
Roadmap
for
Reflection

Resource & Support Series

Family
Support
Using a
Coaching
Interaction
Style



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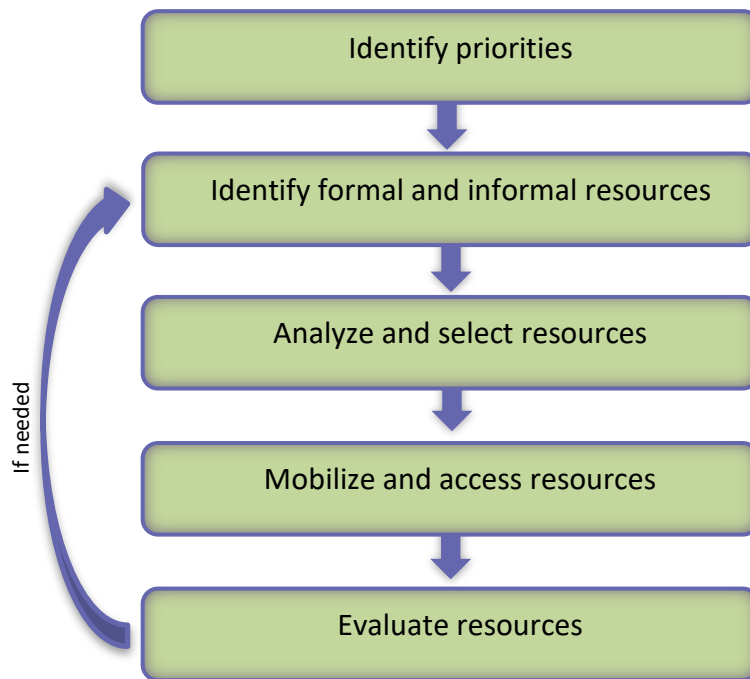
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Description

The enclosed *Roadmaps* are intended to serve as guides for *early childhood practitioners' use of a coaching interaction style to build the capacity of family members to achieve their family support outcomes and promote short- and long-term well-being. Roadmaps and the accompanying informative feedback sections **are not** scripts. They are flow charts that illustrate how to implement family-centered capacity-building practices. They bridge the research-to-practice gap by showing how evidence-based practices should be operationalized during interactions with families. They may be used in the following ways:

- As part of a training event to help practitioners visualize the use of evidence-based practices
- To practice evidence-based family support strategies during role play activities
- While planning a conversation a practitioner anticipates having with a family
- As a “guide on the side” to prompt practitioners as they engage in conversations with families

The *Roadmaps* are designed as flowcharts to show possible directions conversations might take, appropriate questions to prompt the parent's reflection, and opportunities for providing additional information (i.e., informative feedback), if necessary. When coaching conversations are consistent over time, families are more likely to learn how to use the process for self-assessment and self-reflection thus strengthening their ability to meet existing and new priorities and ensure the well-being of family members. These resource-based practice *Roadmaps* systematically guide the practitioner to help the family complete the steps below:



(Adapted from Rangel, Camerer & Montague, 2008)

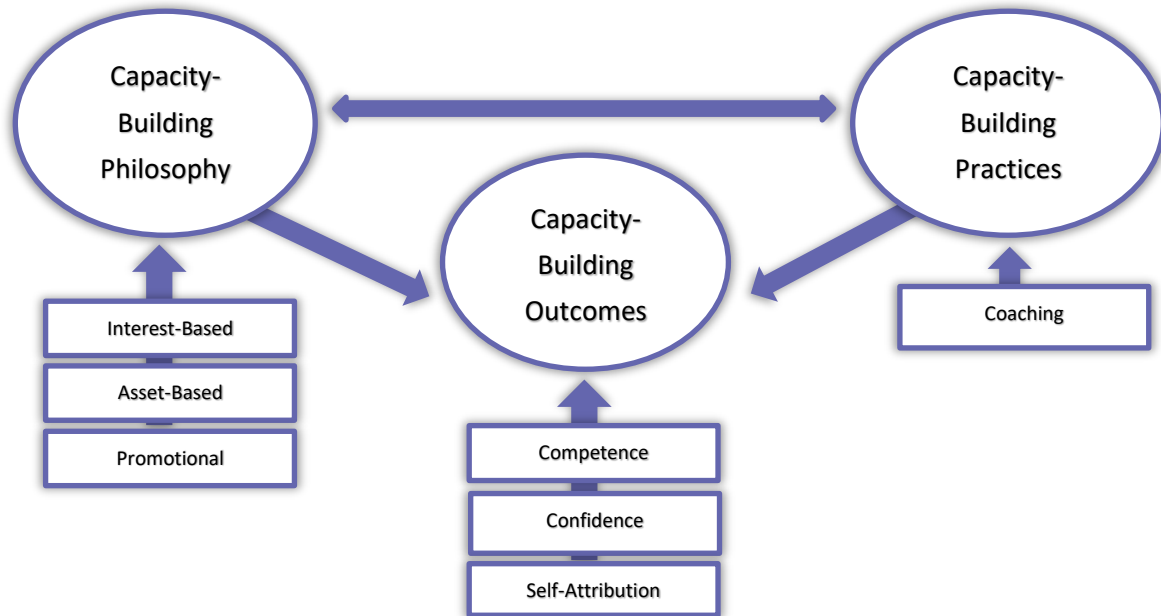
When implemented appropriately, capacity-building family support practices help families mobilize supports needed to address immediate priorities and internalize a sustainable process for meeting future needs.

This toolkit contains information about (1) the capacity-building family support framework developed for use in early childhood intervention, (2) resources and guidance for how to use a coaching interaction style to provide families with opportunities to reflect and participate in the problem-solving process; (3) a series of *Roadmaps* that guide practitioners on the use of capacity-building practices within the context of high frequency topics; and (4) informative feedback that can be shared with families as they move through the capacity-building process.

