedural Safeguards: Handbook on Parents' Rights
  - Select the **YouTube** icon and watch ECAC's IEP videos
- ❒ Write down and prioritize a list of any questions, concerns or requests that you have.
- ❒ Create a vision statement for your child's life both now and for the future.
- ❒ Make copies or ask the school to make copies of your agenda (*those topics or issues that you want to discuss and address)*.
- ❒ Gather supporting documents such as private evaluations, therapist notes, research-based fact sheets, records of past trials, etc.
- ❒ Ask your child about how things are going. What is working or not working?
- ❒ Prepare your child to participate in the meeting, if they are attending.
- ❒ Consider bringing pictures or a short video of your child to the meeting.
- ❒ Give or send a reminder note to anyone you have invited to the meeting.
- ❒ Ask the teacher(s) about your child's progress and any specific concerns or ideas they have for the upcoming year.

step TWO: The IEP Meeting:

It is important for every member of the IEP Team, including you, to be prepared to work together. The Team must consider and use a wide variety of data and other information, including the information you share, to create an IEP that is appropriate for your child.

The following steps will help you to effectively participate in the IEP meeting:

- ❒ Remember to bring your notes, records and any other information you need for the meeting. Don't forget a pencil/pen/paper and remember to bring your child's pictures or video if desired.
- ❒ Arrive 10-15 minutes before the meeting's start time.
- ❒ Connect with any person(s) that you invited before entering meeting.
- ❒ Request introductions, if necessary, and clarify everyone's role at the meeting.
- ❒ Ask who is responsible for taking the meeting notes or minutes. *Review notes periodically during the meeting to ensure that they are clear, accurate and have adequate detail.*
- ❒ Review the IEP meeting agenda.
- ❒ Give copies of your agenda *(if you made one)* to each team member.
- ❒ Share your ideas, opinions and feelings throughout the meeting.
- ❒ Listen carefully to what is being said.
- ❒ If something is not clear, ask questions as needed to be sure you fully understand before moving forward.
- ❒ Request a brief break if you need one.

Fifteen minutes before the meeting ends:

- ❒ Review the meeting minutes and the Prior Written Notice for accuracy. (form DEC 5)
- ❒ Check to see if all your concerns have been addressed.
- ❒ Make sure that the wording throughout the IEP is clear and specific enough to be understood by anyone – even if they were not present at the meeting!!
- ❒ Schedule another IEP meeting if there is an unresolved issue or if you ran out of time.
- ❒ Identify who is responsible for each part of the IEP and any follow-up activity.
- ❒ Sign the IEP. Your signature documents your ***attendance and participation*** in developing the IEP.
- ❒ If you disagree with any part of the IEP, state your concern(s) in writing on the IEP form next to your signature or in the margin.
- ❒ Thank the other team members for their participation, efforts and ideas for your child.

IMPORTANT NOTE: You are entitled to a copy of your child's completed IEP. If it is not offered to you, ask for a copy before leaving. Be sure to take it with you even if a cleaned-up copy will be sent.

You may also receive copies of other special education related documents at the end of the meeting. Once home and while the meeting is still fresh in your memory, take time to review everything. Contact the school in writing if any clarifications or corrections are needed. As always, keep these documents with your child's other records!

step THREE:

After The IEP Meeting:

Congratulations, you have completed an important step in your child's education. This is a great time to reflect on your IEP meeting experience and to make some notes about how to improve this process for the next meeting.

- ❒ Write ***"Thank You"*** notes or letters to those you invited and other team members.
- ❒ Write letters of clarification to address any concerns, questions, overlooked areas, etc., if needed.
- ❒ Consider sharing a copy of the IEP with other professionals working with your child.
- ❒ Ensure ALL of your child's teachers are aware that the IEP has been updated.

the end of the IEP meeting is the beginning of an appropriate education for your child. Stay connected throughout the year:

- ❒ ***MONITOR*** your child's education to ensure proper implementation of the IEP and to ensure that your child is making adequate progress.
- ❒ ***COMMUNICATE*** with your child's teachers and others. Share successes and address any issues as they arise.
- ❒ ***MAKE TIME*** to review the IEP periodically and request an IEP meeting to discuss changes if needed.
- ❒ ***CONTACT*** ecac ***at 1-800-962-6817*** or visit **www.ecac-parentcenter.org**

Working With Your Child's Teachers

Parent Checklist

It is important to have a positive relationship with your child's teacher. Effective and positive communication is key in building a partnership to help your child succeed.

Working with Teachers / School	Already do this!	I'll try it!
I talk to my child's teachers about his/her work, and tell them what they need to know about my child.	☐	☐
If I don't understand what is going on at school, I contact the teacher.	☐	☐
If my child is concerned about school issues, I talk to my child and to the teacher to find out what is happening.	☐	☐
I try to show my child's teachers respect, and work with them on my child's behalf.	☐	☐
I find out everything I can about the school my child attends.	☐	☐
If possible, I attend PTA or PTO meetings.	☐	☐
If I notice my child is having trouble in a subject I will talk with my child's teacher and find out how I can help.	☐	☐
I meet the teacher early in the year before any problems arise.		
If the teacher has been especially helpful and cooperative I send a thank you note and pass the compliment on to the principal.	☐	☐
I mark important dates on my calendar.	☐	☐
I keep and organize school records relevant to my child's IEP.	☐	☐
I prepare for and attend parent/ teacher conferences, Individualized Educational Plan meetings or other individualized school meetings.	☐	☐
I have a communication system with my child's teacher (For example: communication notebook, daily / weekly folder, contact information scheduled, etc).	☐	☐

Adapted from Literacy Resource Kit for Parents: Families Helping children Become Better Readers. Tennessee State Improvement Grant and Pages Ahead Literacy Program, www.pageahead.org

Exceptional Children's Assistance Center (ECAC)
907 Barra Row, Suites 102/103 • Davidson, NC 28036 • (704) 892-1321
Parent Information Line: 1-800-962-6817• www.ecac-parentcenter .org

SCHOOL INFORMATION

(KINDERGARTEN THROUGH TRANSITION YEARS)

Preschool

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

Preschool

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

Kindergarten

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

1st Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

2nd Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

3rd Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

4th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

5th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

6th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

7th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

8th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

9th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

10th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

11th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

12th Grade

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

Transition Year

School:	Address:
Principal:	Principal Phone:
	Teacher/ Aide/ Inclusion

Teacher/ Aide/ Inclusion Specialist:	Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

Transition Year

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

Transition Year

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

Transition Year

School:	Address:
Principal:	Principal Phone:
Teacher/ Aide/ Inclusion Specialist:	Teacher/ Aide/ Inclusion Specialist Phone:
ST/PT/OT Name:	ST/PT/OT Phone:

Other:

NOTES TO TAKE TO THE INDIVIDUAL EDUCATION PLAN (IEP)

This is a form to help you prepare for the Individualized Education Program (IEP). The term IEP is used to describe the plan for your child's education and the services provided through the school system. The meeting where the plan is created is called an IEP.

What are your main concerns about your child?

What are your child's strengths?

In order to put together a plan that is tailored to your child, rather than your child's diagnosis, please describe your child.

What is your child's diagnosis or qualifying condition?

Who diagnosed your child?

Who would you like to be at your IEP?

What type of school setting and support services do you believe your child needs?

IEP ISSUES / RESOLUTION LOG

Date:	Who was contacted: Phone #:

Description of Issue:

Resolution:

NOTES / ISSUES FOR REVIEW AT THE NEXT IEP MEETING

Date:	Notes:

VISION FOR THE FUTURE FORM

Date:

Ideas for the future of my child (Employment, Housing, further education their dreams, your dreams, etc.):

Resources to make my child's dreams come true:

Transitioning to Adulthood – What You Need to Know

At a Glance

Life is full of transitions, and one of the more remarkable ones occurs when we get ready to leave high school and go out in the world as young adults. When the student has a disability, it's especially helpful to plan ahead for that transition. In fact, I Individuals with Disabilities Education Act (IDEA) requires it.

