



Getting a  
Jump Start on  
Your Child's  
Development!

# Family Handbook

A Guide to Early Intervention  
in New Mexico



NEW MEXICO  
Family Infant  
Toddler Program

NEW MEXICO  
DEPARTMENT OF  
**HEALTH**



## Our Contact List

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

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

Date referred to FIT Provider	_____
Date for our initial (45-day) IFSP	_____
Date for our ECO assessment (60 days after IFSP)	_____
Date for our IFSP review	_____
Date for our annual IFSP	_____

PLACE AGENCY LABEL OR STAMP HERE



**NEW MEXICO DEPARTMENT OF HEALTH**  
**Family Infant Toddler Program**  
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 Santa Fe, NM 87502-6110  
**(877) 696-1472 (Toll-Free)**  
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[www.fitprogram.org](http://www.fitprogram.org)

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

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

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

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

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

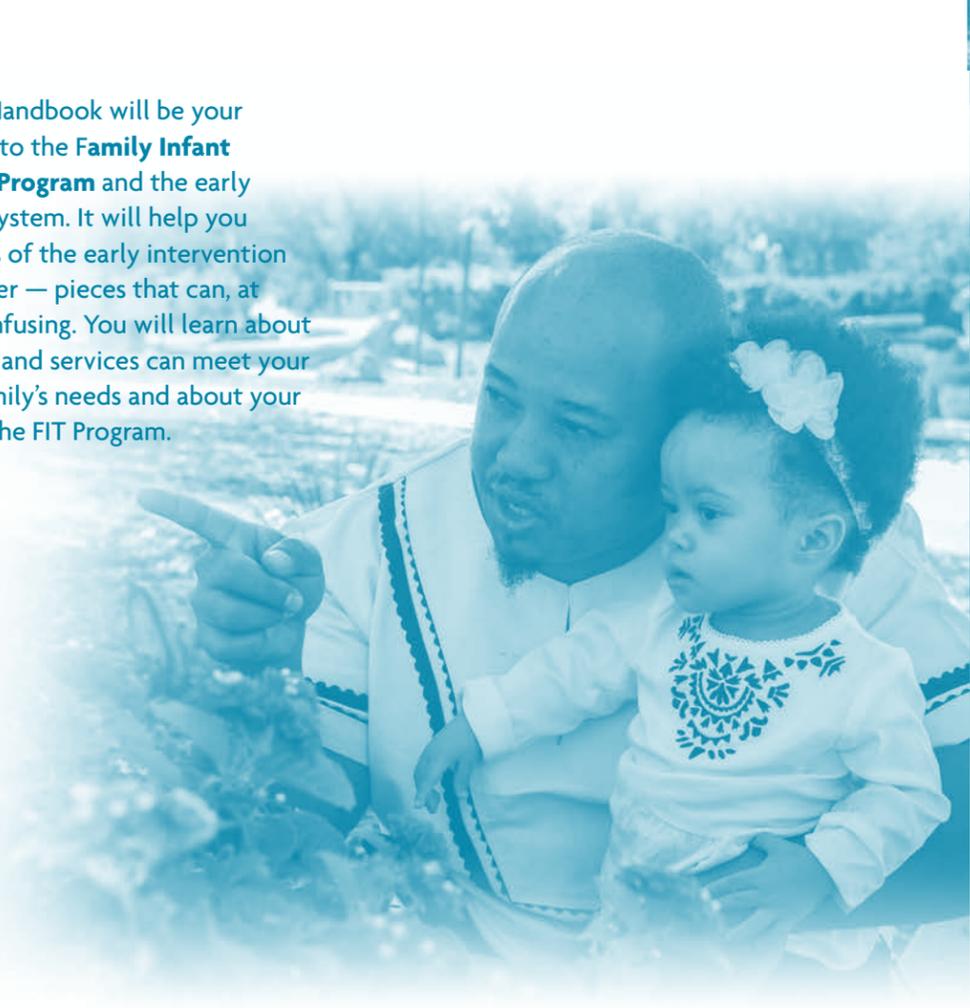
**New Mexico Department of Health**  
**FIT Program Staff**



# The FIT Program

## About Your Family Handbook

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



### FORMS YOU WILL SEE IN THE FAMILY HANDBOOK

- Early Childhood Outcomes (ECO)
- Individualized Family Service Plan (IFSP)
- Prior Written Notice (PWN)

### USING YOUR FAMILY HANDBOOK

- As a Reference »** We understand that people are giving you a lot of new information, and it may be hard to take it all in. Your Family Service Coordinator will go over your Family Handbook with you, but we hope that you and your family will sit down and go through it also — perhaps when things are not so hectic. You will need different information at different times. For example, the world of early intervention has its own language. Your handbook lists some of the most common terms and acronyms and defines them. You will be able to refer to your Family Handbook for information or clarification. You may want to keep it in a three-ring binder along with other important information and documents you receive.
- As an Advocacy Guide »** Your Family Handbook will offer useful tips for how you can better advocate for your child's and family's needs.
- As a Workbook »** The Family Handbook has several worksheets and tips to help you think about questions to ask or to guide you in making decisions for your child and family. You and your Family Service Coordinator can decide when and how you want to use these tools.

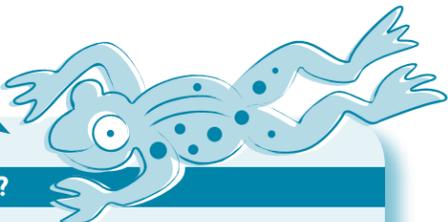
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Achieve Your Dreams!



WHAT ARE YOUR DREAMS FOR YOUR CHILD DURING THESE EARLY YEARS?

Lined writing area for the first question.