* Early childhood practitioner refers to early intervention service coordinators, early childhood educators, special educators, family support specialists, therapists, and others who provide educational and family support services to families with young children.

Capacity-building is an ongoing process of providing, creating, or mobilizing experiences through which children, parents, families, and communities enhance their ability to identify and meet their priorities in a sustainable way (Dunst, Bruder & Espe-Sherwindt, 2014; Dunst, Trivette & Hamby, 2010). Individuals, families, and communities can build their capacity in several ways (e.g., professional expertise, promoting child learning, or promoting family well-being). This resource focuses on how the capacity-building framework supports family well-being.

The *Roadmaps for Reflection* in this toolkit operationalize a capacity-building framework. They assume the practitioner using them has a capacity-building philosophy for working with families that focuses on families' interests, priorities, and assets and on promoting well-being rather than focusing on deficits or fixing specific problems. The *Roadmaps* promote the use of capacity-building practices that emphasize active participation and reflection from the family. Practitioners who use these practices with a capacity-building philosophy should expect to see caregiver competence, confidence, and self-attribution outcomes.



Help-giving is most likely to be capacity-building when the *Twelve Principles of Effective Help-giving* (Dunst & Trivette, 2009) are followed:

1. Help-giving is positive and proactive and conveys a sincere sense of warmth, caring, and encouragement.
2. Help-giving is offered in response to an indicated need for assistance.
3. Help-giving engages the help receiver in choice and decisions about the options best suited for obtaining desired supports and resources.
4. Help-giving is normative and typical of the help receivers' culture and values and how others obtain assistance to meet similar needs.
5. Help-giving is viewed as appropriate by the help receiver.
6. The personal and financial costs for seeking and accepting help do not outweighs the benefits.
7. Help-giving includes opportunities for reciprocation.
8. Help-giving bolsters self-esteem of the help receiver by being immediately successful.
9. Help-giving promotes the use of informal supports and resources for meeting needs.
10. Help-giving is provided as part of a collaborative relationship between the help-giver and receiver.
11. Help-giving promotes the acquisition of skills and behaviors that decrease the need for the same type of help for the same kind of supports and resources in the future.
12. Help-giving involves the help receiver in obtaining desired resource supports in ways that bolster self-efficacy beliefs.

Instructions

Practitioners should review the appropriate *Roadmaps for Reflection* prior to the conversation with the family and become familiar with the pattern for reflection and feedback used in the *Roadmap*. The information in the *Roadmap* should be used as a guide to help the practitioner implement a coaching interaction style as described in the literature (Rush & Shelden, 2020), not as a script. Each *Roadmap* is color-coded to help the practitioner efficiently use a coaching interaction style.



The *Roadmap* begins with the question or issue that triggers the conversation. The triggers are located in the purple circle on the left side of the *Roadmap*. Start each conversation at the purple circle.



The green boxes indicate reflective questions designed to prompt the family's increased awareness, analysis, alternatives, or action planning. Note the questions are open-ended to prompt thorough conversation rather than closed-ended questions (i.e., yes or no). The reflection practitioners prompt directly affects the family's ability to independently solve challenges in the future.



The yellow boxes indicate an opportunity to share informative feedback with the family to ensure understanding of the factors involved with possible solutions and opportunities to make informed decisions throughout the conversation. When the yellow box has a blue glow, it indicates an opportunity for brainstorming and additional brainstorming guidance is located on page 6.



The red circle signifies an appropriate ending point to the conversation. Use the *Guide to the Follow-up Conversation* to revisit each previous plan.

To use the *Roadmaps* and resources in this toolkit, follow the instructions below:

1. Select the *Roadmap* that best matches the family's request for support.
2. Start at the purple circle and confirm that the family is interested in support from you around this topic.
3. Move from box to box in order. Only skip boxes if the family provides the answer before you ask the question. Note that reflective questions are written as open-ended questions and should not be reformatted as yes/no questions.
4. The interaction should be conversational rather than an interrogation. Use active listening skills and affirmative and positive evaluative feedback during the conversation to keep the conversation flowing.
5. Upon reaching the yellow box in the conversation, offer some informative feedback, if necessary. Informative feedback sections are written to provide examples of resources that could be shared. **They are meant to be reviewed before coaching conversations, if possible, and are not meant to be read to or given to families.** Note that directly after providing informative feedback, the practitioner should ask the family to reflect on the feedback by asking a question such as, "What are your thoughts about that information," or "How does that information impact your decision?"
6. Follow the boxes to prompt the family to develop a plan for mobilizing and accessing selected resources.
7. Continue following the *Roadmap* until reaching the red circle. At the red circle, develop a plan with the family for follow-up.
8. The *Roadmap for Follow-up Coaching* (page 8) *Conversation* can be used to follow-up on any topic.
9. Use the *General Roadmap* (page 7) to address topics that do not fit any other *Roadmap*.

Conversations take many twists and turns; therefore, practitioners may need to ask additional prompts, provide other feedback, and allow more opportunities for observation and action/practice throughout the conversation. If it is necessary to veer off the *Roadmap* to address an individualized concern, once the concern is addressed, return to the *Roadmap* and work to develop a joint plan.

Once a practitioner becomes more skilled in the use of a coaching interaction style, he/she may no longer need to use the *Roadmaps*. When families participate in repeated, systematic conversations using the *Roadmaps for Reflection*, they are more likely to learn the problem-solving process and strengthen their ability to meet future challenges.

