Making Transitions Work For You

By Deborah Richards, Regional Manager, Connecticut Birth to Three System

Professionals involved in supporting children with special needs and their families have a vocabulary all their own. We have terms for everything, including things that are normal, everyday events. One of the terms that you may have heard about is "transition." We use transition when we talk about changes in the way services are delivered or in the person delivering them. For example, when your child turns three he or she no longer receives services from the Birth to Three System and may receive services from your local school district. If your child is in a preschool program, he or she may move into a kindergarten program at your local elementary school. These "transitions" are a normal and predictable part of life.

In writing this article I have reflected on some of my own experiences as a parent. My children are in high school and college, so I can assure you that we have been through many transitions. It has always helped me to think about the normal transitions that all families encounter as they grow. These transitions occur in relationships, jobs, homes, family members and services. All of you have experienced the transition from a hospital or birthing center to home with a new family member. Many of you have experienced the transition into an early care support system as you returned to work. You all have experienced the transition into a system to support your child’s development.

The following are some things a family can do to prepare for transition:

Start Early. Transitions are easier when we plan them. There will always be some unknowns, and we can count on something unpredictable happening. However, the earlier you start the transition process, the more you will feel in control.

Learn the rules. Many transitions have rules. Some of the rules for transitions are described in articles in this newsletter. It is always helpful to learn about the rules of the system you are entering. This will make it easier for you to navigate the system.

Be open. Enter the transition willing to learn new information and to be flexible enough to change.

Clarify your expectations. It is difficult to know if a transition is successful if you don’t know what you expect from the transition. Talk about your expectations.

Establish priorities. When you are planning a transition, think about which points are negotiable to you and which are non-negotiable. The world is not a perfect place, nor are our service delivery systems. Reflect on what is most important to you.

Communicate. When planning a transition do not assume that everyone shares your values or priorities. This includes your closest family members as well as professionals. Communicate with those closest to you so that everyone agrees on what is best for your child.

As a veteran “transitioner” I have learned these tips that have helped me:

• Transitions are a normal part of life and occur frequently. They involve change and change is difficult, but healthy.
• When you are raising children there are
Cómo hacer que las transiciones sean positivas

Por Deborah Richards, Gerente Regional, Sistema para Infantes a Tres Años de Connecticut

Los profesionales vinculados a la atención de niños con necesidades especiales y a sus familias tenemos un vocabulario propio. Tenemos palabras para todo, hasta para cosas que son normales y cotidianas. Una de las voces que usted puede haber escuchado es transición o tránsito. Usamos esta palabra para referirnos al paso de un tipo de servicio a otro o a un cambio de persona o entidad que lo presta. Por ejemplo, al cumplir tres años su hijo deja de recibir servicios del Sistema para Infantes a Tres Años y puede comenzar a recibirlos de su distrito escolar local. Si su hijo está en un programa preescolar, puede pasar a uno de kindergarden en su escuela elemental local. Estos tránsitos son parte normal y previsible de la vida.

Al escribir este artículo he reflexionado sobre algunas de mis propias experiencias como madre. Ya mis hijos están en la escuela superior y en la universidad, así que puedo asegurar que hemos pasado por muchas transiciones. Siempre me ha ayudado el meditar en las que son normales en toda familia. Ocurren en las relaciones con otros, en el trabajo, el hogar, la familia, los servicios que se utilizan. Todas ustedes han pasado por el tránsito del hospital o lugar del nacimiento al hogar, con un miembro más en la familia. Muchas de ustedes, al reincorporarse al trabajo, han pasado por la transición a un sistema de cuidado de niños de tierna edad. Ustedes todas han experimentado la transición a un sistema de apoyo al desarrollo de su hijo.

Las siguientes son algunas de las cosas que la familia puede hacer para prepararse para cualquier transición: Comenzar temprano. Las transiciones resultan más fáciles si uno las planea. Siempre habrá algo desconocido y surgirá algo imprevisible. Pero mientras más temprano comencemos el proceso de transición, mejor sentiremos que podemos dominar la situación.

Aprender las reglas. Hay reglas para muchas de las transiciones. Algunas están descritas en artículos de este boletín. Siempre ayuda entenderse de las aplicables al sistema al que se está ingersando. Hace más fácil 'navegar' en el sistema.