HOW CAN THE FIT PROGRAM HELP YOU ACHIEVE YOUR DREAMS?

Lined writing area for the second question.

The Family Infant Toddler (FIT) Program is located within the New Mexico Department of Health. The FIT Program provides supports and services to children who have or who are at risk for developmental delay, and their families. This program is responsible for making sure that the requirements of the Individuals with Disabilities Education Act (IDEA) are carried out in New Mexico. Part C of IDEA applies to children age birth to three.

The FIT Program offers supports and services to families through early intervention provider agencies across New Mexico. These agencies are funded through a combination of state and federal funds, including Medicaid and health insurance. **No family will ever be turned away because of inability to pay for supports and services.**

What is Early Intervention?

Early intervention supports a child's learning and development during the important time from birth to three years of age. Staff from your local FIT early intervention program will support your family in meeting your child's developmental and health-related needs. Professionals provide ideas on how you can best help promote your child's development and how to use their suggestions for intervention throughout the day. R.A. McWilliam, a researcher and father of a child with a disability, reminds us that "the child's learning occurs between sessions." There are opportunities for your child to learn and develop throughout the day, both when the service providers are with you and when they are not.

The FIT Program

What is Early Intervention?



# The FIT Program

## Key Principles in Providing Early Intervention Services



### KEY PRINCIPLES IN PROVIDING EARLY INTERVENTION SERVICES

1. Infants and toddlers learn best through everyday experiences and interactions with familiar people and familiar contexts.
2. All families, with the necessary supports and resources, can enhance their children's learning and development.
3. The primary role of the service provider in early intervention is to work with and support the family members and caregivers in a child's life.
4. The early intervention process, from initial contacts through transition, must be dynamic and individualized to reflect the child's and family members' preferences, learning styles and cultural beliefs.
5. IFSP outcomes must be functional and based on children's and families, needs and priorities.
6. The family's priorities, needs and interests are addressed most appropriately by a primary provider who represents and receives team and community support.
7. Interventions with young children and family members must be based on explicit principles, validated practices, best available research and relevant laws and regulations.
8. Support for families in developing strategies to understand, interpret and nurture their child's development is best achieved through the use of reflective practices. (Reflective practice is, in its simplest form, thinking about or reflecting on what you do. It is closely linked to the concept of learning from experience, in that you think about what you did, and what happened, and decide from that what you would do differently next time.)

### You and Your Team

**Early intervention** is most effective when parents and professionals work together utilizing everyone's strengths and knowledge. This can be accomplished through a **transdisciplinary team**, which is made up of you and the professionals assigned to help your child and family. Team members work together and share ideas about strategies to promote your child's development within your family's daily routines and activities.

You will have a conversational interview with a member of your transdisciplinary team to discuss your family's daily routines and activities. This **Routines-Based Interview™ (RBI)** will help you and your team identify areas of the day that are challenging, as well as activities during the day that can be used to enhance your child's learning.

Based on this interview, your family and the rest of your team will determine your main concerns and priorities and how those will be addressed. Together, you will develop an **Individualized Family Service Plan (IFSP)** that lists the goals (functional outcomes) you agree to tackle and the strategies you and the team will carry out to meet these outcomes. The IFSP will also include a description of the supports and services you will receive from professionals to help meet the chosen functional outcomes.

Your **Family Service Coordinator** will help make sure you receive the services on your IFSP and will help make referrals to other services your child and family need. Your Family Service Coordinator will help you understand your rights under the Family Infant Toddler (FIT) Program and will coordinate transition to preschool as your child approaches age three.

In addition to your Family Service Coordinator, you and your team will determine who will be the **lead provider**. The lead is usually the person listed in the IFSP who is providing services most often; the

lead may also be the person addressing the area of your child's development that is of most concern. The lead provider will get support from other professionals on the team who will also be supporting your child and family. Other members of the team may conduct a joint visit (co-visit) to share ideas to promote your child's development.

The lead and other members of the **transdisciplinary team will meet regularly** to share ideas and align strategies. There is regular communication among team members to determine how well early intervention is working and to recommend any changes. The team, including the family, will adjust the types and quantity of services in the IFSP, if necessary.

The transdisciplinary team approach ensures that early intervention services are well coordinated, with everyone on the team knowing what the others are doing and parents having a clear idea of the activities they can do throughout the week to enhance their child's development.

**Video recording** of the early intervention session may be used, with your permission, and can be a great way to show other members of the team and other family members examples of activities you are doing to promote your child's development. Video clips can include both activities that you created or that your team has suggested in order to promote your child's development.



