State of New Hampshire Bureau for Family Centered Services

Family Centered Early Supports & Services Where Are We Going Next?





Learning Outcomes

1. Who and what is FCESS?

What do we do?

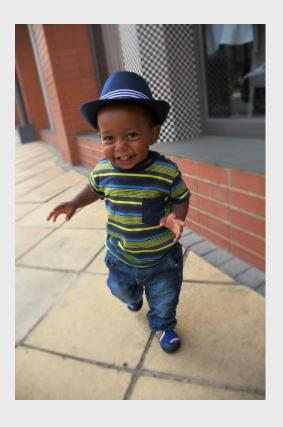
How do you refer a child?

What types of services are FCESS?

How can you describe it to families?

3. What is the "Coaching Model"?

What does that mean for families?





What is Family Centered Early Supports & Services?





What is Family Centered Early Supports & Services

Family Centered Early Supports and Services (FCESS) is NH's Early Intervention System under Part C of the Individuals with Disabilities Education Act of 2004 (IDEA).

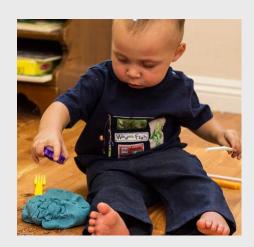
We serve children birth up to age three who have a developmental delay, an established condition or are at substantial risk for a developmental delay.

The purpose of FCESS is to *support families* to help their children grow and develop, as well as helping them achieve their goals for both child and family.



What is Family Centered Early Supports and Services?

- Developmental
- Frequency varies by child's need
- Voluntary
- "No cost" to families
- Monthly service coordination
- Provided in the child's natural environment
- Transdisciplinary





What is transdisciplinary?

Transdisciplinary models of practice aim to provide more family-centered, coordinated, and integrated services to meet the complex needs of children with disabilities and their families (Carpenter, 2005).

- The transdisciplinary approach has been recognized as a **best practice** for early intervention. (Bruder, 2000; Guralnick, 2001)
- The transdisciplinary approach is considered to reduce fragmentation in services, reduce the likelihood of conflicting and confusing reports and communications with families, and <u>enhance</u> <u>service coordination</u> (Carpenter, 2005; Davies, 2007).

King, Gillian PhD; Strachan, Deborah MRC; Tucker, Michelle MCISc(OT); Duwyn, Betty BSc(PT); Desserud, Sharon BSc(PT); Shillington, Monique BScN(RN). The Application of a Transdisciplinary Model for Early Intervention Services. Infants & Young Children: July 2009 - Volume 22 - Issue 3 - p 211-223



Who provides FCESS?

FCESS is a transdisciplinary service model and includes a wide range of provider to support families in their changing needs. Program staff could include:

- Special Educators
- Early Childhood Educators
- Speech Therapists
- Occupational Therapists
- Physical Therapists
- Infant Mental Health Specialists
- Early Intervention Specialists
- Social Workers
- Paraprofessionals
- Speech, Occupational and Physical Therapy Assistants
- And more!





Who is eligible for FCESS?

There are 4 categories of eligibility:

- 1. **Developmental Delay** a child is demonstrating a 33% delay (or more) in at least one area of development (cognitive, communication, physical, social/emotional or adaptive)
- 2. **Established Condition** a child is diagnosed with a physical or mental condition that has a high probability of resulting in a developmental delay (even if no delay exists at the time of referral)
- 3. Atypical Behavior (including extreme behavioral patterns or persistent failure to respond to social situations)
- 4. "At Risk" for Substantial Developmental Delay



What is "At Risk"?

We are 1 of only 7 states who include children at risk of developing a developmental delay in their early intervention system.

A child and family must have 5 conditions, events or circumstances including*:

- Very low birth weight or gestational age below 27 weeks
- History of abuse or neglect
- Prenatal drug or alcohol exposure
- Homelessness
- Parent(s) with documented developmental delay or psychiatric disorder
- Parent's education below 10th grade
- Teen parents
- Parent/child interactional disturbance

*See eligibility criteria handout for full list of indicators



Who refers a child?



SHOULD YOU BE MAKING REFERRALS?



Who makes a referral?