Transition planning helps kids with IEPs prepare for life after high school. Under federal law, transition planning must start by the time your child turns 16. Planning is about more than just college — it covers jobs and daily life skills too.

The Domains of Adulthood to Consider

The definition of transition services mentions specific domains of adulthood to be addressed during transition planning.

- Postsecondary education
- Vocational education
- Integrated employment (including supported employment)
- Continuing and adult education
- Adult services
- Independent living
- Community participation

Tips That May Help Your Child's Transition to Adulthood

https://www.parentcenterhub.org/transitionadult/
https://www.pacer.org/parent/php/PHP-c107.pdf

A Quick Summary of Transition

Life is full of transitions, and one of the more remarkable ones occurs when we get ready to leave high school and go out in the world as young adults. When the student has a disability, it's especially helpful to plan ahead for that transition.

- Transition services are intended to prepare students to move from the world of school to the world of adulthood.
- Transition planning begins during high school at the latest.
- The Individuals with Disabilities Act (IDEA) requires that transition planning start by the time the student reaches age 16.
- Transition planning may start earlier (when the student is younger than 16) if the IEP team decides it would be appropriate to do so.
- Transition planning takes place as part of developing the student's Individualized Education Program (IEP).
- The IEP team (which includes the student and the parents) develops the transition plan.
- The student must be invited to any IEP meeting where postsecondary goals and transition services needed to reach those goals will be considered. This is particularly important starting at the age of 14 so the child can be a part of the process. Of course, parent participation should continue even as the child gets older.
- In transition planning, the IEP team considers areas such as postsecondary education or vocational training, employment, independent living, and community participation.
- Transition services must be a coordinated set of activities oriented toward producing results.
- Transition services are based on the student's needs and must take into account his or her preferences and interests.

Health Care Transition Timeline

for Parents/Caregivers

Age 12-13

- Help your teen learn about their own health condition, medications, and allergies.
- Encourage your teen to ask their doctor questions about their own health.
- Ask your teen's doctor if and at what age they no longer care for young adults.

Age 14-15

- Learn what your teen knows about their own health, health care, and family medical history. Both you and your teen can take Got Transition's Transition Readiness Assessments* and discuss this together and with the doctor.
- Have your teen carry their own health insurance card.
- Help your teen learn more about their own health and what to do in case of an emergency.
- Help your teen practice making a doctor's appointment and ordering prescription refills (either by phone, online, or through an app).
- Encourage your teen to see the doctor alone for part of the doctor's visit to help gain independence in managing their own health and health care.

Age 16-17

- Encourage your teen to make doctor's appointments, see the doctor alone, ask the doctor questions they may have, and refill medications.
- Ask the doctor to talk with your teen about their privacy rights when they turn 18.
- Work with your teen and the doctor to make and share a medical summary.
- Before your teen turns 18 and becomes a legal adult, figure out if they will need help making health care decisions. If so, ask your Family Voices chapter for local resources.
- Talk with your teen about the age they want to transfer to a new doctor for adult care.

Age 18-21

- At age 18, your child is a legal adult and legally responsible for their care. You cannot access their medical information or be in the doctor's visit unless your young adult agrees or certain legal forms have been completed.
- If you need local resources on supported decision-making, ask your Family Voices chapter.
- Learn if there are additional changes at 18 that affect your young adult (e.g., health insurance, Social Security Income).
- Encourage your young adult to ask their current doctor to find a new adult doctor. Make sure that the new doctor accepts your young adult's health insurance, and help them learn if there are any charges at the visit.
- Encourage your young adult to keep a copy of their medical summary and always carry their health insurance information with them.

Age 22-25

- Encourage your young adult to get care from their adult doctor, learn to manage their own health and health care, and update their medical summary.
- Encourage your young adult to stay insured. If they change health insurance, encourage them to make sure their doctor takes their insurance and learn if there are any charges at the visit.

*For a Transition Readiness Assessment for youth, visit https://gottransition.org/6ce/leaving-readiness-assessment-youth and for a version for parents/caregivers, visit https://gottransition.org/6ce/leaving-readiness-assessment-parent.

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NATIONAL HEALTH CARE TRANSITION CENTER

Transition Readiness Changing Roles for Families

Compare your answers with your child. You might be surprised what they know or what they want to learn. Work on a plan to increase their health care skills. Share with the medical team the skills that you and your child are working on. It takes time and practice to learn and demonstrate these skills. Best time to start, is today!

Health & Wellness 101 **The Basic Skills**	**Yes** I do this	want to do this	I need to learn how	Someone else will have to do this- Who?
KNOWLEDGE OF HEALTH ISSUES/DIAGNOSIS				
1. My child understands his/her health care needs, and disability and can explain these needs to others.				
2. My child can explain to others how our family's customs and beliefs might affect health care decisions and medical treatments.				
3. My child knows his/her health and wellness baseline (pulse, respiration rate, elimination habits)				
4. My child knows health symptoms that need quick medical attention.				
5. My child knows what to do in case he/she have a medical emergency				
BEING PREPARED				
6. My child carries his/her health insurance card everyday				
My child carries his/her important health information with me every day (i.e.: medical summary, including medical diagnosis, list of medications, allergy info., doctor's numbers, drug store number, etc.)				
TAKING CHARGE				
8. My child calls for his/her own doctor appointments.				
9. My child knows he/she has an option to see the doctor by them self.				
10. Before a doctor's appointment my child prepares written questions to ask.				
11. My child racks his/her own appointments & prescription refills expiration dates.				
12. My child calls in his/her own prescriptions refills.				
13. My child has a part in filing medical records and receipts at home.				
14. My child pays for the co-pays for medical visits.				
15. My child co-signs the "permission for medical treatment" form (with or without signature stamp) or can direct others to do so).				
16. My child helps monitor his/her medical equipment so it's in good working condition (daily and routine maintenance).				
AFTER AGE 18				
17. My child and our family have a plan so he/she can keep my healthcare insurance after turning 18 and 26.				
18. My child will be prepared to sign his/her own medical forms (HIPAA, permission for treatment, release of records)				
My child and our family have discussed and plan to develop a legal Power of Attorney for health care decisions in the event health changes and he/she is unable to make decisions for them self. (Everyone in the family should have one!)				

You are welcome to use Changing Roles "as is" or adapt it to your setting or needs. Revised in 2011 by Patti Hackett, MEd. This tool was adapted from the federally funded, HRSA/MCHB HRTW Tool - Changing Roles, developed by Patti Hackett, Ceci Shapland & Mallory Cyr, 2006, 2009.

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NATIONAL HEALTH CARE TRANSITION CENTER

Transition Readiness Changing Roles for Youth

Compare your answers with your family. They might be surprised what you know or what you want to learn. Work on a plan to increase your health care skills. Share with the medical team the skills that you are working on. It takes time and practice to learn and demonstrate these skills. Best time to start, is today!