Keep in mind that practitioners may need to use more than one *Roadmap* in a conversation. For example, a conversation about finding employment may lead to a conversation about obtaining childcare and reliable transportation. Practitioners should plan to be flexible and open-minded to using each opportunity for resource assistance as an opportunity to practice this systematic process for addressing needs and priorities.

Helpful Hints

Practitioners may find the following hints helpful when using a capacity-building approach to support families:

1. Use of more than one *Roadmap* during a conversation may be necessary if there is more than one resource priority.
2. Ask only one question at a time and give plenty of time for families to think before checking for understanding.
3. Understand that all families have resources, formal or informal, that may not be obvious to you. Use open-ended, reflective questions to find out more about each family's expertise.
4. Support families in using informal resources (e.g., family, friends) and social networks rather than formal resources (e.g., government agencies, organizations) whenever possible because these resources are renewable, sustainable, and often provide opportunities for reciprocity.
5. Always provide opportunities for families to brainstorm and share ideas before offering your own. Every conversation can be an opportunity to help families practice problem-solving skills.
6. Assume all families are capable of meeting their own needs with appropriate support and maintain a positive attitude when talking to families and when seeking assistance from other team members.
7. Remember that social capital (network of mutually beneficial relationships an individual has) and networks can significantly increase access to informal resources. Be open to discussing methods of building social networks with families.
8. Do not presume to know the personal costs associated with accessing specific resources. Families are the decision-makers and should determine the extent to which any resource aligns with personal and family values and priorities.
9. End every interaction with a concrete joint plan for what the family will do between visits and how it will be done. Families may not follow through with plans that do not match their priorities or are not detailed or clear enough to be implemented.
10. Do not be afraid to admit when you do not know an answer. Take these moments as opportunities to intentionally model strategies for accessing evidence-based information for families.

Coaching Guidance: Conducting Brainstorming

Dissecting what it means to help the family brainstorm ideas.

What ideas do you have?

What have you done in the past?

Who do you know who might be able to help (or help with ideas)?

What agencies or organizations do you know about that help with that?

What other ideas can you think of?

Do you mind if I share an additional resource to consider?

What are your thoughts about the advantages and disadvantages of those ideas?

(the coach may need to ask about specific ideas that the coachee skipped over)

The purpose of coaching is to build an individual's capacity to solve problems (identify, evaluate, and implement effective solutions). Brainstorming should be implemented in a manner that prompts the individual being coached to take the lead role in identifying potential solutions/ideas. The potential solutions should include a mix of informal and formal resources and supports. Informal supports include family, friends, neighbors, acquaintances, etc. with whom families often "trade favors." Informal supports are often flexible and renewable, meaning families can continue to access them and establish an ongoing relationship of mutual support. Formal supports include organizations, agencies, and businesses whose resources are reliable, but sometimes costly or nonrenewable. The following prompts may be used to ensure the practitioner provides ample opportunities for the active participation of the individual being coached to practice brainstorming.

- What else have you done/thought about?
- What other options can you think of?
- What are the advantages and disadvantages of each option?
- Who do you know who has worked through this before?

After these (or similar) prompts, the coach may offer some additional ideas if needed. It is not the role of the coach to "save the day" and provide the "best" solution. After all ideas are on the table, the coach reinforces the leadership role of the family member by asking him/her what he/she thinks about the advantages and disadvantages of all ideas presented.

The focus of brainstorming is not only to come up with multiple ideas of resources for a specific priority, but also to support families in building and maintaining a network of resources that can be accessed when future priorities arise and to provide opportunities to practice the skill of systematically generating and evaluating ideas.

Example:

Alaina's family wants to move out of their friend's house where they have been living for the past few months. The coach begins walking through the roadmap for finding housing and learns Alaina's family moved from a nearby county and are not familiar with housing resources in this area. The coach asks Alaina's family what ideas they have to start looking for housing. Alaina's family said they have been driving around and looking at complexes but don't know how to get started. The coach asks Alaina what she has done in the past to find housing. Alaina shares that she has always taken the recommendations of friends. The coach asks Alaina who she knows that she would feel comfortable asking. Alaina shared that she recently met several families at church she could talk to. Alaina also has several neighbors with whom she is close. The coach jotted down Alaina's ideas and asked her what agencies she is aware of that provide support. Alaina was not aware of any. The coach shared two new resources with the family and asked Alaina's thoughts about those ideas. Alaina explained that she doesn't feel comfortable using public assistance. The coach followed up by asking Alaina her thoughts about how the other ideas they discussed might work for her family. Alaina talked about the advantages of the ideas. Since Alaina partially analyzed her options the coach asked her to think about the disadvantages of those ideas. Alaina discussed the disadvantages. The coach and Alaina moved forward to make a plan.

Coaching Guidance: Asking Reflective Questions

A key characteristic of a coaching interaction style is the use of reflective questions to build awareness, prompt analysis, generate alternatives, and engage in action planning. Below are some helpful hints for the successful use of reflective questions.

- Ask only one reflective question at a time.
- Be comfortable with silence while waiting for the person to think about his/her response.
- Avoid asking “grand tour” questions to revisit the previous joint plan (e.g., “How are things going?”).
- An awareness, analysis, or alternatives question should always precede informative feedback.
- An analysis question always follows informative feedback (e.g., “What are your thoughts about that idea?” “How would that work for you?”).
- A yes/no question should only be used to ask permission or avoid making an assumption (e.g., “Would you like to try it?”).
- When you ask a reflective question and the response is “I don’t know,”
 - rephrase the question to ensure he/she understands, or
 - provide feedback about an observation you made in the past that confirms he/she knows, or
 - provide informative feedback, and then ask the person an analysis question.
- When a family member says, “Just tell me,”
 - assure him/her that you have some ideas to share,
 - ask him/her a few awareness questions to ensure that the information/idea you have matches the needs/priorities, and
 - provide informative feedback, and then ask the person an analysis question.
- Avoid asking questions with the answer embedded (e.g., “I wonder what would happen if...?” “What would you think about...?” “How about you try...?”).
- Avoid asking questions to get the family member to agree with what you are thinking.