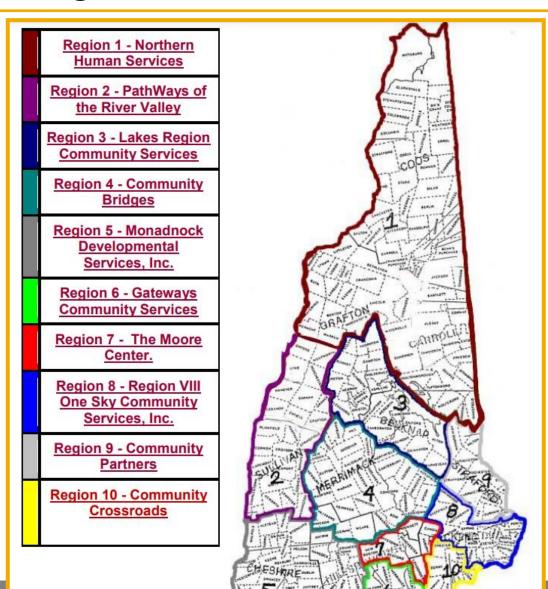
<u>Anyone</u> who is concerned about an infant or toddler's development, including a parent, can make a referral to FCESS.

Our services are provided locally by area agencies and/or vendor programs. To make a referral, simply **call, fax** or **email** the local agency to initiate the referral and schedule an intake.