Health & Wellness 101 **The Basic Skills**	**Yes** I do this	I want to do this	I need to learn how	Someone else will have to do this - Who?
KNOWLEDGE OF HEALTH ISSUES/DIAGNOSIS				
1. I understand my health care needs, and disability and can explain my needs to others.				
2. I can explain to others how our family's customs and beliefs might affect healthcare decisions and medical treatments.				
3. I know my health and wellness baseline (pulse, respiration rate, elimination habits)				
4. I know my symptoms that need quick medical attention.				
5. I know what to do in case I have a medical emergency				
BEING PREPARED				
6. I carry my health insurance card everyday				
7. I carry my important health information with me everyday (i.e.: medical summary, including medical diagnosis, list of medications, allergy info., doctor's numbers, drug store number, etc.)				
TAKING CHARGE				
8. I call for my own doctor appointments.				
9. I know I have an option to see my doctor by myself.				
10. Before a doctor's appointment I prepare written questions to ask.				
11. I track my own appointments and prescription refills expiration dates.				
12. I call in my own prescriptions refills.				
13. I have a part in filing my medical records and receipts at home.				
14. I pay my co-pays for medical visits.				
15. I co-sign the "permission for medical treatment" form (with or without signature stamp, or can direct others to do so).				
16. I help monitor my medical equipment so it's in good working condition (daily and routine maintenance).				
AFTER AGE 18				
17. My family and I have a plan so I can keep my healthcare insurance after I turn 18 and 26.				
18. I sign my own medical forms (HIPAA, permission for treatment, release of records)				
19. My family and I have discussed and plan to develop a legal Power of Attorney for health care decisions in the event my health changes and I am unable to make decisions for myself. (Everyone in the family should have one!)				

You are welcome to use this tool -Changing Roles "as is" or adapt it to your setting or needs. Revised in 2011 by Patti Hackett, MEd. This tool was adapted from the federally funded, HRSA/MCHB HRTW Tool -Changing Roles, developed by Patti Hackett, Ceci Shapland and Mallory Cyr, 2006, 2009.

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Transition to Adulthood Guidance

Housing options

- ***Creative housing and therapeutic community websites***
  https://firstwnc.org/housing-options/?fl_builder

Employment and vocational services

Planning for employment can start when your child is in high school using their Transition Plan as a first step. There may be a variety of options available after graduation that your care coordinator can assist with. Vocational Rehabilitation maybe be another source for job sampling and coaching.

- **Polk Vocational Services ---------- 828-894-3041**

  For over 50 years, PVS has been serving people with disabilities and other life barriers in Polk and surrounding counties. We are proud to be the largest manufacturing employer in Polk County. Empowered by our quality-focused manufacturing, PVS is able to provide meaningful employment and support services for people of all abilities. We're always looking for new people to join the PVS family, including those looking for meaningful employment as well as those who could benefit from our support services. Offerings include day, community, and residential services. Location: 451 Industrial Park Drive, Columbus NC 28722.

Health care transition

Consult your child's primary medical doctor by the age of 16 to develop a plan for transitioning to adult medical care.

- Got ***Transition*** National resource center on health care transition
  https://www.gottransition.org/
- Transitioning ***CYSHCN from Pediatric to Adult Care***
  https://publichealth.nc.gov/wch/families/transitioningchildren.htm

Selective service

If your son is able to "function in public with or without assistance" you are required to register him with the Selective Service System. Even if your son has a disability that you think would disqualify him from military service they must still register as their appropriate classification will be determined later. www.sss.gov

College based options

NC College options for students with Intellectual and Developmental Disabilities.

The following resource information contains information about Post-Secondary Education programs including community colleges and universities across North Carolina, as well as other states.

- ***College Foundation of North Carolina*** To learn more about the offices for students with disabilities at all the colleges in NC, www.cfnc.org or call 1-866-CFNC (2362) to speak to a representative.
- ***The North Carolina Post-Secondary Education Alliance*** http://www.cidd.unc.edu/psea/
- ***Think College*** This directory includes information on 308 college programs for students with intellectual disability. https://thinkcollege.net/college-search

Secondary Transition and Instructional Resources

- ***Public Schools of North Carolina – Exceptional Children*** https://ec.ncpublicschools.gov/disability-resources/intellectual-disabilities/secondary-transitions
- ***Affordable Colleges Online*** https://www.affordablecollegesonline.org/college-resource-center/resources-for-students-with-disabilities/

General Transition and Aging Out Resources

- ***Youth.gov*** https://youth.gov/youth-topics/transition-age-youth
- ***Women's and Children's Health – CYSHCN*** – NC Division of Public Health https://publichealth.nc.gov/wch/families/cyshcn.htm
- ***NC Council on Developmental Disabilities Transition Resources*** https://nccdd.org/welcome/a-z-resources-list/category/transition.html
- ***Got Transition*** https://ec.ncpublicschools.gov/disability-resources/intellectual-disabilities/secondary-transitions

TRANSITION ACTION CARE PLAN

Child's Youth's Name:_____ D.O.B._____ Patient#_____ Parents /guardians: _____

Primary Diagnosis:_____ Secondary Diagnosis:_____ Phone# _____

Main Concerns	Related Current Information	Current Plans/Interventions	Person(s) Responsible	Date – Initials	Review Date

Topics to Review	
Health Promotion	Post secondary plans
Health Condition Management	Work Plans
Health Insurance	Independent Living Issues
Functional Independence	Community Inclusion
	High School Goals/Plans

Does Your Child Need Extra Support?

If your child is diagnosed or you suspect your child has a developmental disability, mental health concern or substance abuse issue, there may be community-based services available to help your family. To determine if your child is eligible for services, you should contact your Local Management Entity (LME), **Vaya Health** on their confidential Access to Care Line at 1-800-849-6127.

If you do not qualify for these services, there may be services through your child's school, through the local Department of Public Health, or through other community agencies.

Below are the types of questions you should be ready to answer:

- *What was the reason you called today?*
- *Has your child ever been given a Mental Health, Developmental Disability or Substance Use diagnosis?*
- *Are you worried they may hurt themselves or someone else?*
  What's your child's name? Where do you live? Date of Birth
- *Does your child have Medicaid or private insurance? Are they uninsured?*

TIP: This is the time to be very honest about your child. Talk about a typical day with your child and their normal behavior, which may not be their best day. Your response will help determine the type of need your child and family has right now.

To Get Help

Call: **VAYA Health Access to Care Line ----------1-800-849-6127**
Toll free 2 hours a day, 7 days a week
Hearing impaired? For NC Relay, dial 711.

This confidential toll-free number is available for people in crisis or seeking information about mental health (MH), substance use (SU), or intellectual/developmental disability (IDD)services in Western North Carolina.

* VAYA Health Member Privacy - You should be aware that information can be provided without your consent to help in treatment and care coordination, for healthcare operations such as payment, for emergency care and to law enforcement officers to comply with a court order. Special rules may apply if you have a legal guardian appointed, are a minor, are receiving treatment for substance use or are diagnosed with HIV/AIDS.

Additional Resources

Here are some other resources to use in an emergency:

National Suicide Hotline----------1-800-273-8255
RHA Health Services Mobile Crisis Management Crisis Line
Available 24/7, no fee.---------- 1-888-573-1006

Mental health

✚ CALL 911 or 988 if this is a medical or life-threatening emergency. ✚

If you need the police, ask for a Crisis Intervention Team (CIT officer). They have received extra training on handling these situations.

If this is NOT a medical or life-threatening emergency, Call United Way 2-1-1 to find resources near you.

Find help here:

Vaya Health Access Center
1- 800-849-6127
or for TTY - contact NC Relay at 711.

Available 24 hours a day, 7 days a week. Customer Service Specialists will assist you to find a crisis provider that is well-matched with your needs. If you already have a service provider, call them first. Providers who know you are usually best prepared to assist you in a crisis.

Need Support Now?

Call or text 988 or chat 988lifeline.org
National Suicide Prevention Lifeline
1-800-273-TALK (8255)
or chat at
SuicidePreventionLifeline.org

Have Support Come to You.
RHA Behavioral Health Services Mobile Crisis Line ---------- 1-888-573-1006
Crisis situations are often best resolved at home. Mobile Crisis Teams are available 24 hours a day and serve Henderson County, as well as most other counties in Western North Carolina. Professional counselors will speak with you and your family during a visit. They have an average response time of 2 hours.