Tener amplitud de ideas. Se debe comenzar la transición con la disposición a aprender cosas nuevas y con suficiente flexibilidad para realizar y tolerar cambios.

Tener expectativas claras. Es difícil calificar una transición de satisfactoria si no se sabe de antemano qué esperar. Discutamos las expectativas.

Establecer prioridades. Al planificar una transición uno debe pensar qué puntos son negociables y cuáles no. Ni el mundo es perfecto ni lo son nuestros sistemas de prestación de servicios. Hay que reflexionar sobre qué es de máxima importancia para uno.

Comunicarse. Al planificar una transición no se debe suponer que todo el mundo comparte los valores o prioridades de uno. Esto incluye tanto a los miembros de la familia más cercanos como a los profesionales. Se debe cambi- ar impresiones con las personas más allegadas para llegar a un acuerdo sobre lo que es mejor para el hijo.

Como ‘veterana de tránsitos’ he desarrollado estas ideas que me han ayudado:

• Las transiciones son parte normal de la vida y ocurren con frecuencia. Implican cambio y el cambio es difícil pero saludable.

• Cuando uno está criando un hijo con necesidades especiales, las dudas e interrogaciones tienden a ser más numerosas. Es misión de los padres buscar respuestas para esas interrogaciones en cuanto sea posible, pero sin volverse locos con preguntas que nadie puede contestar. Siempre he admirado a los profesionales que son sinceros cuando no tienen respuestas para mis preguntas pero están dispuestos a buscarlas. Recuerde cada uno de ustedes que tiene un niño que es único, singular. Las respuestas para su hijo probablemente no son las mismas que las respuestas para otros niños.
Las transiciones a menudo implican comparaciones. En las evaluaciones su hijo es comparado con otros de su misma edad. Al discutir su colocación en un aula escolar, se le compara con niños en otras clases o en otra escuela. Al discutir su colocación en un aula escolar, se le compara con niños de su misma edad. Al discutir su colocación en un aula escolar, se le compara con niños de su misma edad. Al discutir su colocación en un aula escolar, se le compara con niños de su misma edad. Al discutir su colocación en un aula escolar, se le compara con niños de su misma edad.

BIRTH TO THREE AND PRESCHOOL SPECIAL EDUCATION UPDATE

By Linda Goodman, (860) 418-6147 and Maria Synodi, (860) 807-2054

For a change, we’re writing this update together since this edition of the newsletter is on the topic of “transition.” Transition is the time when a child and his family leave the Birth to Three System either at or before the age of three and enter preschool special education in their school district or other community programs for preschool-aged children. The goal for both the Birth to Three System and Preschool Special Education is to ensure that all children and their families experience a smooth and effective transition.

Transition was one of the major focus areas for the Birth to Three System and the Connecticut State Department of Education in the state’s self-assessment of early intervention and special education under the federal Individuals with Disabilities Education Act. The state’s self-assessment was completed on December 22 and was submitted to the U.S. Department of Education. Personnel from the Birth to Three System and the Connecticut Department of Education staffed the committee that focused on transition. The committee’s task was to review the state’s efforts regarding transition. Members of the committee reviewed over 40 pieces of data and other materials to identify the state’s strengths and areas needing improvement.

Data and additional information for the self-assessment were also collected from a number of public forums that were held throughout the state for parents and professionals. There were five key questions that were asked to help collect information from the public. One of the key questions was on transition. The question was, “By the child’s third birthday, does transition planning result in the timely provision of needed supports and services to a child and a child’s family?” The participants at the forums provided feedback on this question and all comments were documented to help identify the transition activities that work as well as the transition activities that need improvement. Additional methods for collecting information from the public across the state included a parent survey distributed by the Connecticut Parent Advocacy Center and written comments submitted via letter or e-mail to either the Birth to Three System or the State Department of Education.