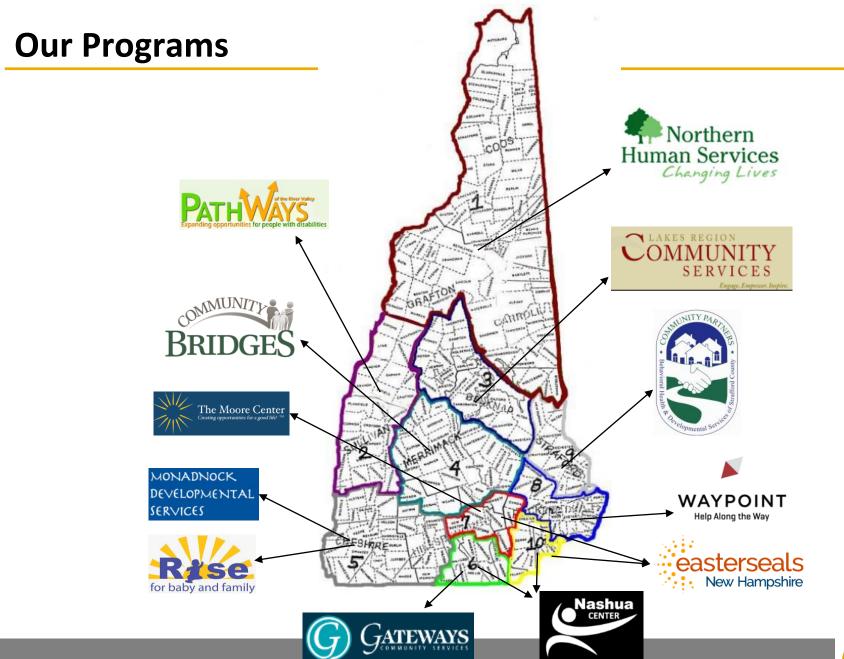




Our 10 Area Agencies – Where to call to make a referral









	Program Director	Intake Contact			
Region 1	Karen Willett	Cassie Rowe			
Northern Human Services	603-447-8047	603-447-8044			
Charging Lives	kwillett@northernhs.org	crowe@northernhs.org			
Region 2	Nicole Tenney	Courtney McAuliffe			
Dani A A Torre	603-504-1516	603-504-1518			
Expanding opportunities for people with disabilities	ntenney@pathwaysnh.org	cmcauliffe@pathwaysnh.org			
Region 3	Brenda Greene	Tylaine Guarriello			
COMMUNITY SERVICES	603-581-1559	603-581-1578			
SERVICES	Brenda.greene@lrcs.org	tylaine.guarriello@lrcs.org			
Region 4	Karen Lofgren	Sabrina Green			
COMMUNITY	603-226-3212 x278	603-226-3212 x250			
BRIDGES	klofgren@cbinnh.org	sgreen@cbinnh.org			
Region 5	Jason Peck	Billiejo Sweeney			
MONADNOCK DOSLONGOTAL	603-352-0165	603-352-1304 x267			
SURVICES	Jason@mds-nh.org	billiejo@mds-nh.org			
Region 5	Alicia Deaver	Billiejo Sweeney			
Rese	603-357-1395	603-352-1304 x267			
for baby and family	adeaver@riseforbabyandfamily.org	billiejo@mds-nh.org			
Region 6	Bryn Bustead	Rozanne Bernier			
(G) GATEWAYS	603-459-2778	603-459-2775			
Shaplett Hand	bbustead@gatewayscs.org	rbernier@gatewayscs.org			
Region 6	Maribeth Rathburn	Rozanne Bernier			
The Children's Pyramid	603-883-8205 x20	603-459-2775			
	mrathburn@nashuacenter.org	rbernier@gatewayscs.org			
Region 7	Amy Natale	Beth Warner			
The Moore Center	603-206-2802	603-206-2732			
7/1	amy.natale@moorecenter.org	Elizabeth.Warner@moorecenter.org			
Region 7	Heather Herod	Beth Warner			
easterseals New Hampshire Manchester	603-666-5982 x34	603-206-2732			
	Hherod@eastersealsnh.org	Elizabeth.Warner@moorecenter.org			
Region 8	Melissa Hugener	Skylar Hopper			
WAYBOINT	603-518-4212	603-436-6111 x147			
WAYPOINT Help Along the Way	HugenerM@waypointnh.org	s.hopper@oneskyservices.org			
Region 9	Jessica Lewis	Meghan Canon			
	603-516-9300	603-516-9300 x9380			
	jeslewis@communitypartnersnh.org	mcanon@communitypartnersnh.org			
Region 10	Pauline Boyce	Tammy Dudal			
easterseals colon	603-893-0984	603-893-1299 x326			
New Hampshire 3dleIII	pboyce@eastersealsnh.org	tdudal@communitycrossroadsnh.org			
Region 10	Maribeth Rathburn	Tammy Dudal			
The Children's Pyramid	603-883-8205 x20	603-893-1299 x326			
	mrathburn@nashuacenter.org	tdudal@communitycrossroadsnh.org			



Who has been making referrals?

Referral Source	SFY 19	SFY 20	SFY 21	SFY22
Childcare	39	27	15	30
DCYF	315	273	196	214
Early Headstart	19	23	9	16
ESS	40	29	13	11
Friend	2	4	4	1
Health & Human Services	9	21	27	31
Home Visiting Program	30	28	26	30
Hospital	289	242	215	210
Mental Health Center	0	2	1	0
Newborn Hearing Screening	2	0	1	0
NICU	18	27	25	22
Parent/Guardian/Self	868	619	506	647
Physician/PCP	1631	1470	1754	2107
Rehabilitation Facility	3	3	3	4
Relative (Other than Parent/Guardian)	14	11	4	9
School/Childfind	2	0	8	6
Soup Kitchen/Shelter	2	1	1	0
Special Medical Services	4	3	6	5
Town/City Welfare Department	0	0	0	1
Unknown	2	1	4	3
Watch Me Grow	0	2	0	0
(blank)	- 4	2	1	12
Total	3293	2788	2819	3359



Who has referred the families you serve? (SFY22)

ReferralSource	1	2	3	4	5	6	7	8	9	10
Childcare	7		1	2	5	3	5	4	3	
DCYF	41	2	14	23	25	20	42	11	28	8
Early Headstart	2		5	3					6	
ESS	2	1					3	4	1	
Friend						1				
Health & Human Services	1	4	2	11	8	3	1		1	
Home Visiting Program				3	10	1	9	1	6	
Hospital	13	1	2	15	14	21	42	19	71	12
NICU		1		5	5		8	2	1	
Parent/Guardian/Self	6	37	27	47	61	200	184	5	54	26
Physician/PCP	140	109	133	232	134	244	337	289	205	284
Rehabilitation Facility				1				2	1	
Relative (Other than Parent/Guardian)			2	1		2	4			
School				1	1		2	2		
Special Medical Services				2	1		2			
Town/City Welfare Department		1								
Unknown				1					2	
Grand Total	212	156	186	347	264	495	639	339	379	330



How referrals are changing post-Covid

11.6% more child found eligible in SY22 due to Social/Emotional or Adaptive delays than prior to Covid (SFY19).



Is it Autism, Covid side-effect, or just a shift in child development?



The Parent Perspective

Close your eyes. Think of a family you currently work with that you think might benefit from an FCESS evaluation.