(Rush & Shelden, 2020)

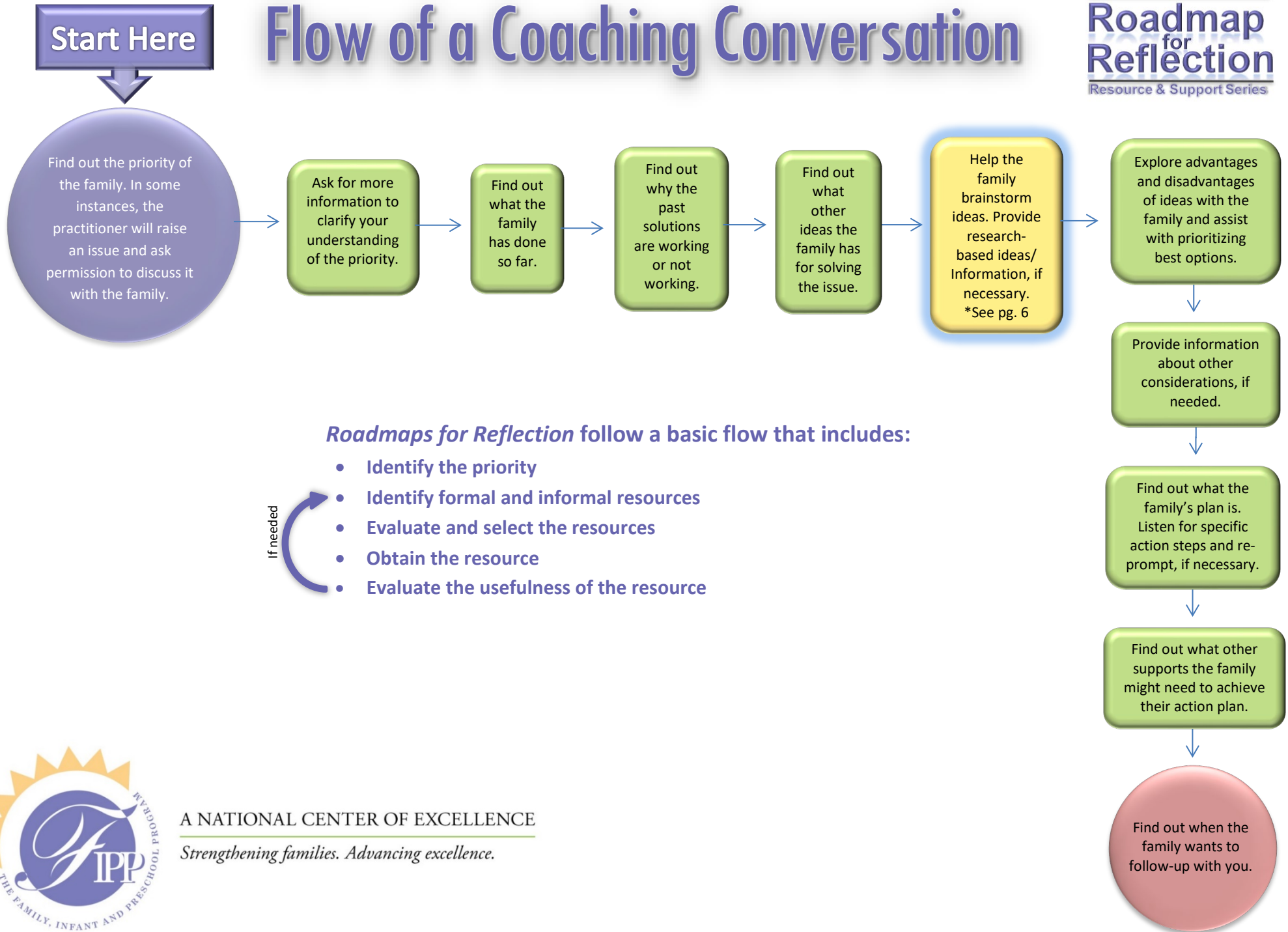
Coaching Guidance: Providing Feedback

When used as part of a coaching interaction style, feedback can take several forms. Feedback can be used to evaluate or validate the coachee, affirm the coachee, inform the coachee or direct the coachee. Directive feedback tends to interfere with capacity-building and should be used sparingly and only when imminent danger exists. The other types of feedback should be used to build the caregiver’s confidence, competence, and engagement in the conversation. Below are some tips for using feedback successfully:

- Feedback occurs after the family member has the opportunity to reflect on his or her observations or actions, or after the learner has practiced a new skill.
- Feedback can be affirmative. Affirmative feedback includes statements that describe, restate, or acknowledge what the learner has said (e.g., “Yes, I see what you mean.”).
- Feedback can be evaluative. Evaluative feedback includes comments that evaluate or judge what the family member has said. Evaluative feedback should be used in moderation so that it does not stifle the parent’s opportunities to evaluate his/her own actions (e.g., “That was the perfect way to describe what worked. That is exactly how I saw it, too.”).
- Feedback can be informative. Informative feedback includes instances where the coach is sharing new information (e.g., “Toddlers typically test limits just the way you describe, Lisa. Although it’s frustrating, it is normal for her age.”)