We want to thank all of the families and professionals who participated in the state’s self-assessment by participating on the committee, attending any of the public forums, sending written comments, and/or by completing the parent survey that was distributed by the Connecticut Parent Advocacy Center. As a result of all of the information received and reviewed, the committee for the self-assessment found that overall the state is in compliance with the requirements of federal and state law in the area of transition. There were also a number of areas that needed improvement. Recommendations from the committee to improve transitions for children and families included collecting better data about children who leave the Birth to Three System, getting better information about how the transition takes place at the local level, and getting systematic information about parent satisfaction with the transition process. The state’s self-assessment that was submitted to the U.S. Department of Education is available on the Birth to Three web site, www.birth23.org, and the Connecticut State Department of Education’s web site www.state.ct.us/sde/

The next major activity for the Birth to Three System and Preschool Special Education is the development and dissemination of a guidelines document on transition for Birth to Three and school district personnel. This comes as a result of the self-assessment as well as the need to ensure that all personnel have up-to-date information to ensure that children and their families experience a smooth transition. A task force to develop these guidelines is in place. The task force would appreciate any information regarding promising practices. Anyone who has information to share about current practices that are working well for families or parents who have had positive experiences that they would like to share can contact Maria Synodi at (860) 807-2054 or maria.synodi@po.state.ct.us, or Lynn Johnson at (203) 294-5170 or lynn.s.johnson@po.state.ct.us

Activities focused on the transition process do occur throughout the state, often as a partnership between Birth to Three...
and school district personnel. As a family member, one of the best ways to learn more about the transition process and have the opportunity to speak with other families is to attend any of the transition forums offered periodically by local interagency coordinating councils (LICCs). Please see the list of local interagency councils and contacts below.

Another resource is a videotape about transition from the Birth to Three System. There is a transition video for families that is in English, Spanish and closed caption. There is also a transition video for Birth to Three and school district personnel. The family video on transition is available from your child’s service coordinator, along with a companion guide-book for families.

The activities we have undertaken to date underscore our commitment to ensure that children and their families have a positive transition experience. We will continue to work together and communicate with families and professionals to produce information and materials to support the process of transition.

LICC Update

LOCAL COUNCILS HELP BRIDGE TRANSITIONS
By Eileen McMurrer-Kaminer
LICC Liaison and Birth to Three Coordinator, (860) 418-6134

Do you want to know what “life after Birth to Three” is like? Talk with experienced parents, providers, school personnel and other community folks from Connecticut’s Local Interagency Coordinating Councils (LICCs). These groups work to make the shift from Birth to Three services to other community activities easier in a variety of ways.

Check in with one of the contact people listed below to learn if they have a Transition Forum coming up in the near future. LICC events are open to everyone, even if you do not live in that part of Connecticut.

Ask for the names of other LICC parents who have agreed to speak with local families about their transition experiences. LICCs also have information on parent support groups that they are happy to share.

Get suggestions of community resources and activities in your area that your child and family might enjoy.

If you are already one of the “experienced parents” who have moved on from Birth to Three, your LICC needs your input and support. Join them for a meeting, or call to find out how your life experiences can help others.

Look for announcements of LICC activities and events in this newsletter and on the web at www.birth23.org. LICCs provide all kinds of fun and educational opportunities for families and community partners. Find out more about your Local ICC. Call the person in your area for more information about joining.

Bridgeport
Elizabeth MacKenzie (203) 365-8835

Danbury
Muriel Hoczela (203) 775-5606
Ruth Cantor (203) 743-3933

Greater Hartford
Elaine Cannon (860) 722-8900

Brenda Sullivan (860) 657-4361
Lower Fairfield
Loll Ross (203) 531-1880 x 132

Lower Naugatuck Valley
Dianne Guillett (203) 924-9548
Peg Marlowe (203) 924-9548
Ellen Steinbrick (203) 881-0129

Meriden
Stephanie Kelsey-Reynolds (203) 237-1448
Wendy Forniciari (203) 237-1498
Tanya Cooper (203) 630-3399

Middlesex County
Lisa Wernasz (860) 344-6717
Cindy Cohen (860) 344-8014

New Haven
Andrea Higgins (203) 469-7140
Jeanne MacDonald (203) 484-1230

Northeast
Cheryl Deary (860) 974-2087
Beth Thompson (860) 870-5601

Suffield/Enfield
Karen Boscarno (860) 668-3039

Southeast
Diane Viets (860) 859-5528
Julie Rowe (203) 318-3692

Torrington
Patty Wescott (203) 596-8809
Jackey Alongi (860) 482-3236

Waterbury
Joy Liebeskind (203) 272-9058
Donna Notti (203) 272-9108

“WALKAMERICA” is Off and Running!