- How can you start the conversation?
- What might you say?
- What materials would you want to have handy to assist with having this conversation?

What does it feel like to be the parent?





Group Reflections

Do you feel prepared to have "the talk"?

What supports can we provide you to make these conversations easier?







What happens after the referral?



HOW DOES A FAMILY FIND OUT IF THEIR CHILD IS ELIGIBLE?

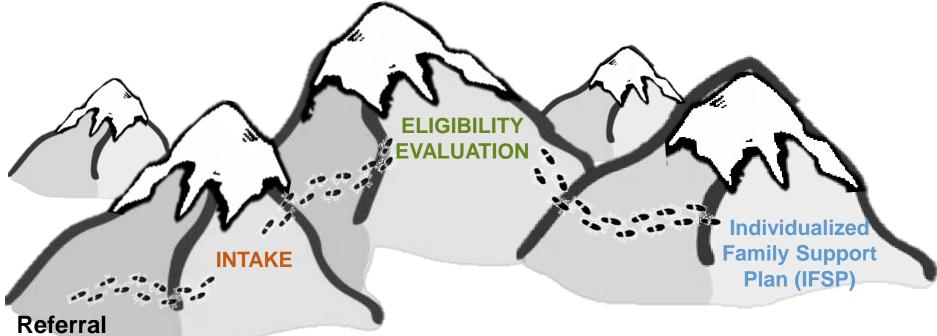




How to Find Your Way

Parents' Roles in Family Centered Early Supports and Services (FCESS)





INTAKE

You will meet with your FCESS intake coordinator who will ask many questions about your child's development and your concerns. The intake coordinator will explain the FCESS process, philosophy, parents' rights, and obtain your consent on required paperwork.

ELIGIBILITY EVALUATION

You will engage in play activities with your child and at least two FCESS staff evaluators. The FCESS staff will ask you many questions regarding your child's development. You will learn if your child is eligible for FCESS the day of the evaluation.

IFSP

If your child is found eligible for FCESS, the IFSP team, which includes parents and FCESS staff, will develop an IFSP identifying goals to enhance your child's development!



Intake

Intake is the beginning of FCESS staff getting to know you and your child. You will meet with an FCESS Intake coordinator and talk about your child's medical history, developmental history, and any concerns you may have. The intake coordinator will explain the FCESS process and obtain your consent to move forward with the process.

Eligibility Evaluation

Parents and caregivers know their children best and are valuable members of the evaluation team!

You will engage in play activities with your child and at least 2 FCESS evaluation staff. During the play activities, the FCESS staff will observe your child's motor development, use and understanding of language, problem solving skills, social development and self-help skills. The evaluators will ask you many questions about your child's development past and present. If your child is not eligible for FCESS, staff, will give you ideas to encourage development. If your child is eligible for FCESS, you will move onto the next step, developing an IFSP.

Individual Family Support Plan (IFSP)

You and the FCESS staff, the IFSP team, will talk about how your child interacts with others, learns new skills or acquires knowledge, and how he/she gets their needs met. The IFSP team will use this information to decide what you would like your child to be able to do starting with the next six months. Together, you will create a plan towards achieving these goals by identifying supports and services to enhance your child's development in every day activities.

Parents and caregivers are a vital part of this process and make all the difference helping children reach their developmental milestones!