Go To A Crisis Center.
Family Preservation Services (FPS) ---------- 1-828 697-4187 or 1-828- 697-2660
FPS offers an array of community, home, and school based services designed to respond to identified state and local needs. They provide trauma-specific approach to working with medical, behavioral and the social needs of an individual.

Additional Services for Child and Family Support

Respite Care

Care Haven is a short-term placement created to provide a safe and therapeutic environment for clients who are awaiting their next placement option or simply needing a break from the current living environment. In order to enter Care Haven, the client must be in the 6- 17 year old age range, have Vaya Medicaid coverage (unless paying out of pocket), and have a mental health diagnosis. For more information on how to arrange a virtual interview, please email carehaven@caringalternative.com; where you will be provided with an automated message that will walk you through the process. House Manager: **828-608-3408**

Brandi Nichole Family Enrichment Center 828-687-3776 Respite Care and Family Support

The Hope Center of Hendersonville is a day program for adults 18 years and older with intellectual and developmental disabilities. **828-692-0905**

We Rock the Spectrum

Inclusive kid's gym for children of all abilities that also offers Respite and break time care, and one-to-one attendant care, sensory safe gym, with therapy equipment, calming room and more. Located in South Asheville. 1-828-505-7556.https://www.werockthespectrumasheville.com/

Intellectual and Developmental Disability Services

Polk Vocational Services (PVS) – 82-894-3041

For over 50 years, PVS has been serving people with disabilities and other life barriers in Polk and surrounding counties. We are proud to be the largest manufacturing employer in Polk County. Empowered by our quality- focused manufacturing, PVS is able to provide meaningful employment and support services for people of all abilities. As we continue to grow, we're always looking for new people to join the PVS family, including those looking for meaningful employment as well as those who could benefit from our support services. Our support offerings include day, community, and residential services. We are located at 451 Industrial Park Drive, Columbus NC 28722.

The Arc of Buncombe County

The ARC exists to empower children & adults with intellectual and developmental disabilities to realize their highest potential through advocacy, education, programs, and family support. Located in Buncombe County but serves Henderson County families.

www.arcofbuncombecounty.org **1-828-253-1255**

Turning Point Services

Intellectual and Developmental Disability services offered, including - Innovations wavier services, State-funded services, vocational rehabilitation services, adult day programs and several residential services. **1-828-298-2100**

Substance Abuse, Mental Health, and Behavioral Health Services

Children and Family Resource Center

Parent-child Interaction Therapy (PCIT) is a short-term, evidence-based, therapy for young children (ages 2.5 to 7 years old) who have been experiencing disruptive, attentional, and/or oppositional behaviors. Multiple other family and support programs are also available.

https://www.childrenandfamily.org/

828-698-0674

Polk County Public Schools

Contact your child's principal, school social worker, counselor, or school nurse or Office of Student Services. North Carolina's procedure to locate all of the children with disabilities within our community is called Child Find. If your family are residents of Polk County or your child attends a private school within Polk County and you believe your child might have a need for services, please contact Toni Haley at 828-894-3051 or thaley@polkschools.org

For more information, please go to NCDPI's Exceptional Children's website:

http://ec.ncpublicschools.gov/policies/project-child-find

NAMI – National Alliance on Mental Illness

NAMI provides advocacy, education, support, and public awareness so that all individuals and families affected by mental illness can build better lives.

http://www.namiwnc.org/

1-828-505-7353

SAMHSA – Substance Abuse and Mental Health Services Administration

The Substance Abuse and Mental Health Services Administration (SAMHSA) leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

https://www.samhsa.gov/

1-877-SAMHSA-7 (4724)

Youth Villages

Provides support children and youth, ages birth -22, and their families, who face emotional, mental, and behavioral problems. The Asheville office services Buncombe, Haywood, Henderson, Madison, McDowell, Mitchell, Polk, Rutherford, Transylvania, and Yancey counties.

https://www.youthvillages.org/

1-828-250-3700

Appointments and Questions



Use this form to help you prepare for upcoming doctor visits and keep notes about the appointment.

Appointment Date & Time	Provider	Questions to Ask at Appointment
Referrals/Follow up tests		**Answers**

Appointment Date & Time	Provider	Questions to Ask at Appointment
Referrals/Follow up tests		**Answers**

Appointment Date & Time	Provider	Questions to Ask at Appointment
Referrals/Follow up tests		**Answers**

Public Programs / Financial Resources

Medicaid or NC Health Choice

Your county Division of Social Services (DSS) caseworker will help determine if your child is eligible for NC Medicaid or Health Choice.

You can also apply here: https://epass.nc.gov/

Henderson County Department of Social Services -------828-697-5500
Buncombe County Health & Human Services ---------- 828-250-5500
Polk County Department of Social Services---------- 828-894-2100

Supplemental Security Income (SSI) Benefits

Children under age 18 can get SSI if they meet Social Security's definition of disability for children and there are limited income and resources in the household.

When your child turns 18, Social Security will review their eligibility for continued SSI benefits based on disability rules for adults, including non-medical eligibility rules (income, resources, residency, citizenship, etc.). They will generally contact you within a year of turning age 18 for an age-18 redetermination.

Call Department of Social Security ----------1-800-772-1213

Food and Nutrition Assistance (EBT)

There are three ways to apply for **Food and Nutrition Service**s.

1. Apply online with ePASS
2. Apply in person at your local Department of Social Services (if you are disabled you may call for a phone interview)
3. Fill out a paper application and mail or drop it off at your county DSS.

Need further assistance?

Call:
Blue Ridge First in Families ----------336-955-7140
Offers support and related expenses or referrals that are not always covered through public assistance programs.

United Way NC 211 ---------- dial 2 1-1 or 1-888-892-1162 to obtain free and confidential information on health and human services and resources within their community

ecac
exceptional children's assistance center
Empowering Families · Improving Lives

North Carolina MEDICAID WAIVERS for People with Disabilities

What are Medicaid Waivers?

Medicaid waivers "waive" certain federal Medicaid requirements, such as family income requirements, to allow for people with qualifying disabilities to have access to specialized services and supports that are covered by Medicaid. They are designed to allow for people with disabilities to be safely cared for at home instead of a hospital or institution. You do not have to have Medicaid to be eligible for these waivers. Medicaid waivers do not transfer from state to state. North Carolina currently has four Medicaid waivers for people with disabilities.

Community Alternatives Program for Children (CAP/C)

This Medicaid waiver is for children aged birth through 20 years old who are considered medically fragile or complex and are determined to require a level of institutional care under the North Carolina Medicaid State Plan. Find more information on eligibility and services offered thought the CAP/C waiver here: Community Alternatives Program for Children (CAP/C) | NC Medicaid (ncdhhs.gov).

To apply for CAP/C, contact your local Case Management Agency. You can find your local Case Management Agency here: CAP-C Case Management Agency Directory. You can also apply by contacting Acentra Health at 833-522-5429 or by faxing a completed referral form to 833-470-0597. This waiver is available statewide. There is currently no waiting list for this waiver

Community Alternatives Program for Adults (CAP/DA)

This Medicaid waiver is for medically fragile or complex disabled adults age 18 and up who are determined to require a level of institutional care under the State Medicaid Plan. Find more information on eligibility and services offered though CAP/DA here: Community Alternatives Program for Disabled Adults (CAP/DA) | NC Medicaid (ncdhhs.gov)

To apply for CAP/DA, contact your local CAP/DA Case Management Agency. You can find your local CAP/DA Case Management Agency here: CAP-DA Case Management Agency Directory. You can also apply by contacting Acentra Health at 833-522-5429 or by faxing a completed referral form to 833-470-0597. This waiver is available statewide. Some counties have a waiting list for this waiver.