Sunday, April 29 in 13 Connecticut Communities

For more information, call the March of Dimes office at (800) 446-9255 in CT or (860) 290-5440.
Children with Special Health Care Needs and HUSKY Plus Physical Programs

By Ann Gionet, Connecticut Department of Public Health, Children with Special Health Care Needs Program, (860) 509-8074

The Children with Special Health Care Needs (CSHCN) and Health Insurance for Uninsured Kids and Youth (HUSKY) Plus Physical Programs provide specialty care services to Connecticut children who are at elevated risk for chronic physical, developmental, behavioral or emotional conditions. Children in these programs require health and related services (not educational or recreational) of a type and amount not usually required by children of the same age.

Services include, but are not limited to, child and family needs assessment, care coordination, specialty care doctor’s visits and testing, family advocacy, adaptive and specialty equipment, therapies (physical, occupational and speech), and medical/surgical supplies.

Medical and financial eligibility requirements must be met in order to enroll in the CSHCN or HUSKY Plus Physical programs. Family income guidelines change annually. For the year 2000, a family of four could earn up to $51,150 per year or $4,263 per month.

Families may not have to change their current health care providers, and often can continue to use service providers in their community. Staff at the two centers will work closely with your primary care provider and your health plan.

For more information contact the CSHCN and HUSKY Plus Centers at:

Connecticut Children’s Medical Center
Phone: (860) 545-9230
Toll-free: (877) 743-5516

Yale-New Haven Hospital
Phone: (203) 737-5462
Toll-free: (888) 842-1937

Birth to Three Revisions to the Federal Application

As required annually, the Birth to Three System is revising its application to the federal Department of Education. Anyone wishing to review these changes may view the document on the Birth to Three website: birth23.org or may request a copy from their program or regional Birth to Three office.

Anyone wishing to comment may attend public hearings scheduled for Thursday, March 15, 9:00 a.m. - 11:00 a.m. and 4:00 p.m. - 6:00 p.m. at DMR Central Office, 460 Capitol Ave., Hartford, CT 06106. Comments may also be mailed, e-mailed or faxed to:

Linda Goodman, Director
Connecticut Birth To Three System
State of Connecticut Department of Mental Retardation
Phone: (860) 418-6147
Fax: (860) 418-6003
E-mail: linda.goodman@po.state.ct.us
Web site: http://www.birth23.org

Advice from Four-Year-Olds about Starting at a New School:

Try it out! Don't be scared.

Go outside. Get candy.

And finally... Go back home!

Aimee DeMaio... who teaches a first/second grade class in Vermont, asked her seven- and eight-year-olds, “What advice would you give someone going through a transition?”

Here are the answers she got:

It’s all right. You won't die. – JH
It’s OK; it’s not the end of the world. – LR
I’ll be your friend. – RN
Will you be my friend? – KM
Be a good helper. – RN
Don’t cry. It’s all right. – MJ
C’mon, be happy. You don’t have to be sad all the time. – CE
Don’t be upset. Just be happy. – AS
Don’t be shy. Be happy. – JH
Think about happy things. – DP
Don’t be afraid. – LR
Go with the flow. – MJ
Why don’t you just learn how to swim? – KM
NOURISHMENT FROM ALPHABET SOUP

By Andrea Higgins

From IDEA to IFSPs to OTs and PTs, our introduction to the Birth to Three System at first seemed like an indecipherable bowl of alphabet soup. But those terms, we soon realized, are the building blocks for the essential educational nourishment that our son Andrew, who has Down Syndrome, thrives on. We realized all of these terms were as easy to understand as say, PB&J or NBA.

Another wave of acronym overload set in, however, as we began thinking about our son’s transition into the public school system, which happens when he turns three. This time it was PPTs and IEPs, so I started attending transition meetings given by the Greater New Haven Birth to Six Collaborative (an LICC) when Andy was just one. As our confidence grew, we learned what it takes to be good advocates for Andy, now 22 months old.