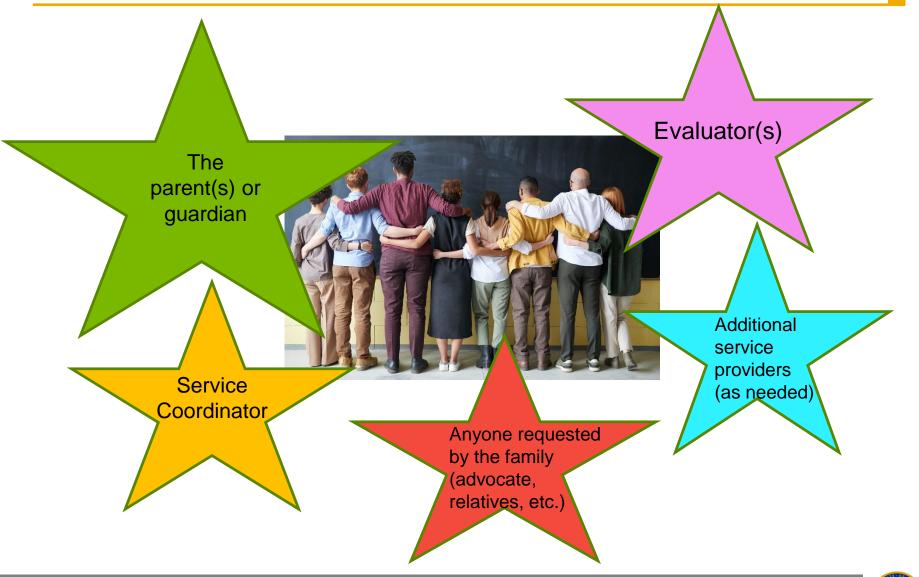
IFSP Implementation

Following the completion of a signed IFSP, your FCESS provider will schedule an agreed upon time and date to begin visits. At each visit, your FCESS provider will ask how things have been since last visit. Then, together you will practice strategies from the IFSP to continue your child's progress toward his/her goals.

Ultimately you will be the most important person to encourage your child's growth and development with the support of your FCESS team.



Who Is the IFSP Team?





How FCESS visits are changing



OLD SCHOOL VS. "BAGLESS APPROACH"



Providers arrived at each home or daycare with their "big bag of tricks"

- Developmentally appropriate toys
- Therapy tools that no family would have



The provider then worked 1:1 with the child and the parent typically watched. After 45-60 minutes, the provider wrote up a note with strategies like those practiced at the visit to work on during the week. They then took their bags, toys and tools and left.



Covid shuts down in person EVERYTHING

FCESS had to get creative!

- Introduction of telehealth visits
 - Video: ECTA Center: Provider and Educator Use of Technology
- Coaching parents naturally progressed into everyone's work





As the world slowly reopened

- In-person visits at program clinics
- Increased use of community settings
- Outdoor visits
- No more bags!





The Hybrid Model

- Families can choose where they want their services
- "Bagless" is here to stay!
- Truly incorporating a child's natural environment and community
- Strategies are embedded in everyday activities for families to practice within their daily routines

What does "bagless" look like?

Home Visiting: Family Centered-Practices - Bing video



Coaching Families



Implementing SEE Change in NH Why is coaching better?

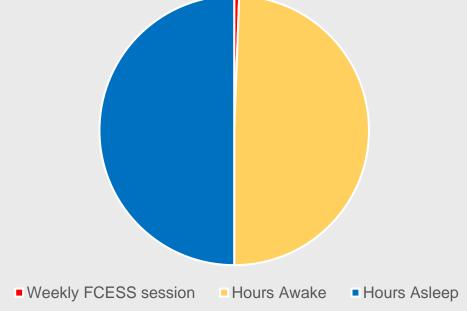
Sustainable Early Engagement for Change



Shifting focus to increasing Family Engagement

A weekly FCESS visit with a child and their family is only **0.5%** of their week!







Why should we engage families?

 Engaged parents and caregivers see FCESS providers as their partners. We build mutually respectful relationships and set goals to support strong parent-child relationships.

• Building these relationships allows for **ongoing learning** for both parents and children.

Parents are their child's first teacher.