Innovations Waiver

This Medicaid waiver is for people of all ages who have an intellectual or developmental disability or a closely related condition. The person must also meet the requirements for Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID) level of care. This waiver provides services and support for people with intellectual or developmental disabilities so they can live at home instead

of in a residential facility. Find more information on eligibility and services offered through the Innovations Waiver here: NC Innovations Waiver | NC Medicaid (ncdhhs.gov).

To apply for the Innovations Waiver, contact your local Managed Care Organization (MCO), which you can find here: NC DHHS: LME/MCO Directory. This waiver is available statewide.

There is a waiting list for the Innovations Waiver. The wait list is called "The Registry of Unmet Needs". The waiting list varies by county. If financially eligible for Medicaid, the person with a disability may be eligible for some services while they are on the waiting list. These are called 1915i services, and can include services like respite care, Community Living and Supports and Supported Employment. You can access these services by contacting your Managed Care Organization (MCO). Read more about 1915(i) services here: NC Medicaid Obtains Approval of the 1915(i) State Plan Amendment | NC Medicaid (ncdhhs.gov).

Traumatic Brain Injury (TBI) Waiver

The NC Traumatic Brain Injury Waiver is for people aged 18 or older who sustained a traumatic brain injury on or after their 18th birthday. A traumatic brain injury (TBI) is an injury to the brain that is caused by an external physical force such as hitting your head or other types of blunt force trauma. This waiver is currently in a pilot stage, and is only available in the counties that are served by Alliance Health Services. These counties include Cumberland, Durham, Johnston, Orange, Wake and Mecklenburg. Find more information on the TBI Waiver here: https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-use-services/traumatic-brain-injury NC Medicaid is working on a plan to provide the TBI Waiver in all 100 NC counties.

Denials

If you or your loved one is found ineligible (denied) for a waiver, you have the right to appeal that decision. The information on how to appeal a denial should be included in the letter you received that informs you of the denial.

If you have questions about Medicaid waivers, please contact Christy Moore, NC Family to Family Health Information Center Program Lead at cmoore@ecacmail.org, call 1-800-962-6817, or fill out a web inquiry form here: Contact a Parent Educator - Exceptional Children's Assistance Center (ECAC) (ecac-parentcenter.org).

NC's Family to Family Health Information Center

ECAC is providing this fact sheet as a public service. Reference to any specific product or entity does not constitute an endorsement or recommendation by the ECAC. ECAC is not a legal services agency. We cannot and do not provide legal representation or advice, and information contained in this fact sheet should not be used or considered as such.

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ecac exceptional children's assistance center
Empowering Families★Improving Lives
907 Barra Row • Suite 103
Davidson, NC 28036
Office: 704- 892-1321
Fax: 704-892-5028
Help Line: 1-800-962-6817
Email: ecac@ecacmail.org
www.ecac-parentcenter.org

Scan this QR code with your cell phone's camera and click the link that appears to see the digital version of this document on our website.

LNG1127023

What You Should Know Before You Apply for Social Security Disability Benefits

We sent you this disability starter kit because you requested an appointment to file for disability benefits. The enclosed letter has the date, time, and location of your appointment.

The following are answers to questions most people ask about when applying for disability benefits. Knowing the answers to these questions will help you understand the process.

∗ What can I expect during the appointment?

A Social Security representative will interview you and complete an application for disability benefits and an Adult Disability Report. The interview will take place either in your local Social Security office or by telephone. It will take at least 1 hour.

∗ What can I do to speed up the process?

You can cut your interview time in half by starting the process online. You can complete online, BOTH the **application for benefits** and the **disability report** by going to:

www.socialsecurity.gov/applyfordisability.

You still need to **keep your scheduled appointment** with the local Social Security office, so a representative can review your information.

If you cannot do business with us online, you can complete the enclosed Medical and Job Worksheet and have it ready for your appointment.

You can also speed things up by bringing to your office appointment the information listed on the enclosed checklist. If you have an appointment by telephone, the representative may ask you to provide any required checklist items.

∗ How does Social Security decide if I am disabled?

By law, Social Security has a very strict definition of disability. To be found disabled:

- You must be unable to do any substantial work because of your medical condition(s); **and**
- Your medical condition(s) must have lasted, or be expected to last, at least 1 year, or be expected to result in your death.

∗ My doctor says I am disabled. Is that enough to qualify me for disability benefits?

No. You cannot get disability benefits solely because your doctor says you are disabled.

(over)

What You Should Know Before You Apply for Social Security Disability Benefits

∗ I am getting disability payments from my job or another agency. Can I automatically get Social Security disability benefits?

No. Social Security disability laws are different from most other programs. For example, Social Security does not pay benefits for partial disability.

∗ How long does it take to make a decision?

Generally, it takes about 3 to 5 months to get a decision. However, the exact time depends on how long it takes to get your medical records and any other evidence needed to make a decision.

∗ How does Social Security make the decision?

We send your application to a state agency that makes disability decisions. The state has medical and vocational experts who will contact your doctors and other places where you received treatment to get your medical records.

The state agency may send you forms to complete or ask you to have an examination or medical test. If the state does request an examination, **make sure you keep the appointment.** You will not have to pay for any examination or test you are sent for, by the state agency.

∗ If Social Security decides that I am disabled, what types of benefits can I receive?

Social Security pays disability benefits under two programs:

- Social Security Disability Insurance (SSDI) for insured workers, their disabled surviving spouses, and children (disabled before age 22) of disabled, retired, or deceased workers.
- Supplemental Security Income (SSI) for people with little or no income and resources.

∗ Will my personal information be kept safe?

Yes. Social Security protects the privacy of each individual we serve. As a Federal agency, we are required by the Privacy Act of 1974 (5 U.S.C. 522a) to protect the information we get from you.

∗ What if I am more comfortable speaking in a language other than English?

You are encouraged to bring a friend or relative to translate for you. We provide free interpreter services to help you conduct your Social Security business. However, we need advanced notice to make arrangements with the translator.

∗ Where can I get more information?

You can visit our website at ***www.socialsecurity.gov***, ask the interviewer during your appointment, or call us toll-free at **1-800-772-1213** (for the deaf or hard of hearing, call TTY 1-800-325-0778).

Prescription Assistance Programs

Many people have trouble affording their prescription medications, but there are assistance programs available.

Reduced rate on prescription medications

- The FamilyWize Program is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. Cards are distributed for free by NC 2-1-1, participating United Ways, community and faith-based organizations, county agencies, doctors, businesses, and some pharmacies. Cards are also available online. There is no income limit, age requirement, eligibility, or registration needed. Everyone is approved for the savings card. You can print your savings card, search for pharmacies in your area, and review discount prices online.
- The Community Assistance Program is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. There is no income limit, age requirement, eligibility, or registration needed. Everyone is approved for the savings card. You can print your savings card and search for pharmacies in your area online.
- The RxCut® Plus Program is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. There is no income limit, age requirement, eligibility, or registration needed. Everyone is approved for the savings card. You can print your savings card, search for pharmacies in your area, and download special coupons online.
- The NC Drug Card Program is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. There is no income limit, age requirement, eligibility, or registration needed. Everyone is approved for the savings card. You can print your savings card and search for pharmacies in your area online.
- The NeedyMeds Drug Discount Program is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. There is no income limit, age requirement, eligibility, or registration needed. Everyone is approved for the savings card. You can print your savings card and search for pharmacies in your area online.
- The Together Rx Access® Card Program is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. To be eligible, you cannot have Medicare or any other prescription drug coverage and

must meet income requirements. You can see if you are eligible and sign up for the program online.