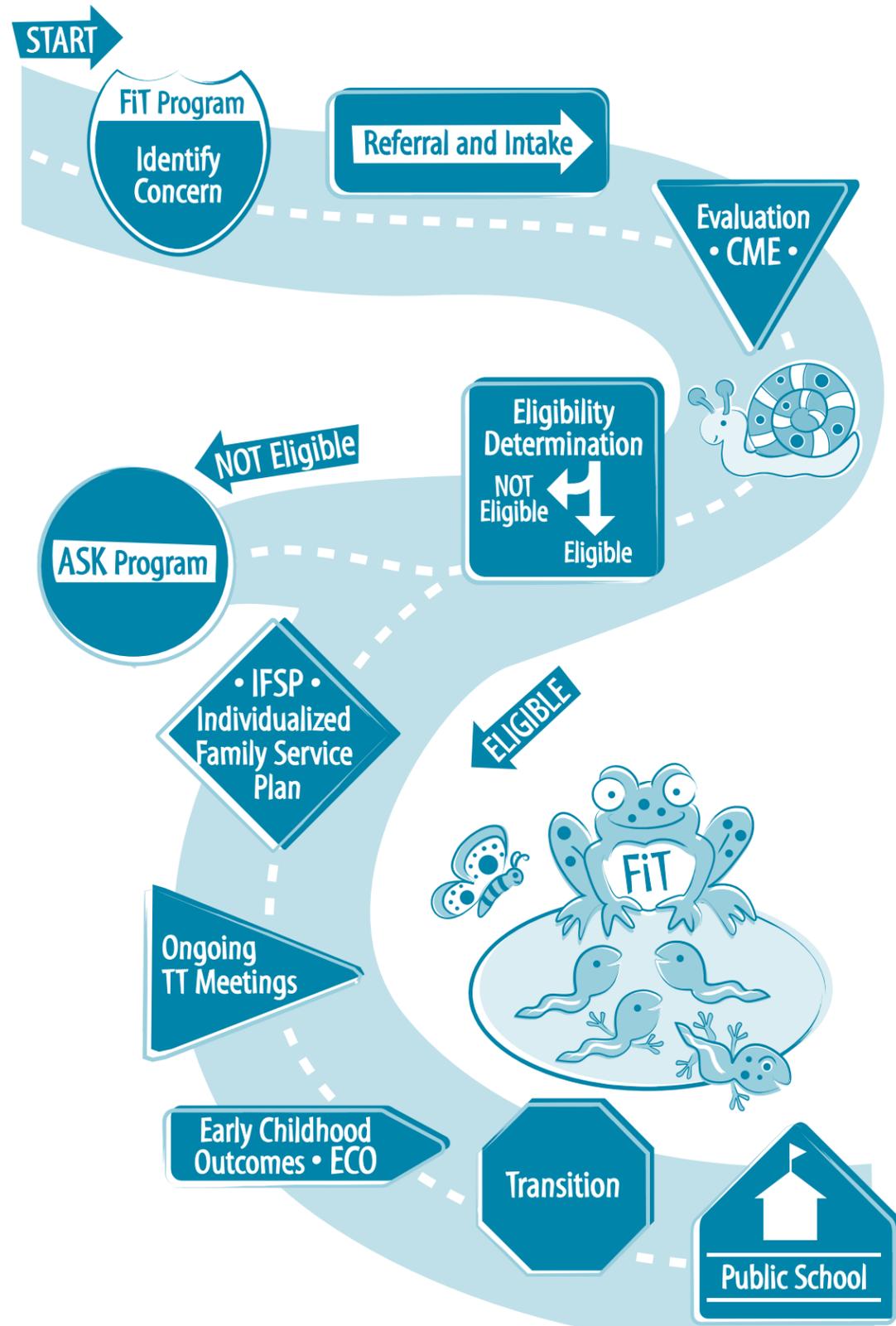
# Getting Started in the FIT Program

## Early Intervention Services



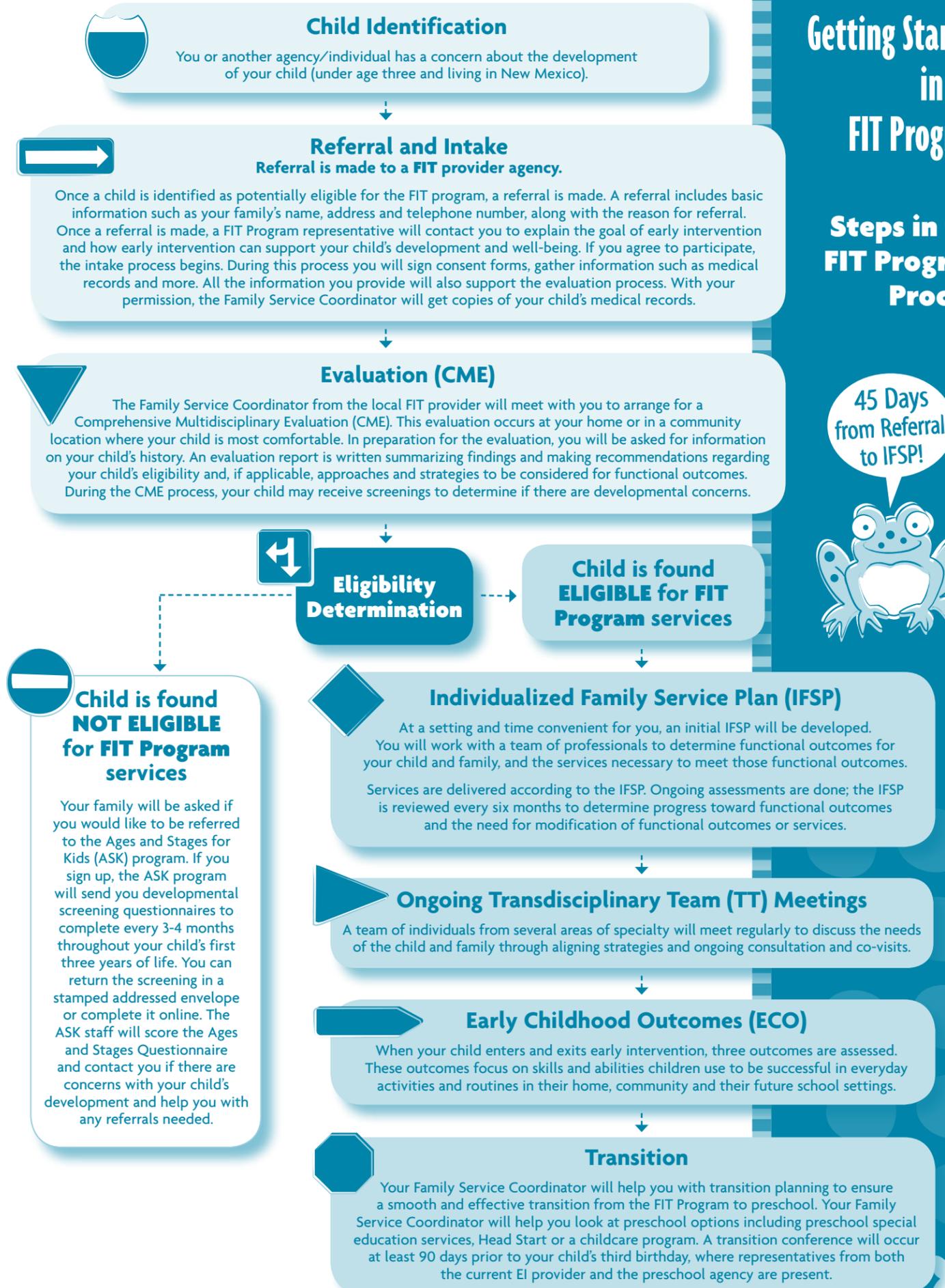
# Getting Started in the FIT Program

## Navigating the FIT Program



# Getting Started in the FIT Program

## Steps in the FIT Program Process



# Getting Started in the FIT Program

## Referral for Early Intervention

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

Your Family Service Coordinator will inform you whether there are other FIT providers in your community and get you to sign a Freedom of Choice form that you were informed of your choice of providers.



### WHO IS YOUR FAMILY SERVICE COORDINATOR?

When you are referred for services, a Family Service Coordinator is assigned to you.

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

### WHAT DOES YOUR FAMILY SERVICE COORDINATOR DO?

Your Family Service Coordinator is available to:

- Help you understand information given to you;
- Inform you of your rights within the FIT Program;
- Help you get the evaluations and assessments your child needs;
- Let you know what services are available and how to get them;
- Coordinate and assist in the development and review of the IFSP;
- Make sure you receive the services that are on your IFSP;
- Help you access support services, such as parent groups;
- Help you resolve concerns if they arise;
- Assist in the development and implementation of a transition plan for after early intervention;
- Refer you to other services, such as child care, health or family support services; and
- Help you become your child's best advocate (see page 19).

### Prior Written Notice (PWN)

Families have the right to be informed about proposed early intervention service activities for their child. They also have the right to give or refuse consent for those services.



**NEW MEXICO**  
Family Infant  
Toddler Program

**Prior Written Notice Form**



**NEW MEXICO**  
DEPARTMENT OF  
**HEALTH**

Child's Name: \_\_\_\_\_ Child's Date of Birth: \_\_\_\_\_

Parent(s) Name(s): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code +4 \_\_\_\_\_

The New Mexico Family Infant Toddler (FIT) Program is required to provide you with prior written notice at least five (5) days before any of the following activities take place and to obtain your consent (approval) before they occur:

**This form provides you notice of the following (Check all that apply):**

<input type="checkbox"/> A screening of your child's development. (See details below) <i>Note: You may still request a full evaluation, even if screening indicates that an evaluation is not needed.</i>	<input type="checkbox"/> A meeting to develop / review your Individualized Family Service Plan (IFSP). (See details below.)
<input type="checkbox"/> An evaluation/assessment of your child's development. (See details below)	<input type="checkbox"/> The frequency or location of your services is being changed. (See details below and attached IFSP)
<input type="checkbox"/> Your child has been determined to be: <input type="checkbox"/> eligible <input type="checkbox"/> not eligible for the FIT Program.	<input type="checkbox"/> Other (describe): _____
<input type="checkbox"/> A transition conference meeting (See details below.)	

The reason this action is being proposed:

\_\_\_\_\_

Planned meeting/activity date:	Planned meeting/activity time:	Planned meeting/activity location:
Family Service Coordinator (FSC) completing form:	Provider agency:	
<input type="checkbox"/> Notice given in person <input type="checkbox"/> Notice sent by mail. (Date mailed _____ )		Signature of Family Service Coordinator

**TO BE COMPLETED BY THE PARENT(S)** (Please check all that apply):

I / we agree to the activity(ies) / changes / services listed above.

I / we agree that the above activity(ies) may take place before the required 5-day prior notice (if applicable).

I / we have received a copy of our family rights under the FIT Program, including the right to submit a complaint, request mediation or request a hearing. These rights have been explained to me by my Family Service Coordinator.

**ONLY IF THERE IS AN INCREASE IN EARLY INTERVENTION SERVICES** (frequency, length, duration, or intensity):

I / we agree that the NM FIT Program may bill our child's  private insurance  Medicaid (check which applies) for the early intervention services we receive and understand that we will not be charged a co-pay or deductible. I also understand that I may withdraw consent at any time.

Signature of Parent:	Date:
Signature of Parent:	Date:

# Getting Started in the FIT Program

## Prior Written Notice Form

# Getting Started in the FIT Program

## An Evaluation for Your Child

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

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

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

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

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

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

### Planning for Your Child's Evaluation

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

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

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

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

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

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

# Getting Started in the FIT Program

## Evaluation Worksheet

Things to  
think about for  
the evaluation.



# Getting Started in the FIT Program

## Results of the Evaluation

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

### Determining If Your Child is Eligible

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

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

If the team decides, based upon the evaluation, that your child is not eligible for the FIT Program, with your permission, your family will be referred to the Ages and Stages for Kids (ASK) program. You will receive and complete developmental screenings through the mail or online and the ASK program staff will track and monitor your child throughout the first three years of life. They will let you know if there are any concerns that need to be referred back to an early intervention provider.



### FIT PROGRAM ELIGIBILITY CATEGORIES

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

### Our Child's Day

Please tell us what your child's typical day looks like. This will help your team develop learning activities that you can incorporate into your family's everyday routines (mealtimes, playtime, bath time, etc.); everyday activities (folding laundry, playing with his sister, etc.); and places (grandma's, child care, grocery store, etc.).