(Rush & Shelden, 2020)

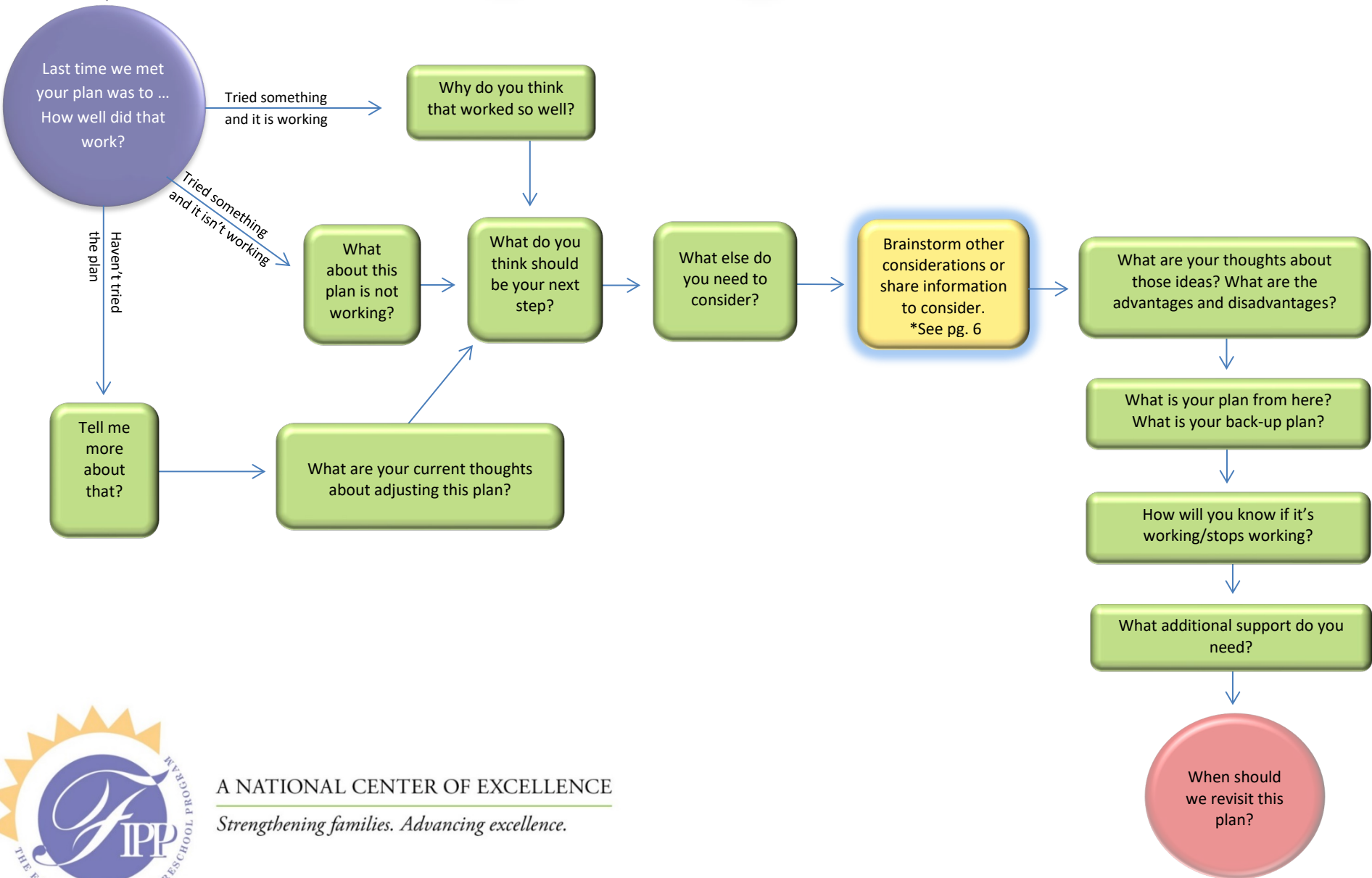
Flow of a Coaching Conversation



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Follow-up Coaching Conversation

