

Medical Home Phone Conference
March 27, 2007
“ ‘Up to Three’ Transition from Early Intervention to Preschool”
Sue Olsen

AI Romeo: Lisa Samson-Fang should be joining us in just a moment. While I have you all on the line, our next conference call will be on April 24th and the topic is going to be the Children With Special Health Care Need Clinics. So what we would like you to think about before that conference call is if there are any problems you are having with any of the clinics, please think about those and be prepared to share those. And if you have any ideas for solutions for problems with the CSHCN clinics, share those also. On that next call we will have Dr. Delavan and Dr. Harper Randall from here at the Department of Health, who oversee those clinics and they will be available to address some of those challenges and issues. Also one of the program managers who works directly with the clinic staff will be on the call, so please be thinking of that for the next conference call.

Our guest this afternoon is Sue Olsen. Sue do you want to tell us a little about yourself and your program there?

Sue Olsen: I am the Director of the Services with disability at Utah State University and I am the Director for the “Up to Three” Early Intervention Program in Northern Utah for the Cache, Rich and Box Elder Counties. Our Early Intervention Program has approximately 230 children enrolled at any time. We have a great interdisciplinary staff up here with PT, OT, Speech Path, Social Workers and Psychologists. We are fortunate to have a doctor here, Dr. Odell who is also in the Budge Clinic who is the medical director here and a nurse practitioner here that most Early Intervention programs don’t get to have. I used to work at the Department of Health in the Baby Watch Program, several years ago as a compliance officer but then I came back up here to Utah State working in Early Intervention again. I was asked to talk about transition.

AI Romeo: Correct. We would like you to talk for a little bit and then we’ll open it up for questions. We’ll talk about transition from early intervention to preschool what providers can do once the children are kind of in that middle area.

Sue Olsen: I had an email sent out by AI and those of you who are in front of a computer who have printed it out can take a look at that. I will talk through that. I did want to complement the Medical Home webpage (www.medhomeportal.org). I got on and looked at the transition information that you have on your webpage. It is quite accurate and also has some really nice links to the parent video about transition and IEP and Sunday’s on there and that would be a nice thing to share at your FUN meetings if you have the opportunity because it is a very nice webpage. We don’t have one on our Baby Watch Website. Transition, almost everything we do in Early Intervention unfortunately is driven by regulation either at the Federal level the state level or local level. In this instance there is regulation in Part C which is our early intervention side and the Part B side, which is the preschool side. Those are sections of our regulations. Early intervention’s responsibility is to ensure that transition occurs. We have the responsibility as the child is approaching his

third birthday to talk to the families about how early intervention will end on the child's third birthday. We are not allowed to provide services past the child's third birthday. And we explain to them the possibility of the child being enrolled and being eligible for their school district specialized education preschool and we share information about the preschool; the location, how the preschools work, and the type of services they have there. Two things we really have to be cautious about are 1. We don't influence the parent about whether they should go or not go or whether their child is eligible or not eligible. Eligibility will be determined by the school district and not by our program. 2. We're not to determine for the child which preschool their child should be placed in. Transition also occurs before the third birthday for children who achieve skill within normal developmental limits. So if we have a 30-month-old child who has been evaluated and shows all the skills typical for a 30-month-old child, we will release them from our program. We do track them until 36 months of age and give them information about the preschool programs and see if their child starts to fall behind again. We do help assist families when they transition by moving out of our programs either early intervention or out of the state. We transfer all of our records, treatment plans and evaluations. As well as when they move out of the state. We assist families to find contacts in those states so they don't have to go there and search around for them. We also assist families when they may just want to withdraw from our program. We try to encourage families to be on a tracking system where we send out developmental questionnaires on a regular basis so that the family can stay informed about their child's development and whether they are doing as well as they think they are or whether they need to come back and enroll in our program again.

When the child is about 2 years of age we formally start writing a transition plan into what we call our IFSP, which is our individualized family service plan. We start talking to families about the preschool programs. Our program has a couple of lessons we like to give families; one is about how to advocate for their children and another one is about the difference between our systems in early intervention and our use of the IFSP and the preschool system and their use of an individual education plan (IEP) because they are different and they have a different focus and the IEPs in the school programs, though they try to keep parents involved. It is definitely more a child centered kind of process.

When the child is no later than 90 days away from their third birthday we coordinate a meeting with the school district and the parent and the child service coordinator to meet and talk about transition and we talk about the evaluations that will need to be done, the parent's concerns, they talk about the different classrooms the child might attend, they talk about the school bus, and almost anything the parent wants to discuss is talked about at that meeting and a timeline is developed by the school district and shared with the parent about when evaluation will take place between that meeting and the child's third birthday.