- The Patient Advocate Foundation gives financial assistance for prescription medications. Assistance is only given for expenses related to certain diseases and people who have a physician-confirmed diagnosis. See the full list of diseases here. Patient must be currently insured and have income that is at or below 300% of the Federal Poverty Level. Call 866-512-3861 for more information.
- Many retailers participate in the $4 Generic Drug Program. Though many do not charge exactly $4 for their generic drugs (most range from $4 – $15), it is a common name for this type of program. These generic programs make it possible for people who are struggling to pay for their needed medications.The NC Division of Medical Assistance keeps a list of the most common medications and some retailers who offer low-cost generics. Find your prescription and retailer here. Please note that this list does NOT have all retailers who offer discount generic prescriptions. Call your pharmacy for more information and to see if they offer this program.
- The Partnership for Prescription Assistance helps people who are uninsured or underinsured access the medicines they need through the program that is right for them – free of charge. Many patients will get their medications for free or almost free.

Free prescription medications

- The Medication Assistance Program provides free prescription drugs to patients who cannot afford them. This service is offered through community clinics and community and faith-based organizations. The program matches patients with free medications available through pharmaceutical manufacturers.
- Free Pharmacy Program gives free prescription medication to individuals who are low-income, uninsured, and fall at or below 200% of the Federal Poverty Level. This program can help people get *lifesaving* prescription medication to treat common diseases, such as heart disease, diabetes and asthma. Different agencies oversee the program in different counties.
- Mobile Free Pharmacy Program provides low-income adults and children with free over-the-counter medicine, such as aspirin, children's cough syrup, allergy medicine, and vitamins. The pharmacy store is in Charlotte on a full-time basis, but the mobile pharmacy travels throughout the state.

For more info, go to
https://nc211.org/2020/06/26/prescriptions/

Community Alternatives Program Referral Process

A Medicaid Home- and Community-Based Service

The Community Alternatives Program (CAP) is a Medicaid Home- and Community-Based Services (HCBS) Waiver authorized under section 1915(c) of the Social Security Act and complies with 42 CFR § 440.180, Home- and Community-Based Waiver services. The Consumer Direction Lite program is a flexible service option created under Appendix K of the CAP waivers to mitigate risk to waiver participants by assuring necessary personal care service are available to meet assessed needs during the public health emergency.

WHO IS ELIGIBLE FOR CAP SERVICES?

Children from zero to 20 years of age who are medically fragile and have a reasonable indication of need for home- and community-based services to maintain their community placement are eligible for the Community Alternatives Program for Children (CAP/C).

Individuals 18 years of age and older who are physically disabled, meet a defined level of care and have a reasonable indication of need for home- and community-based services to maintain their community placement are eligible for the Community Alternatives Program for Disabled Adults (CAP/DA).

HOW TO MAKE A REFERRAL

Do one of the following:

- Contact a case management entity in your community.
- Discuss your interest in receiving CAP services with your doctor or a hospital representative.
- Contact the Social Worker at your nursing facility.
- Contact NC Medicaid Contact Center at 1888-245-0179 to request a referral.

HOW DOES THE REFERRAL PROCESS WORKS?

- A referral must be submitted with your name, date of birth and full street address.
- A Disclosure Letter is mailed to the address included in the referral within two business days of the referral's approval.
- Three forms are included with the disclosure letter that must be returned to NC Medicaid for review of eligibility for CAP services. These three forms are:
  a. Service Request Consent form
  b. Selection of Case Management form
  c. Physician's Worksheet

  Instructions are in the disclosure letter on how to return the three required forms.
- When the signed and dated consent form is received, the review of your medical condition begins in order to access medical fragility, if you applied for CAP/C or assessment of a defined level of care, if you applied for CAP/DA.
- If medical fragility or a defined level of care is determined, the selected case management entity will be notified to conduct a comprehensive assessment.
- The timeline to receive CAP services, if all requirements are met, can be up to 105 days.

Health Care Coverage

Children and youth with special health care needs (CYSHCN) require health care coverage that is universal and continuous, adequate, and affordable. However, there are major gaps in the current system of health care coverage and financing that cause significant problems for CYSHCN in accessing care and financial hardship for their families.

Young adults may remain on their parents' health insurance plans until age 26 when there is family coverage. In North Carolina, disabled dependent should be able to stay on their parents' plan beyond age 26. Be sure to discuss this with your insurance provider well before your child's 26th birthday to ensure eligibility.

North Carolina General Statutes § 58-51-25.
Policy coverage to continue as to children with an intellectual or physical disability; or dependent students on medically necessary leave of absence….. attainment of the limiting age shall not operate or terminate the coverage of the child while the child is and continues to be (i) incapable of self-sustaining employment by reason of an intellectual or physical disability; and (ii) chiefly dependent upon the policyholder or subscriber for support and maintenance. The proof of such incapacity and dependency shall be furnished to the insurer, hospital service plan corporation, or medical service plan corporation by the policyholder or subscriber within 31 days of the child's attainment of the limiting age and subsequently as may be required by the insurer or corporation, but not more frequently than annually after the child's attainment of the limiting age.

Additional Health Care Coverage Resources:

Polk County Department of Social Services ---------- 828-894-2100

www.Health Care.gov
https://www.healthcare.gov/people-with-disabilities/more-information/
If you have a special health care need, you have a number of options for health coverage in the Health Insurance Marketplace. Here, you can browse various health care plans available under the Affordable Care Act.

Health Savings Accounts
You may be able to set aside pre-tax dollars into an HSA through your employer. This account can be used for health-care expenses such as co-pays, and you may also be able to deduct health-care expenses on your taxes. Please see your employer regarding HSA. The IRS has information on medical tax deductions.

Innovations Waiver and Registry of Unmet Needs

The **N.C. Innovations Waiver** allows individuals with intellectual/ developmental disabilities to receive services and supports in their own community. This helps people live as independently as possible, rather than in an institution like a developmental center. Innovations is a home and community-based service.

Innovations is designed to promote independence, choice, community integration and the ability to realize life goals. It includes services that:

- Support you to live where you choose
- Support you to spend your day in a way that you choose
- Provide education on how to be more integrated into your community
- Teach and support you to live more independently and manage your own services, if you choose

Innovations supports daily activities such as bathing, eating, working, developing friendships, and living an active lifestyle within you. The program includes some non-medical services, like respite and home modification. These are not available under traditional Medicaid and may help keep people out of institutional settings.

The **Registry of Unmet Needs** is a first-come, first-serve list maintained by Vaya to keep track of people waiting for intellectual/developmental disability services in western North Carolina.

We strongly encourage parents of children who have an intellectual/developmental disability and may need Innovations Waiver services in the future to call us to add your child to the registry now. To learn more about Innovations or the Registry of Unmet Needs, call Vaya's Access to Care Line at **1-800-849-6127**.

Special Needs Legal and Financial Concerns

Are you asking yourself these questions?

- How will we pay for the special therapies our child needs now?
- Who will pay our child's expenses once he or she becomes an adult?
- Where will our child live and who will oversee his or her care after we are gone?

These questions and fears might stop you in your tracks. But financial planners say that creating a plan can ease anxiety. Some of the issues you need to confront are financial: How do you set aside money for your child without affecting his or her government benefits? And some are emotional: Who would understand your child's needs if something were to happen to you right now?

Need further assistance?

Pisgah Legal Services ---------- 1-800-489-66144

Henderson, Buncombe, Madison, Polk, Rutherford, Transylvania

PLS seeks to pursue justice by providing legal assistance and advocacy to help low-income people in Western North Carolina to meet their basic needs and improve their lives.

Special Needs Alliance ------ https://www.specialneedsalliance.org/

The mission of the SNA is to maintain a professional organization of attorneys skilled in the complex areas of public entitlements, estate, trust and tax planning, and legal issues involving individuals with physical and cognitive disabilities.