Start Here

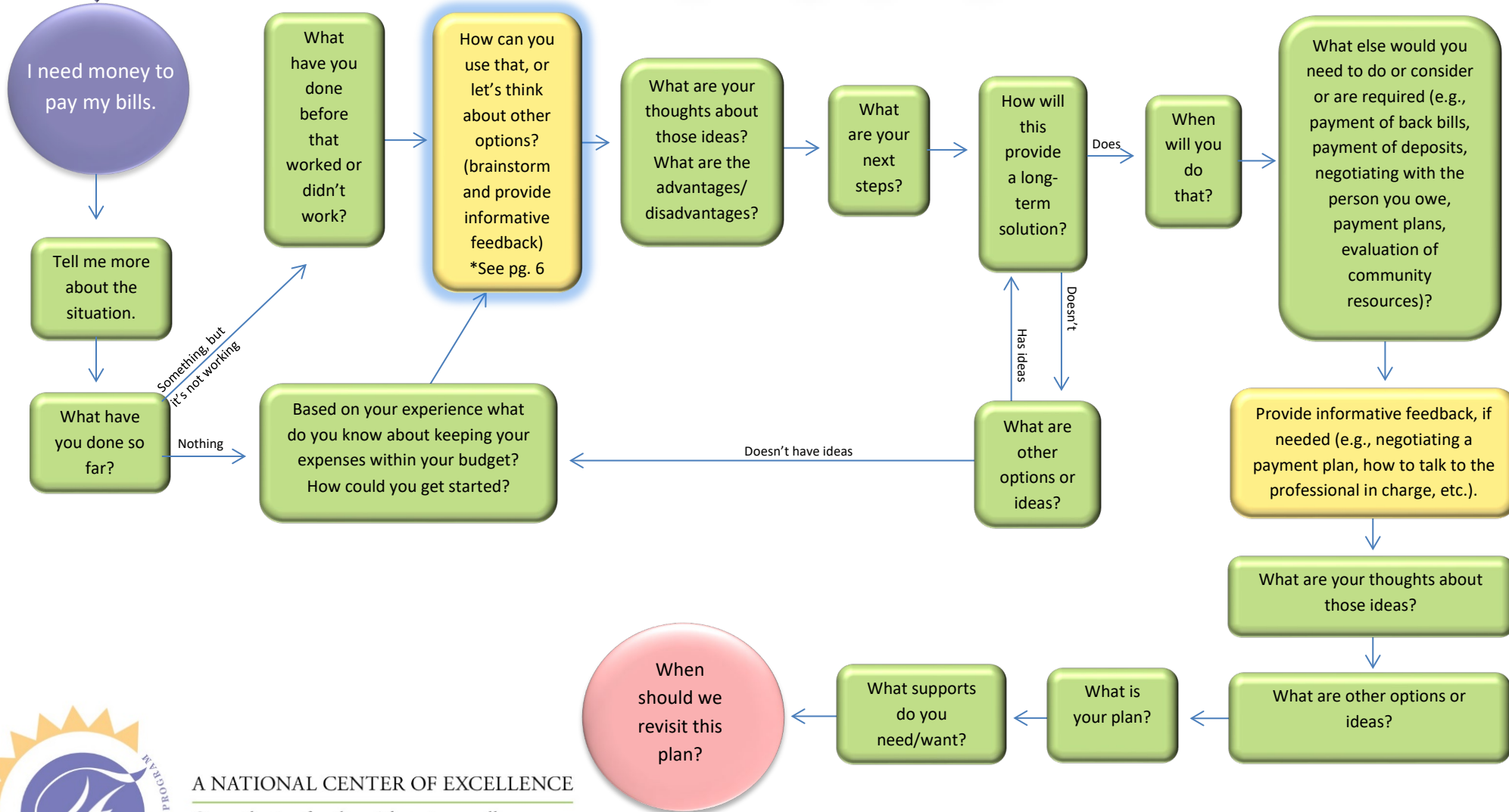


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“I need money to pay my bills.”

Start Here



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Informative Feedback about the Resources to Help with Finances

Supporting families in meeting short-term financial needs can be helpful, but ultimately the goal of early childhood family support programs is to build long-term capacity. Budgeting can be an important tool for families to learn as they plan for how to balance income and expenses.

A general framework for expenses may include some of the following:

Monthly Expenses:

Housing	_____
Food	_____
Utilities (water, sewer, electric)	_____
Phone and Internet	_____
Gas/Transportation	_____
Insurance	_____
Clothing	_____
Household Items	_____
Medication	_____
Savings	_____
Education	_____
Emergency Fund	_____
Entertainment	_____
Other	_____
Total	_____

To help families consider what kind of income may support their budget, you may use the following formula:

Total expenses ÷ 4 = The amount of money you need weekly

The amount of money you need weekly ÷ 40 (or the number of hours you will work each week) = Your minimum hourly wage requirement

This budget planning framework is adapted from:

Ramsey, D. (2009). *Total money makeover*. Nashville, TN. Thomas Nelson Group.

<http://www.daveramsey.com/everydollar/>

Budgeting Systems

Budgeting App/Software: Many budgeting apps and software exist and will link to bank accounts and allow families to create an interactive budgeting plan. Websites like <https://www.everydollar.com/>, <https://www.mint.com/>, <https://pocketguard.com/> and others can help families experiment with different budgeting options.

Envelope Budgeting:

<https://www.daveramsey.com/blog/envelope-system-explained>

Zero-Based Budgeting:

<https://www.nerdwallet.com/article/finance/zero-based-budgeting-explained>

Other resources on budgeting and financial planning include:

Orman, S. (2011). *The money class*. New York: Spiegel & Grau.

<http://www.suzeorman.com/suze-tools/>

Millward, R. (2010). *Basic budgeting: The simple way for anyone and everyone to be in control of their finances*. Marienville, PA: Expressions of Perceptions.

<http://www.federemo.net/files/b/basic-budgeting-the-simple-way-for-anyone-and-everyone-nekbgcz.pdf>

Budgetsimple. (2015).

<https://www.budgetsimple.com/>

“We need food.”



Informative Feedback for Obtaining Food Resources

Communities usually have many resources for obtaining food for families with young children and women who are pregnant. The resources available within a community vary widely, but can include the following short- and long-term resources:

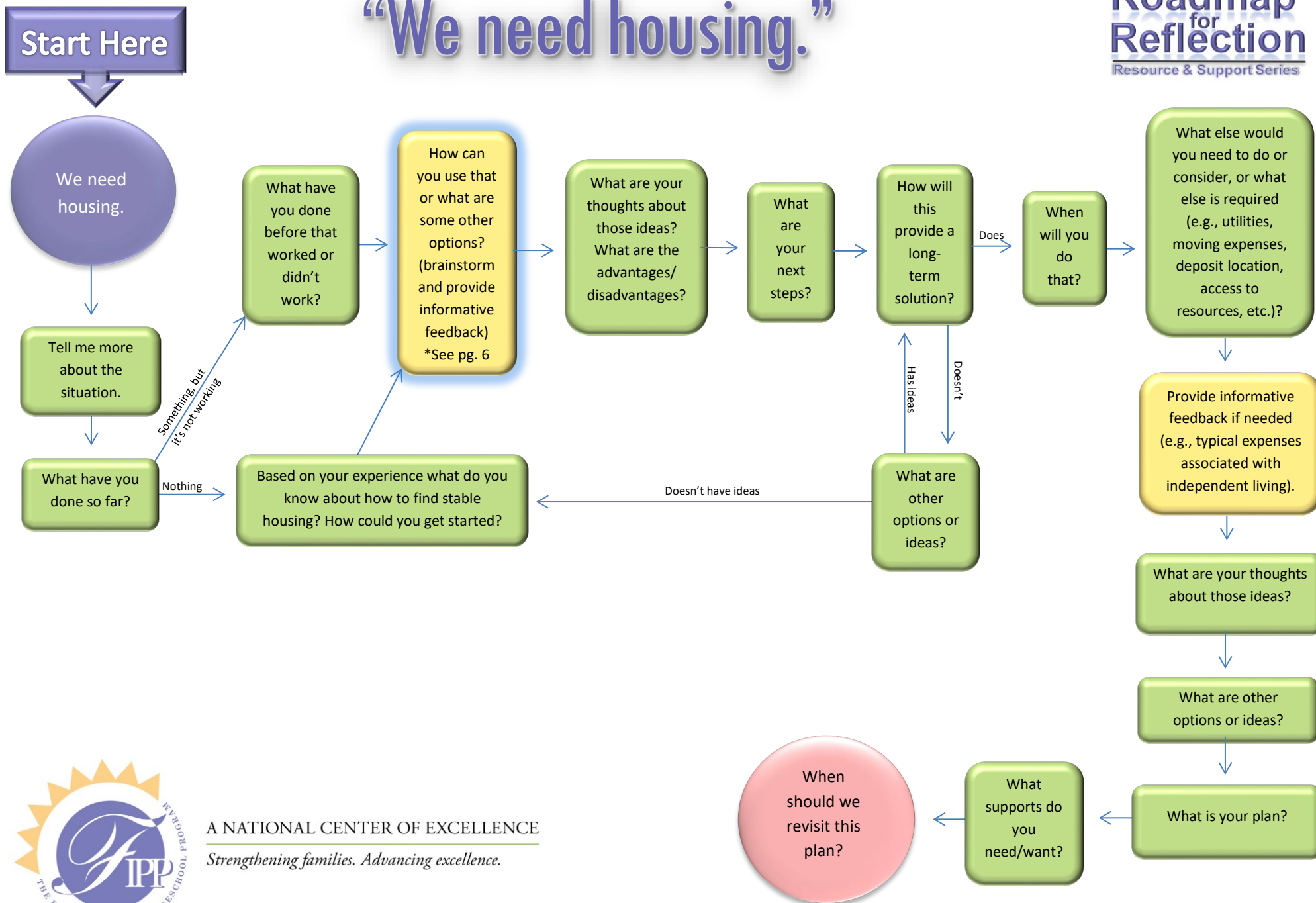
Short-Term/Expendable Resources

- Women, Infants, and Children (WIC) Program
- The Supplemental Nutrition Assistance Program (SNAP)
- Crisis Assistance through Departments of Social Services
- Churches
- Local food pantries
- Homeless shelters
- Local public school districts

Long-Term/Renewable Resources

- Family
- Friends
- Neighbors
- Community gardens
- Private gardens
- Budget planning
- Couponing
- Shopping sales
- Comparing prices
- Making decisions about necessity items vs. luxury items

“We need housing.”



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Informative Feedback to Assess the Expenses Associated with Housing

A variety of fees can be associated with renting a home or an apartment. Fees vary depending on the area, type of home, and the landlord's policies, so it is important to gather information about possible expenses during your search for a home. Families may want to ask about the following potential expenses:

Application Fee—Some landlords charge an application fee to cover the cost of the credit and background checks.

Security Deposit—Some landlords charge a security deposit to pay for any damages that occur to the home while you are staying there. In most cases you will get the deposit back when you move out if there are no damages to the home.

Pet Fee—Some landlords do not permit pets in rental homes, while others charge a pet fee depending on the size and type of the pet. Sometimes the pet fee is returned at the time you move out if there is no damage to the home.

Parking Fees—Some landlords charge a parking or garage fee in addition to the rent.

Utilities—Some landlords include utilities such as water and electricity in the rent, while others expect you to pay your utilities directly to the utility companies.

Garbage removal Fee—Some areas have local fees for regular garbage removal.

Maintenance Fee—Some landlords charge a fee to take care of the lawn and maintain the building.

For more information on fees associated with renting, see the U.S. Department of Housing and Urban Development at <https://www.hud.gov/>

When deciding how much they can afford to pay to rent a home, most financial specialists agree that a family should not pay more than 25-33% of their monthly income in order to have funds available to meet other expenses. To calculate affordable rent, multiply monthly income (take home pay) by .25. For example, if monthly take home pay is \$950 per month and one wanted to keep housing expenses below 25% ($\$950 \times .25 = \237.50), one would need to find an apartment for \$237.50 or less per month.

Ramsey, D. (2009). Total money makeover. Nashville, TN. Thomas Nelson Group.
Orman, S. (2011). The money class. New York: Spiegel & Grau.