The school district is required under regulation to have an individual education plan in place on or before the child's third birthday. And for children that turn three during the school year, they will start their IEP on or before their third birthday. For children who turn three during the summertime, the school district has to determine whether the child is eligible for any extended school year services during the summer or whether the child should start school when their preschool starts up which is typically in August. For children

who are not eligible for Part B preschool, our program also is required to make a good faith effort to transition a child to any public program that they may be interested in. That might be a daycare in town it might be a preschool in town. The child may still need some physical therapy or speech language therapy but not have such significant needs that they were eligible for a preschool program. So we will also help them link up with those private programs, private therapists to receive the services that their parents would like.

Al Romeo: So Sue, you really do help those families find some of those other things if they are not eligible for public services.

Sue Olsen: That's correct.

Al Romeo: Let's say that a child isn't eligible for early intervention because of some of the eligibility criteria. Where do the parents go to receive more information of what's out there in the community?

Sue Olsen: For early intervention or preschool?

Al Romeo: For early intervention.

Sue Olsen: I can speak generically for the state because all the different practices on the line are probably interacting with early intervention programs. But most of our preschool early intervention programs have a tracking system so if we evaluate a child and find that they don't have a developmental delay or its not significant enough to qualify them for a program, we will talk to the families then about early Head Start, about the daycares in town or preschools in town and encourage them to start involving their children at the park or other places that might address the concerns they initially had. We will also put them on a tracking program so we stay in contact with them and we can kind of monitor the develop so that it doesn't get any worse and if it does we will call the families and see if they want to re-refer to our program. Our goal is to give them some ideas whether it is related to socialization or language or behavior and then follow them developmentally.

Al Romeo: Thank you. I'd like the practices to go ahead and ask whatever questions they have of Sue at this point.

One question, could you talk about how other early intervention programs around the area compare to yours, if you are aware of that in terms of how supportive they are about transition?

Sue Olsen: That is a difficult question. What areas of the state is your practice in?

In the Salt Lake area.

Sue Olsen: So you probably have children that transition out of the Jordan Valley developmental program and the DDI Vantage?

Yes.

Sue Olsen: Both of those programs are very good and have very strong transition. Jordan Developmental program is a 0-5 program so they transition to themselves. So if a child is eligible for part B, the child will typically keep coming to the same building where they came with parents before. If the child is ineligible, I think Debbie Ballard and Chris Jacovelli are the program coordinators and directors and they train their staff to provide links to the community. DDI Vantage transitions different school districts than Salt Lake City, they also serve Tooele and out in Duchesne. So they probably have quite a few different transition practices depending on the school districts they work with but I would say that they also work really hard to link families with community resources available. The difficult thing, even in my program, transition is only as good as the service coordinators I have working with the family. I can say that some of my service coordinators are much more knowledgeable about the services in the community and interested in supporting the families who are not eligible. I think it is always important if you work with families if you find we do a great job, it's always good to hear that. But if you find we left a family in the lurch and didn't go a good job of linking them with other community sources of carrying through on the transition to the preschool program, that you let us know those things.

Al Romeo: Other questions from the practices?

My name is Liz and I'm the parent advocate up at Wasatch Pediatrics and so I actually am a parent of a child who's gone through early intervention and is now in preschool. I am floored at all the things that Sue says that early intervention has provided because I feel that was not our experience at all. I loved the gal who is the coordinator up here but it went from 3 years old to you are on your own.

Sue Olsen: So you felt that on the early intervention side you didn't good have support?

Liz: Had great support on early intervention but the transition from early intervention into preschool, it was like okay she's three here you go...

Sue Olsen: And you just didn't feel like you received much information about preschool ahead of time?

Liz: No and I'm floored all the things you were saying that you all provide and also the outreach to the community and the services around which I think is fantastic and is in place for the families because that was not our experience down here.

Sue Olsen: Transition is really difficult thing and I know Dr. Carbone was at the ICC meeting and almost always when we talk about transition in the ICC meeting we have 5 or 6 families who are represented there and it is a very difficult subject and I would be the first to say that more often or not we hear that our transition didn't go as well and our families felt very deserted and isolated as we transitioned. And I try to reflect on my own program and I would have to say that I know that there are some families in our own program who would express the same thing that you do. There is such a change in philosophy between

early intervention and preschool; you are used to that face-to-face contact. And we see you a lot and to see your child we get to see you and then all of a sudden the communication doesn't happen. If we said what you have to get used to is sending a notebook back and forth with your child on the bus or dropping into seeing the school district, it would sound like we are not talking nice about them. So I think we are not as forthright with what the reality of what a school program is. And unfortunately the other day one of the families in ICC said that they were told that could not drop into the child's classroom or volunteer in the child's classroom. Not that they weren't welcome but that they might create a disturbance. And I thought that's really sad and it's a real different thing that what Early Intervention provides.