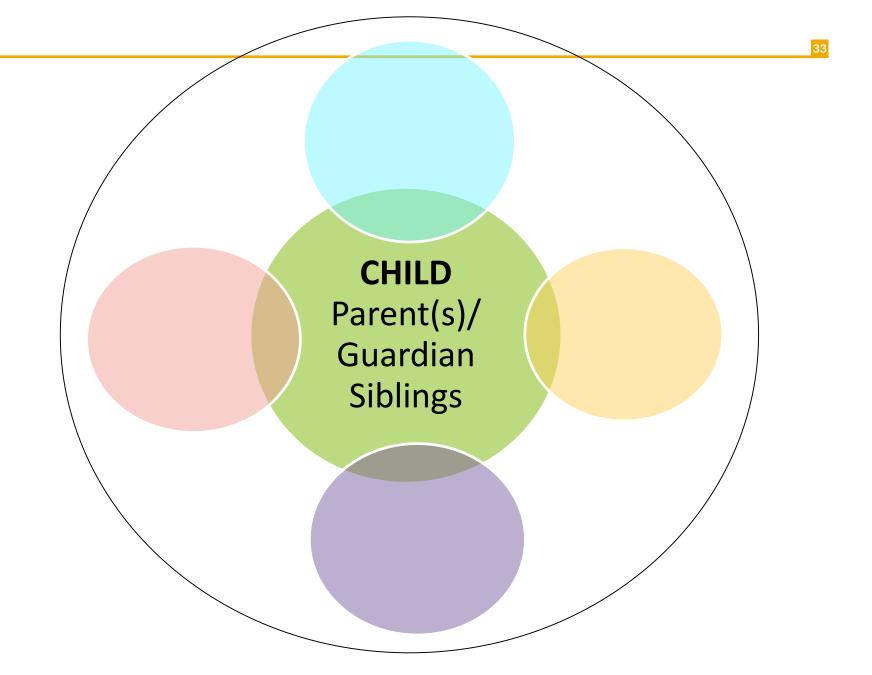


What is a Family?

Before we can engage a family, we need to understand how each family defines themselves. **Every** family is diverse!







Extended family & Friends **CHILD** Parent(s)/ Medical Community Team Guardian Siblings Local Services

Service Providers as Coach:

- are flexible, accessible and responsive to each individual family.
- respect the family's autonomy and independence to make decisions about their level of engagement and involvement in the FCESS program
- collaborate with their peers and other agencies to best meet the complex needs of each individual infant or toddler and their families
- function as a partner with the family
- identify opportunities within the family's daily routines to help parents observe, reflect and adapt their behavior and/or environment to meet their child and family's individual needs.



Coaching is based on the DEC Recommended Practices

- provide guidance to practitioners and families about the most effective ways to improve the learning outcomes and promote the development
- help bridge the gap between research and practice
- support access and participation in inclusive settings and natural environments
- address cultural, linguistic, and ability diversity





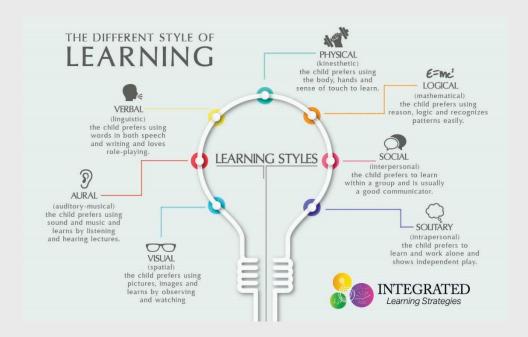








When coaching families, you must always consider their learning style.

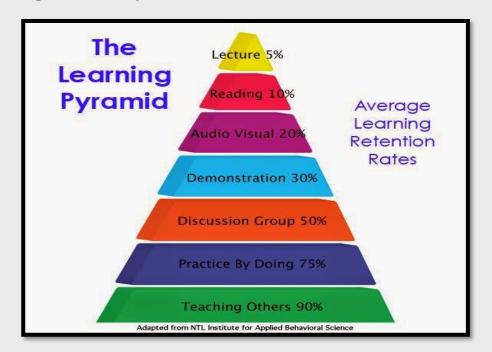


What is the most effective way to teach a new skill to this individual child? Parent? Caregiver?



Learning for Retention

How information is presented has a significant effect on how well it is understood and retained. By encouraging families to engage with their child during the session, rather than passively observe or listen, the rate of potential retention increases significantly.



Practice really does make perfect! (Almost)



A Typical Coaching Home Visit

- 1. Joint Planning Talk with the family about the plan and goals from the previous visit. What worked and didn't between visits?
- 2. Observation Watch the family and child play/interact. Provide feedback on what is and isn't working as well as demonstrate new strategies.
- Action Practice new strategies with the family and child.
- 4. Reflection Brainstorm ways to integrate new strategy into regular routines. Listen to the family reflect on what is and isn't working as well as anything new or different for the family.
- **5. Feedback** Share information to develop new or different strategies.
- 6. **Joint Planning** Together with the family, come up with a plan of what they will try between visits.







Let try it!

Have you ever worked with a family who says their little one "Won't stop screaming?!?!"



How might you talk with the parent about making a referral to FCESS?



DEC Recommended Practices

https://www.dec-sped.org/dec-recommended-practices

Coaching Support Learning Community

https://medium.com/mah-coaching-support

Videos on coaching

https://www.coachingbtb.com/445662427





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