**OUR CHILD'S DAY**

Getting up in the morning ...

Diapering/toileting and dressing ...

Feeding/mealtimes ...

Traveling/getting ready to go ...

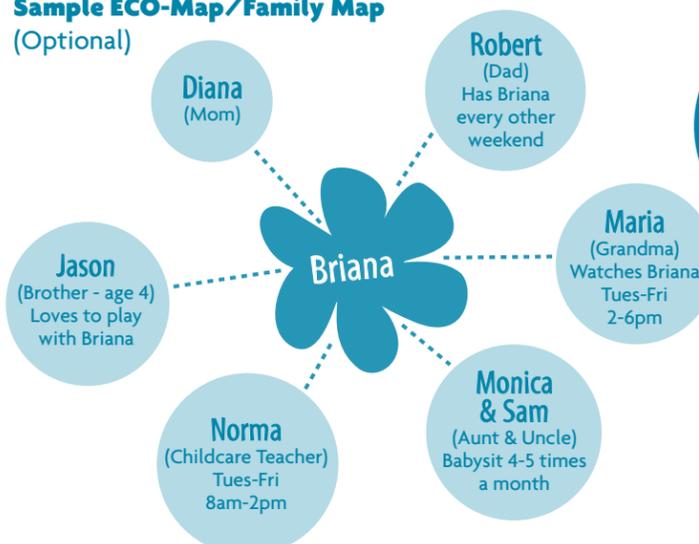
Play time/hanging out ...

Bath time ...

Nap time/bedtime ...

Other ...

### Sample ECO-Map/Family Map (Optional)



By understanding who plays an important role in your child and family's lives, we can better include the people who routinely support your child and family as we develop this plan.



# Getting Started in the FIT Program

## Learning about Your Child and Family

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

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

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

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

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

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



Your Family Service Coordinator will go over a blank IFSP form with you ahead of the meeting.

### Your Initial IFSP

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

### Your IFSP team includes:

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

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

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

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

### Preparing for Your IFSP Meeting

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

#### STRATEGIES FOR A SUCCESSFUL IFSP

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

**Be prepared** — make a list of questions or issues you want to discuss at the meeting. (The worksheet on page 16, “Things to Consider As You Prepare to Develop Your Family’s IFSP,” may be helpful.)

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

**Be clear** about what you want.

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

**Don’t be afraid to ask for help!**

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

### What Is Written in Your IFSP?

Your IFSP must include the following:

- A summary of your child’s present abilities, strengths and needs.
- A section on your family’s “Everyday Routines, Activities, Places and People in Our Life” (with your agreement).
- Functional outcomes that you choose for your child and your family.
- Details of the early intervention services that can help you meet your child’s and family’s functional outcomes including what, where, when and by whom. (A list of early intervention services can be found on page 17.)
- A plan for transition for when your child leaves early intervention.

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

### YOUR IFSP MEETING

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

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

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

I would describe my child to others as ...

What's working for us is ...

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

What I worry most about is ...

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

We'd like more information about ...

As a family, we need help with ...

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

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

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

# Your Individualized Family Service Plan

## Reviewing Your IFSP

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

### Where Will Services Take Place?

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



### Places We Go >>

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### Things We Do >>

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### With Whom >>

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### When >>

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#### PLACES WE GO — THINGS WE DO

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

## Sample IFSP Form

FIT Program IFSP (Version Sept. 2014)

**INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP)**

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

Date of Birth: \_\_\_\_\_  Female  Male Referral Date: \_\_\_\_\_

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

Relationship/Role: \_\_\_\_\_ Relationship/Role: \_\_\_\_\_

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

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

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

---

This plan is (Check one)  Interim IFSP  Initial IFSP  Annual IFSP

Date of IFSP Meeting: \_\_\_\_\_ IFSP Start Date: \_\_\_\_\_ IFSP End Date: \_\_\_\_\_

If Initial IFSP - was it held within 45 days of referral Date?  Yes  No

*If No - what was the reason for exceeding the 45 Days?* \_\_\_\_\_

Anticipated Date for IFSP Review: \_\_\_\_\_ Anticipated Date for Annual IFSP: \_\_\_\_\_

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

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Eligibility Determination Date: \_\_\_\_\_ Date of Re-determination of Eligibility: \_\_\_\_\_  
(Date CME team determined eligibility)

Current Eligibility for the FIT Program (check all that apply):

Developmental Delay  Established Condition  Biological/Medical Risk  Environmental Risk

ICD Code 1: \_\_\_\_\_ ICD Code 2: \_\_\_\_\_ ICD Code 3: \_\_\_\_\_ ICD Code 4: \_\_\_\_\_

ICD Code 5: \_\_\_\_\_ ICD Code 6: \_\_\_\_\_ ICD Code 7: \_\_\_\_\_ ICD Code 8: \_\_\_\_\_

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Exit Date: \_\_\_\_\_ Exit to: \_\_\_\_\_

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_

FIT Program IFSP (Version Sept. 2014)

**Your Family**  
Everyday routines, activities, places, and people in your life

Young children learn best through routines and activities that they are interested in and participate in often. It is helpful for us to know where and how your child regularly spends time so that we can develop this plan. As you and your Family Service Coordinator talk about your daily routines, she/he will summarize that information below.

Typical Daily Routines and Activities	Describe what your child does during this activity and who participates.	What do you and your child enjoy about this activity? What makes this routine/activity challenging or difficult?