Disability Rights North Carolina ---------- 1-877-235-4210

DRNC is a legal advocacy agency that fights for the rights of people with disabilities in North Carolina. They handle cases involving discrimination, abuse and other rights violations. All services are at no cost to North Carolinians with disabilities.

Legal Aid of North Carolina ---------- 1-866-219-LANC (5262)

Legal Aid of North Carolina is a statewide, nonprofit law firm that provides free legal services in civil matters to low-income people in order to ensure equal access to justice and to remove legal barriers to economic opportunity.

Legal Health Issues Fact Sheet

Medical Power of Attorney

A Medical Power of Attorney is a document, signed by a competent adult; designating a person that she/he trusts to make health care decisions on their behalf should they become unable to make such decisions. We have provided a sample document in the Appendix for your review. Check the following websites for more information: www.legalhelpmate.com/power-of-attorney.aspx; www.expertlaw.com/library/estate_planning/power_of_attorney.html.

Health Insurance Portability and Accountability Act (HIPAA)

HIPAA is a federal law that covers both the privacy of your youth's medical information as well as issues related to the transfer and continuation of health insurance coverage. We have included a fact sheet in the Toolkit for your review. For more information check the US Department of Health and Human Services website at www.hhs.gov/ocr/hipaa.

Family Educational Rights and Privacy Act (FERPA)

FERPA is another federal law that deals with access to educational records, as well as health records held at educational institutions. Please review the fact sheet in the Appendix. A brochure for parents can be found on the US Department of Education website: www.ed.gov/policy/gen/guid/fpco/brochures/parents.pdf.

Guardianship

There are many factors to consider when deciding guardianship. A guardianship is the legal proceeding by which a capable adult (e.g. agent) can be appointed to manage the personal or financial affairs of an individual who is unable to do so on his or her own. As a parent, the best resource for obtaining more information is to visit the NC Guardianship Association at www.nc-guardian.org.

Adapted from: Carolina Health and Transition: Health Care Transition A Parent, Family and Caregiver's Guide. The North Carolina Division of Public Health Section, Children & Youth Branch, publication 2009

Medical Power of Attorney

Effective Upon Execution

I, [NAME], a resident of [ADDRESS. COUNTY,STATE]; Social Security Number [NUMBER] designate NAME], presently residing at [ADDRESS], telephone number [PHONE NUMBER] as my agent to make any and all health care decisions for me, except to the extent I state otherwise in this document. For the purposes of this document, "health care decision" means consent, refusal of consent, or withdrawal of consent to any care, treatment, service, or procedure to maintain, diagnose, or treat an individual's physical or mental condition. This medical power of attorney takes effect if I become unable to make my own health care decisions and this fact is certified in writing by my physician.

Limitations: [Describe any desired limitations, for example, concerning life support, life-prolonging care, treatment, services, and procedures.]

Inspection and Disclosure of Information Relating to My Physical or Mental Health: Subject to any limitations in this document, my agent has the power and authority to do all of the following:

1. Request, review, and receive any information, verbal or written, regarding my physical or mental health, including, but not limited to, medical and hospital records;

2. Execute on my behalf any releases or other documents that may be required in order to obtain this information;

3. Consent to the disclosure of this information.

Additional Powers: Where necessary to implement the health care decisions that my agent is authorized by this document to make, my agent has the power and authority to execute on my behalf all of the following:

1. Documents titled or purporting to be a "Refusal to Permit Treatment" and "Leaving Hospital Against Medical Advice";

2. Any necessary waiver or release from liability required by a hospital or physician.

Duration: This power of attorney exists indefinitely from its date of execution, unless I establish herein a shorter time or revoke the power of attorney. [***If applicable***: This power of attorney expires on [DATE]. If I am unable to make health care decisions for myself when this power of attorney expires, the authority I

have granted my agent shall continue to exist until such time as I become able to make health care decisions for myself.]

Alternative Agent: In the event that my designated agent becomes unable, unwilling, or ineligible to serve, I hereby designate [NAME], presently residing at [ADDRESS], telephone number [PHONE NUMBER] as my as my first alternate agent, and [NAME], presently residing at [ADDRESS], telephone number [PHONE NUMBER]as my as my second alternate agent.

Prior Designations Revoked: I revoke any prior Medical Power of Attorney.

Location of Documents: The original copy of this Medical Power of Attorney is located at [Location].

Signed copies of this Medical Power of Attorney have been filed with the following individuals and institutions: [Names and Addresses].

I sign my name to this Medical Power of attorney on the date of [DATE], at [ADDRESS, COUNTY, STATE].

_____

[NAME]

Statement of Witnesses

I hereby declare under penalty of perjury that the person who signed or acknowledged this document is personally known to me (or proved to me on the basis of convincing evidence) to be the principal, that the principal signed or acknowledged this durable medical power of attorney in my presence, that the principal appears to be of sound mind and under no duress, fraud, or undue influence. I am not the person appointed an agent by this document. I am not related to the principal by blood, marriage, or adoption. I would not be entitled to any portion of the principal's estate on the principal's death. I am not the attending physician of the principal or an employee of the attending physician. I have no claim against any portion of the principal's estate on the principal's death. Furthermore, if I am an employee of a health care facility in which the principal is a patient, I am not involved in providing direct patient care to the principal and am not an officer, director, partner, or business office employee of the health care facility or of any parent organization of the health care facility.

_____ _____

[WITNESS] [WITNESS]

Subscribed and sworn to before me on [DATE].

_____

Notary Public, [COUNTY, STATE]

My commission expires_____.

Additional Resources

Use this section to keep track of additional local and state resources.

- Alphabet Soup Acronym Index
- Helpful Websites
- Recreation
- Mental Health and Crisis Resources
- Calendars
- Diet Tracking
- Care Schedule
- Sign in Log
- Appointment Log

Add additional Resources as you go!

ALPHABET SOUP ACRONYM INDEX

The following index lists acronyms used by professionals who work with families.

ADA	Americans with Disabilities Act
ADD	Attention Deficit Disorder
ADHD	Attention Deficit Hyperactivity Disorder
AIDS	Acquired Immune Deficiency Syndrome
ARC	The ARC: Advocates for the Rights of Citizens with Developmental Disabilities and their Families
ARNP	Advanced Registered Nurse Practitioner
BIA	Bureau of Indian Affairs
BD	Behaviorally Disabled
CAP-C	Community Alternatives Program for Children
CAP-IDD	Community Alternatives Program for people with Intellectual and Developmental Disabilities
CD	Communication Disorders
CDC	Centers for Disease Control and Prevention
CDS	Communication Disorders Specialist
CDSA	Children's Development Services Agency
CFR	Code of Federal Regulations
CP	Cerebral Palsy
CPS	Child Protective Services
CSHCN	Children with Special Health Care Needs
DCFO	
DD	Children's and Families Services Offices
DMHDDSA	Developmentally Disabled
DHHS	Division of Mental Health/Developmental Disability/Substance Abuse
DSB	Department of Health and Human Services
DVRS	Division of Services for the Blind
ECAC	Division of Vocational Rehabilitation Services
ED	Exceptional Children's Assistance Center
EEG	Emotional Disability
EFMP	Electroencephalogram
EKG	Exceptional Family Member Program (helps military families locate to areas with services)
EPSDT	Electrocardiogram
FAPE	Early Periodic Screening, Diagnosis, and Treatment
FRC	Free Appropriate Public Education
HI	Family Resources Coordinator
HMO	Hearing Impaired
HO	Health Maintenance Organization
HoH	Healthy Opportunities
ICC	Hard of Hearing
IDD	Interagency Coordinating Council
IDEA	Intellectual Developmentally Disability
IEP	Individuals with Disabilities Education Act
IFSP	Individual Education Plan
	Individual Family Service Plan