Liz: And also early intervention, from my perspective, you get such incredible care through early intervention so it says a lot for early intervention because you do get such incredible care and unfortunately when they make the transition into the school, the school is so driven by what you said earlier by regulations and so much paperwork that even if they wanted to they can't give the kind of time.

Sue Olsen: I would somewhat agree with you but I would not fully agree with you and I would encourage you to advocate with your preschool teacher and with your school district special ed director because I think preschool can be more than just child centered. I think there can be greater levels of communication and especially in that third year and the child's fourth birthday. There is nothing that says that school districts couldn't have more of a parent support model that parents couldn't be more involved. It's really what the parents and school districts want to make it. I would encourage you to talk with your preschool teacher and call your Special Ed. Director. I think Tom Brushette is the Special Ed Director in Park City. He's very good and I think he'd be interested in listening to a group of parents. There could be a different way for it to be structured. That is what I'd recommend.

Al Romeo: Those are some good helpful hints for parents to remember as their kids are going through that preschool arena. It's always a good idea to keep being that advocate for your child and get to know people on the other side. It's been my experience that the more I know about the people that I work with from meeting with them or talking to them, the more I understand what they are going through and can deal with that myself. So thank you for those helpful hints. Other questions...

Sue Olsen: Are each of the practices that are on the line, do they know their Early Intervention providers?

Yes

Sue Olsen: All of our Early Intervention providers would be pleased to come and talk to your office staff if you would like. We've done it for Dr. Odell at the Budge clinic, who has a medical home up here, and have gone in on a staffing day and shared with them the steps to take. Also again the Medical Home webpage has some really nice handouts for Children With Special Health Care Needs because transitions for those children are much more

difficult than for children, other children who are healthy. Transition for medically fragile kids it's a very difficult thing to do and we don't do that very well yet. I know we do it better because we've gotten to know our physicians better and we're comfortable sending over our paperwork saying: here's some forms that if someone in your office could fill out we would share with the school district or have the parent share with the school district about their child's health concerns and medical issues and medication, because then we might actually get a school nurse at our transition meeting. Another thing that would be real helpful from our point of view is if you would invite your early intervention programs to come and get to know your staff and doctors so that the paperwork could exchange hands more readily.

I have a question. We have our Early Intervention people calling us all the time telling us that their kids have ear infections or are anemic or doing other things like that. Are you guys able to do that and diagnose? We have them doing that all the time. They will call up and say: "We just need you guys to fill out a prescription." Is that normal practice for early intervention?

Sue Olsen: I would say no. All of our programs have registered nurses on staff and we are required under our regulations to do hearing screening. If a nurse is trained in the use of a tympanogram, that's great. But typically they are using portable OAE (otoacoustic emission) screeners so we may get a pass or fail. I know our nurse usually talks with the family about the child.

Ours uses an otoscope and said, "I looked at this kid's ear and it's red."

Sue Olsen: We don't do that, and it's not recommended by Baby Watch.

We don't do it. We make them come in.

Sue Olsen: That is what you should do. You should call and talk to the director of that program and share the concerns you have. There are three programs in the state that are housed in health departments, so almost all the staff are nurses so they may feel more comfortable doing that but we are not supposed to and it's not our rule. I would encourage you to call the Director of that program and let them know that is happening.

We will do that again.

Sue Olsen: If you talk to the Director and feel like it's continuing, call Susan Ord at the Department of Health Baby Watch or Vanya Mabey who is the nurse on Baby Watch staff and they will assist you with that problem.

Thank you.

Al Romeo: Sue we really appreciate you taking your time and talking to us and giving us helpful hints. If there is anything else you want us to pass on to the practices, please be sure and share that with me and we will pass it on to them.

Sue Olsen: I appreciate the Medical Home. What you guys have been doing has been great. I know I've appreciated becoming more connected, so thanks for all that you do.

Al Romeo: Thank you, we appreciate that. Just a reminder for the practices the next call is on the 24th of April. We are going to talk about the Children With Special Health Care Needs clinics. So if you have concerns or ideas for solutions please bring those to our next conference call and we'll have the Medical Directors for those clinics on the call and be able to talk directly to them. Thank you all for joining.

In attendance: Sue Olsen, Chuck Norlin, Al Romeo, Sandra DeBry, Budge Clinic, Bob Terashima, IHC Sandy, Dinosaurland Vernal, UVP American Fork, UVP Cherry Tree, Redwood, Summit/Wasatch, Paul Carbone, Southridge.