\*\*If additional space is needed to describe everyday routines, please use another page.  
I choose NOT to share information about our everyday routines, activities & places. Parent Initials [ ]

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_

FIT Program IFSP (Version Sept. 2014)

What are your most important concerns, difficulties or challenges that your child and/or family experiences during daily routines or other concerns, difficulties or challenges that you would like us to help you address in the IFSP? It may be helpful for us to review your child's most recent assessment information as well.

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By understanding who plays an important role in your child and family's lives, we can better include the people who routinely support your child and family as we develop this plan.

Who are the people who are routinely in your child's life and what role do they play (e.g., siblings, grandparents, aunts & uncles, child care provider, baby sitter)?

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Who are the people who support you as a parent and what role do they play?

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What other agencies/organizations (e.g., medical provider, WIC, place of worship, support group) that support your family?

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Would you like us to help you to learn about or identify other resources, services or support (e.g., assistance with housing, utilities, finding a pediatrician, child care, respite). If yes, which ones?

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\*\*If you would like to draw an ECO map, please use the back of this page or another page.  
I choose NOT to share information about our everyday routines, activities & places. Parent Initials [ ]

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_

FIT Program IFSP (Version Sept. 2014)

**Summary of Relevant Health Information**

Primary Care Provider Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Child's Overall Health: May include pregnancy, birth history, growth, allergies, nutrition, well-child visit information, medical/developmental diagnosis, hospitalizations, medications, specialists, other interventions, etc.

---

**Vision:** Date Tested: \_\_\_\_\_ Results:  Pass  Did not pass  Unable to Screen

Instruments Used:  NM Birth to 3 Vision Screening  Other: \_\_\_\_\_

Tested by (Doctor or Agency): \_\_\_\_\_

Recommendations/Referral: \_\_\_\_\_

Follow-up screening: Date: \_\_\_\_\_ Result: \_\_\_\_\_ Recommendation: \_\_\_\_\_

---

**Hearing:** Date Tested: \_\_\_\_\_ Results Left:  Pass  Did not pass  Unable to Screen

Results Right:  Pass  Did not pass  Unable to Screen

Instruments Used:  OAE/Tymp  Other: \_\_\_\_\_

Tested by (Doctor or Agency): \_\_\_\_\_

Recommendations/Referral: \_\_\_\_\_

Follow-up screening: Date: \_\_\_\_\_ Result: \_\_\_\_\_ Recommendation: \_\_\_\_\_

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_

Present Abilities, Strengths, and Needs

For children to be active and successful participants at home and in the community, they need to develop skills in the three functional areas described below. We use this information about your child's abilities and your concerns and priorities to understand your child's progress.

Date of evaluation/assessment: \_\_\_\_\_ Based on:  Initial Evaluation  Ongoing Assessment

Instrument(s) Used: \_\_\_\_\_

Child's Chronological Age: \_\_\_\_\_ Child's Corrected Age (if applicable): \_\_\_\_\_ (until child reaches 24 months)

Table with 4 columns: HOW DOES YOUR CHILD..., YOUR CHILD'S STRENGTHS, YOUR CHILD'S NEEDS, and Your child's developmental levels based on evaluation and assessment. Rows include Social, Emotional, Communication, Cognitive, Gross Motor, and Fine Motor.

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_

Child / Family Outcome

Given what you've shared about your family's daily life, what would you like to see happen in your daily routines as a result of early intervention supports and services? Outcome # \_\_\_\_\_

Tell us what progress will look like. When would you like to see this happen? For example, "By Thanksgiving, we would like Joey to sit at the table for about 20 minutes and eat dinner with the family about three times a week."

Strategies: Who will do what in which everyday routines, activities and places to meet this outcome? As appropriate, document which IFSP team member(s) will implement each strategy.

Form with numbered sections 1-4 for documenting strategies and helpful resources.

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_

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Form with numbered sections 1-4 for documenting strategies and helpful resources.

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_

IFSP Transition Plan

Form for IFSP Transition Plan Part 1, including fields for Child's Name, Birth date, and Key Dates in the Transition Process.

Table for IFSP Transition Plan Part 2, detailing Transition Process Action Steps and Persons Responsible with columns for Projected date of completion and Date Completed.

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_

Table for IFSP Transition Plan Part 3, detailing Transition Process Action Steps and Persons Responsible with columns for Projected date of completion and Date Completed.

Table for IFSP Transition Plan Part 3, detailing Transition Process Action Steps and Persons Responsible with columns for Projected date of completion and Date Completed.

Child's Full Name \_\_\_\_\_ Page \_\_\_ of \_\_\_





# Advocating for Your Child

## Getting the Most From Early Intervention Services

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

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



### WHAT IS AN ADVOCATE?

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

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

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

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

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

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

### How Can You Meet Other Parents?

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

### Parents Reaching Out can:

- Let you know about parent groups.
- Help connect you (by phone or in person) with other parents.