HELPFUL WEBSITES

Local Resources

www.polkcollaborative.wixsite.com/polk Promotes public awareness, advocacy and the collaboration of agencies, families and the community. We strengthen services by addressing gaps and barriers for at-risk children and their families.

www.ecac-parentcenter.org/education/health.htm NC Family to Family Health Information Center (HIC): A state-wide resource providing health information and support to families with children who have special health care needs. Materials also available about transitioning from pediatric to adult health care.

http://www.missionchildrens.org/family-support-network.php Offering Parent-to-parent support, educational resources through workshops, family support groups, information packets, lending library, parent speaking panels, sibling workshops social events and much more. Serving Buncombe, Henderson, Madison and Transylvania Co.

www.FIRSTwnc.org A community benefit organization providing information, education, support and advocacy to persons with disabilities, their family and the community.

http://vayahealth.com/ Vaya Health is a regional organization that coordinates high quality prevention, treatment, and support services for individuals and families in our communities with developmental disabilities, mental health, or, substance abuse needs. Vaya Health is responsible for managing, coordinating, facilitating and monitoring the provision of mental health, developmental disabilities and substance abuse services in the catchment area they serve.

http://www.fifnc.org First In Families of North Carolina provide family support for families or individuals experiencing developmental disability or traumatic brain injury across NC. FIFNC Lifeline project could provide needed financial support to a family in need if the family meets the requirements for eligibility.

www.cabarrushealth.org/190/Resoruce-Cafe: Connections and Access for Families through Education. The Tools section was designed to help families better understand and access needed services.

Local Eye Doctors

COLUMBUS
Edney Eye Associates
69 Shuford Rd.
Columbus, NC 28722
(828) 894-3930
No Longer Accepts Medicaid
No Spanish Translation Available
Ages 7 & older

FOREST CITY
Morganton Eye Physicians
640 Oak St
Forest City, NC 28043
(828)245-5550
Forest City/Morganton-Age 4 and up
Shelby/Marion-Age 6 and up
Spanish Translation available
VSP and Medicaid(Some Types)

RUTHERFORDTON
Tri City Optometric
337 N Main St
Rutherfordton, NC 28139
828-288-8662
Accepts at Any Age
Spanish Speaking Staff Available
Medicaid: Only Regular, Healthy Blue and United Health Care

HENDERSONVILLE
My Eye Dr
1401 Haywood Rd
Hendersonville, NC 28792
(828)-693-5205
Accept at Any Age
VSP, No Longer Accepts Medicaid

Looking Glass Eye Center
215 Thompson Street
Hendersonville, NC 28792
(828) 693-4161
Accepts At Any Age
Spanish Speaking Staff Available
Medicaid-Does not accept Vaya

Hendersonville (Continued)
Asheville Eye Associates
2311 Asheville Highway
Hendersonville, NC 28791
Local Phone: (828) 233-2396
Toll Free: (800) 232-0420
Referral Fax # 828-210-2681
Spanish Speaking Staff Available
Accepts At Any Age
Medicaid (including Vaya)

Professional Eye Center
3450 Asheville Hwy
Hendersonville, NC 28791
828-692-2593
Spanish Speaking Staff
Starting at Age 5
Medicaid: Only Healthy Blue, AmeriaHealth, Regular, Well Care, United Health Care

Asheville
Asheville Eye Associates
8 Medical Park Drive
Asheville, NC 28803
Local: (828)258-1586
Toll Free: (800)232-0420
Referral Fax # 828-210-2681
Spanish SpeakingStaff Available
Accept Any Age Child
Medicaid-Any Form including Vaya

Asheville Vision & Wellness
559 Long Shoals Rd.
Arden, NC 28704
(828)747-9260
Starting Age 3 and up
Spanish Speak Staff
No Medicaid Accepted

Statewide Resources

http://www.ncdhhs.gov/dma/medicaid/capchildren.htm Medicaid is a health insurance program for low-income individuals and families who cannot afford health care costs. Medicaid serves low-income parents, children, seniors, and people with disabilities. The Community Alternatives Program for Children (CAP/C - also known as the Katie Beckett waiver) provides home and community based services to medically fragile children who, because of their medical needs, are at risk for institutionalization in a nursing home.

http://www.dpi.state.nc.us/ec Exceptional Children Division assures that students with disabilities develop mentally, physically, emotionally, and vocationally through the provision of an appropriate individualized education in the least restrictive environment. Their website contains helpful parent resources, procedural safeguards, and parent rights handouts for download.

http://www.ncei.org/ei/itp/cdsa.html Children's Developmental Service Agency provides early intervention services to eligible children from birth to age three and their families.

http://www.ncdhhs.gov/dph/wch/families/helplines.htm NC Department of Health and Human Services: Children with Special Health Care Needs Helpline – for those living with, care for and concerned about a child with special health care needs. Information about potential health care programs and funding resources in NC.

http://nccdd.org/ NCCDD has 40 members appointed by the Governor of which 60 percent are required to be people with intellectual or other developmental disabilities (I/DD) or family members. Others members include state legislators, top state agency officials and representatives of Local Management Entities/Managed Care Organizations (LME/MCO) and service providers. The Council meets quarterly and oversees both the provisions of the Developmental Disabilities Assistance and Bill of Rights Act (DD Act) and to assure the Council is a member-driven, effective, efficient organization. The NCCDD works on behalf of over 185,000 people with I/DD living in NC. The work of the Council is directed to help communities become more inclusive of people with I/DD and their families.

National Resources

http://www.aap.org/ American Academy of Pediatrics

www.HealthyTransitionsNY.org For youth with developmental disabilities ages 14-25, family caregivers, service coordinators, and health care providers. It teaches skills and provides tools for care coordination, keeping a health summary, and setting priorities during the transition process. It features video vignettes that demonstrate health transition skills and interactive tools that foster self determination and collaboration.

http://www.medicalhomeinfo.org/ Provides resources for health professionals, families, and everyone interested in creating a family-centered medical home for all children and youth.

www.growthcharts.com Height and Weight Charts for Children with Down Syndrome

Other versions of care notebooks and helpful forms can be downloaded at:
www.cshcn.org Information on care notebooks & emergency preparedness
http://www.aap.org/
hrtw.org
www.FullLifeAhead.org
specialchildren.about.com/od/medicalissues/qt/notebook.htm

Recreation

⇨ **Special Needs Baseball**

https://www.facebook.com/WNCSpecialNeedsSports/

⇨ **Special Olympics – Polk County**

http://sonc.net/local-programs/polk-county/

Facebook.com/Sprecial-Olympics-NC-Polk-County-1266500571678600 7/

(828) 817-4404

⇨ **Summer Camps**

★ Check with your local school system in late Spring for the most updated Special Needs Summer Camp directory.

Camp Tekoa Special Needs Camps
https://camptekoa.org/camps/special-needs

Talisman Camps – Summer camps for kids with Aspergers, Autism, and ADHD https://talismancamps.com/

⇨ **TRACK Trails**

Self-guided network of family-friendly outdoor adventures with trails located across the US, including many in WNC. Many are accessible for children of all abilities.
https://www.kidsinparks.com/

⇨ **YMCA** – multiple youth programs and summer camp options

www.spartanburgymca.org/branch/polk/-county

MAKE-A-CALENDAR FORM Month___Year ____

SUNDAY	**MONDAY**	**TUESDAY**	**WEDNESDAY**	**THURSDAY**	**FRIDAY**	**SATURDAY**

DIET TRACKING FORM

DATE	**SUNDAY**	**MONDAY**	**TUESDAY**	**WEDNESDAY**	**THURSDAY**	**FRIDAY**	**SATURDAY**
Tube Feeding							
Breakfast							
Lunch							
Dinner							
Snacks							
Notes							