Thanks to stories from parents, such as West Haven mom Pamela Bradley, our anxiety level about going from our home and family-based program into a large educational system has been greatly reduced. Pam and Kevin Bradley’s son Patrick turned four on December 9, and is a chatterbox who speaks in complete sentences and insists on getting his point across. It is a great relief to the couple, whose active little boy had no speech at age two, and hardly spoke in complete words by age two and a half. They have a nine-year-old daughter, Margaret, and they knew Patrick should have been talking. Despite reassurances from his pediatrician, the Bradleys had Patrick’s hearing checked. “His ears were fine. So we then contacted Birth to Three and got involved with the Easter Seal Rehabilitation Center of Central, CT,” Pam said. “It was the best thing we ever did.”

A speech therapist and a teacher came to the house to work with him on the speech delay, which improved his communication skills greatly. But Patrick was almost three, the age of transition, and the concerned parents had to prepare for entry into the school system. Pam was relieved to learn that Patrick’s teacher from Easter Seals would be accompanying her to the PPT (Planning and Placement Team) meeting at the school.

It is the PPT that determines the child’s IEP (Individual Education Plan) on which all of Patrick’s education would be based. “I felt intimidated when I went to the first PPT meeting, where 10 people, including teachers, a nurse and a psychologist from the school were present,” Pam said. “I wouldn’t have known what to ask for and what to expect without her,” Pam said. “I was a little nervous because I was concerned about the degree of services they would give him.”

She said the PPT tailored the IEP to the teacher’s recommendations, even adding more speech therapy than originally proposed. The plan placed Patrick in a pre-Kindergarten class, with a mix of children with and without disabilities. Patrick attended four days a week for two-and-a-half hours a day. Now in his second year, Patrick attends the class five days a week.

“I feel very fortunate that I got involved with Birth to Three when I did. He had very limited speech when he went into school. He said about 20 words, but just the beginnings, no endings. Now he
Anna's Transition

By Mary Engelbrecht

Change has always been difficult for me. However, I have learned that as a parent it is even more difficult when a child is experiencing a transition.

My daughter, Anna, was born with Down Syndrome. She began receiving services from Birth to Three when she was three weeks old. Throughout the first three years of her life our family developed solid relationships with her teacher, physical therapist and occupational therapists. There was an established level of comfort that had grown over the years. I had come to rely on the support and advice of the therapists.

As Anna's third birthday approached, talk of the upcoming transition into the school system increased. The most challenging part was probably the fear of the unknown. There were a multitude of issues to deal with, one of the most strenuous being the search for new daycare. I needed to find daycare in our hometown so that the school could transport Anna to and from preschool. It took several months to resolve this issue.

I began to feel better after the first meeting with school personnel. Anna's preschool teacher seemed to be very caring and experienced. After the meeting I felt that the transition would be good for Anna. She would benefit from the structure of a daily program.

Anna began preschool in September 2000. I will never forget the first day of school. As the van pulled up to drop her off she was crying uncontrollably. It took me almost an hour to calm her down. I began to think that maybe she was too young to be going to school. After all, most children do not begin formal school until the age of five.

Open communication between and among parents, the Birth to Three program, and/or other service providers, and the public school staff is vital to the success of the child, and is essential before, during and after the child's transition. The administrator plays an important role in encouraging and facilitating such communication.

Parents should have the opportunity to observe possible placements for their child. The administrator can arrange a visit so that the parents have an opportunity to meet the teachers, to see the physical environment, to ask their questions and to get a feel for the class. The tour of the school welcomes the family and is pivotal in allaying the concerns of parents and in establishing a strong home-school relationship. Furthermore, when the PPT is held, parents are not faced with a host of strangers, but instead feel surrounded by supporters.

During the PPT meeting, administrators record the decisions of the planning and placement team. They detail special education and related services for which the child is eligible and note how those services will be delivered. The knowledge and expertise of all providers are essential contributing factors to the child's success. Further, the involvement of parents as key partners during the transitional periods and throughout the child's school career is also crucial. Parents must be viewed as important and valued members of a team that works together for the benefit of their children.

As the child exits the Integrated Special Needs Preschool Program in the local public school system by their parents, a Birth to Three Program or other service provider. Upon referral, a Planning and Placement Team (PPT) meeting should convene to discuss the child's needs and determine his or her eligibility for services. The public school administrator, usually the school principal, has a variety of roles in this transition process, from information gatherer and disseminator to "welcome wagon" person.
The feature article is translated into Spanish on page 2.
Ver la versión española del artículo principal en la página 2.