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

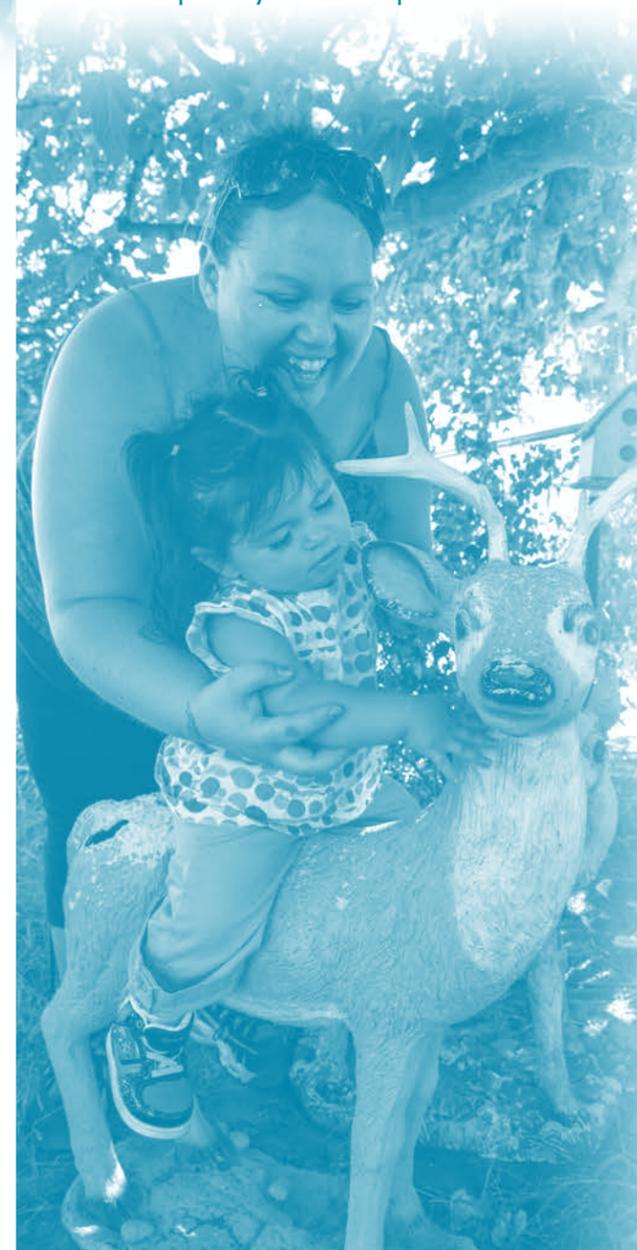
**Native American families may also get assistance from Education for Parents of Indian Children with Special Needs (EPICS). You can reach EPICS toll-free at 888-499-2070.**

### BEING AN EFFECTIVE PARENT ADVOCATE

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

# Advocating for Your Child

## Getting the Most From Early Intervention Services



## Transitioning Out of the FIT Program

### Transition Planning

Your Family Service Coordinator will help you with the transition planning process to ensure that your child has a smooth and effective transition from the FIT Program. Transition planning will begin at your initial IFSP and is updated when your child turns age two (24 months old).

### What Are Your Options for Transition?

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

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

You may want to visit potential transition sites to get to know your options. Your Family Service Coordinator will help you think about which environment and program would be best for your child.

Your Family Service Coordinator also will help you understand the eligibility requirements for the various programs.

### When Will Your Child Transition?

Early intervention through the FIT Program is available until your child turns three years of age.

If your child is potentially eligible, a referral will be sent, with your consent, to your local school district, special education office. Also with your consent, an assessment summary will be sent to the school district to help them prepare for the transition conference/meeting.

### Transition Conference/Meeting

A transition conference/meeting will occur at least 90 days (three months) prior to your child's third birthday, where representatives from both the current EI provider and the preschool agency(ies) are present.

### Preschool Readiness

During the transition process, your Family Service Coordinator will discuss the activities that are part of the strategies, goals and functional outcomes for your child that pertain to pre-literacy and pre-numeracy. These skills will help you see what types of knowledge your child has in identifying words and language through play, reading books, fingerplays, songs and other types of activities that you and your child can work on together. Numeracy is also part of a skill that is important for transition to a preschool setting and can include counting, fingerplays, sorting, matching and identifying colors. These activities will help the receiving teachers to know that these types of strategies have begun and the child is learning about tools that support math, science and reading activities in school.

### What Will Your Transition Plan Include?

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

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

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

You may want to attend training on the transition process from Parents Reaching Out or your local FIT provider agency.

## Transitioning Out of the FIT Program

### WHAT TO EXPECT FOR YOUR TRANSITION MEETING

#### Your family should:

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

#### Early intervention staff will:

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

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

- Explain the eligibility requirements and your rights;
- Explain the process for applying/registering;
- Discuss options for the delivery of services your child will need; and
- Help determine whether any additional evaluations will be needed prior to transition. (You will be asked to sign your consent on a Prior Written Notice form for the evaluation to determine eligibility for preschool special education, Part B.)

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

Things to think about and do prior to the meeting »

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

### Transitioning Out of the FIT Program

#### What Is an Individualized Education Program?

If your child will transition to preschool special education services through your local public school district, an Individualized Education Program (IEP) will be written to describe how the school district will meet your child's educational needs. The IEP will describe the services your child will receive, as well as the activities and strategies for meeting your child's goals. At the IEP meeting, participants will decide the location where services will be delivered. The school district must provide preschool special education services in settings with children without disabilities. The Individuals with Disabilities Education Act says that children must be educated in the Least Restrictive Environment (LRE), including a preschool setting with typically developing peers.

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

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

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



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

Your FIT Program Family Service Coordinator can continue to work with you and the new program for one month to ensure that the transition process is smooth and uninterrupted. This month of service coordination must occur within the first month after your child leaves early intervention services and up to four hours across all services.

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

- Medical Case Management (Salud or private health plan)
- Children's Medical Services
- NM School for the Deaf Early Childhood Program
- Medically Fragile Waiver (for children with severe medical involvement)
- Developmental Disabilities Waiver (for children with a developmental disability)

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

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

Your family has the right to:

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

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

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

#### The Right to Participate

Your participation in the FIT Program is voluntary. It is up to you to decide to

participate in the program. If you accept services, you will determine the level of your participation.

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

#### The Right to Have Your Child Evaluated

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

#### The Right to Give Your Consent

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

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

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

### Overview

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

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

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

### The Right to Understand

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

### The Right to Confidentiality

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

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

### The Right to Review Records

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

### The Right to Help with Resolving Disagreements

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

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

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

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

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

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

### The Right to Submit a Complaint

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

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

#### FIT PROGRAM MANAGER

**FIT Program Manager**  
**Developmental Disabilities**  
**Supports Division**  
**DEPARTMENT OF HEALTH**  
 810 San Mateo  
 PO Box 26110  
 Santa Fe, NM 87502-6110

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

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

# ABCs of Early Intervention

This guide to phrases and acronyms will help you better understand the world of Early Intervention!



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

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

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

**Consultation** — Meetings between IFSP team members for the purpose of integrating and planning effective early intervention strategies.

**Co-visit** — When more than one service provider provides early intervention services to enable them to coordinate strategies when working with your child.

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

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

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

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

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

**ECO (Early Childhood Outcomes)** — Three outcomes that are assessed when a child enters and exits early intervention. These outcomes focus on skills and abilities children use to be successful in everyday activities and routines in their home, community and their future school settings

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

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

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

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

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

**Family Therapy, Counseling and Training** — Services provided, as appropriate, by licensed social workers, family therapists, counselors, psychologists and other qualified professionals to help the parent(s) understand the special needs of their child and support the parent-child relationship. They will also offer other services to the parent(s) in support of their parenting as they guide their child's healthy development.

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

**Fully Informed Consent** — Families recognize their authority and responsibility in making decisions about their child's involvement.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

# ABCs of Early Intervention

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**Prior Written Notice (PWN)** — Parents have the right to understand all information and reports about their child's development. Parents also have the right to give or refuse consent for all early intervention service activities. This consent must be documented on a Prior Written Notice form.

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

**RBI (Routines-Based Interview)** — A conversational interview with a member of your transdisciplinary team to discuss your family's daily routines and activities. The goal of the RBI is to help you and your team identify areas of the day that are challenging, as well as activities during the day that can be used to enhance your child's learning.

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

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

**Sign and Cued Language Services** — Teaching sign language, cued language and auditory/oral language.

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

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

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

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

**Transdisciplinary Team** — A team that works across disciplines (areas of specialty) to meet the needs of the child and family through aligning strategies and ongoing consultation and co-visits.

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

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



## Family Resources...

### National

**The Arc of the United States**  
1825 K Street NW, Suite 1200 • Washington, DC 20006  
(800) 433-5255 (Toll-Free) • (202) 534-3700  
info@thearc.org • www.thearc.org

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

**Birth Defect Research for Children**  
976 Lake Baldwin Lane, Suite 104 • Orlando, FL 32814  
(407) 895-0802  
www.birthdefects.org

Providing parents and expectant parents with information about birth defects and support services for their children. They have a parent-matching program that links families who have children with birth defects and a national birth defects registry.

**Center for Parent Information and Resources**  
c/o Statewide Parent Advocacy Network  
35 Halsey St., Fourth Floor • Newark, NJ 07102  
www.parentcenterhub.org

The Center for Parent Information and Resources serves as a central resource of information and products to the community of Parent Training Information Centers and the Community Parent Resource Centers, so that they can focus their efforts on serving families of children with disabilities. This website houses much of the information previously available through the National Information Clearinghouse for Children and Youth with Disabilities website, www.nichcy.org.

**Office of Special Education Programs and Rehabilitation Services**  
US Department of Education  
400 Maryland Ave SW • Washington, DC 20202  
(202) 245-7459  
www2.ed.gov/about/offices/list/osep

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

**TASH**  
2013 H Street NW, Suite 715 • Washington, DC 20006  
(202) 540-9020  
www.tash.org

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

**ZERO TO THREE**  
National Center for Infants, Toddlers and Families  
1255 23rd St NW, Suite 350 • Washington, DC 20037  
(202) 638-1144  
www.zerotothree.org

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

### New Mexico

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

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

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

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

**Education for Parents of Indian Children with Special Needs**  
1600 San Pedro Dr. NE • Albuquerque, NM 87110  
(505) 767-6630 • (888) 499-2070 (Toll-Free) • (505) 767-6631 (Fax)  
www.epicsproject.org

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

**New Mexico Kids • Early Care Education and Family Support**  
www.newmexicokids.org

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

**NM Public Education Department Special Education Bureau**  
300 Don Gaspar Ave • Santa Fe, NM 87501  
(505) 827-5800  
www.ped.state.nm.us/seb/

The Special Education Bureau provides management and oversight of special education services in New Mexico.

**New Mexico Family Network**  
1101 Cárdenas NE, Suite 101 • Albuquerque, NM 87110  
(855) 729-4238 (Toll Free) • (505) 265-0430  
www.newmexicofamilynetwork.org

New Mexico Family Network was formerly Parents of Behaviorally Different Children. The organization provides advocacy and support to families of children with behavioral differences of many kinds.

**Parents Reaching Out**  
1920 B Columbia Dr SE • Albuquerque, NM 87106  
(800) 524-5176 (Toll-Free in New Mexico) • (505) 247-0192  
info@parentsreachingout.org • www.parentsreachingout.org

Parents Reaching Out provides support, information and training to parents, educators and others on creating successful partnerships that will encourage and promote children's learning. Parents Reaching Out has a network of parents who have been there. These parents are available to provide support and their expertise through the organization's Parent-to-Parent Program.

**Disability Rights New Mexico**  
1720 Louisiana Blvd NE, Suite 204 • Albuquerque, NM 87110  
(505) 256-3100 • (800) 432-4682 (Toll-Free)  
www.drnm.org

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

Getting a  
Jump Start on  
Your Child's  
Development!



NEW MEXICO DEPARTMENT OF HEALTH  
**Family Infant Toddler Program**  
810 San Mateo • PO Box 26110  
Santa Fe, NM 87502-6110  
**(877) 696-1472 (Toll-Free)**  
[www.fitprogram.org](http://www.fitprogram.org)



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