Informative Feedback to Assist in Finding Affordable Housing

When searching for housing options, some families may find that their available budget does not support the rent costs of many local properties. Affordable housing options are available in most cases, but families may need to seek specific options and programs:

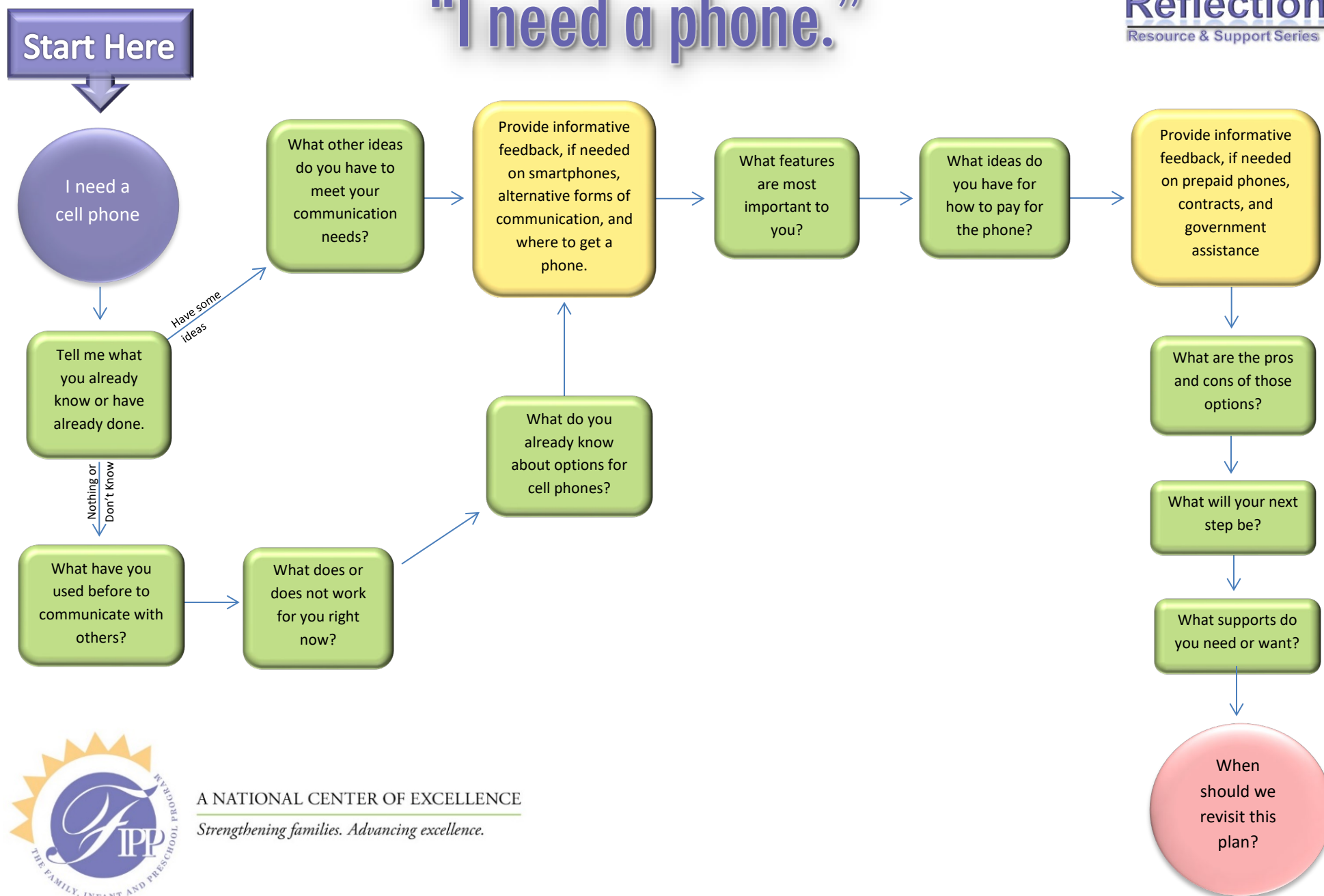
Privately-owned subsidized housing: These properties receive government funds to offer reduced rent to low-income tenants. Qualifications may vary, but for these options families typically apply directly to the management office. Having a conversation with the management is often the best way to learn about availability or get on a waiting list for available units. Your county should have more information on subsidized housing available in your area.

Housing Choice Voucher Program (formerly Section 8): This program helps pay for rental housing for families with low income, senior citizens, or families including an individual who has a disability. Families can find their own housing and the voucher can pay for some or all of the rent. Families apply for a voucher through the local public housing authority (PHA). For information on local PHAs, see https://www.hud.gov/program_offices/public_indian_housing/pha/contacts. Wait lists for public housing vouchers can be lengthy and require proof of citizenship or permanent residency and income. Families should be prepared for alternative options while applying for housing vouchers.

Many states also have state-owned affordable housing options available for those who qualify for housing assistance. Information on these properties can be found at the HUD website, as well.

Families who are waiting for access or who cannot access affordable housing may need to consider other housing options. Many areas provide shelter homes, which may be specifically for women and children escaping domestic violence, may involve a programming requirement, or may have specific gender or age requirements. Families can also consider informal resources such as family or friends who can provide housing on a short-term basis while they explore other options.

“I need a phone.”



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Informative Feedback for Accessing a Phone

Cell phones can be vital sources of communication for employment, safety, and social networking. For many families, cell phones are also the primary means of accessing the internet. Families without access to the internet at home may also use a public library for internet research, applications, and other online needs. When considering options for cell phones, families may consider the following:

Price: Budgeting will provide an idea of a starting amount available for a cell phone. Family plans may provide discounts for families requiring multiple phones. Prepaid cell phones allow users to pay for calls as they use them or on a monthly basis, while contracts will charge a flat amount each month. Some cell phone providers require two-year contracts or provide discounts for customers agreeing to a two-year contract, although some providers will allow for shorter contracts. Families can talk to friends and family about their experiences with their cell phone carrier to determine what options may work best for them. In addition to calls and texts, most plans also provide access to data for internet access. Most plans have a capped amount of data available each month.

Government Assistance: Families who qualify for Medicaid, SNAP, or other income-based assistance programs may be eligible for the Lifeline Program, which offers free cell phones and low-cost plans. Lifeline services allow limited data and calls and texts for significantly reduced costs.

For more information, visit: <https://www.fcc.gov/general/lifeline-program-low-income-consumers>.

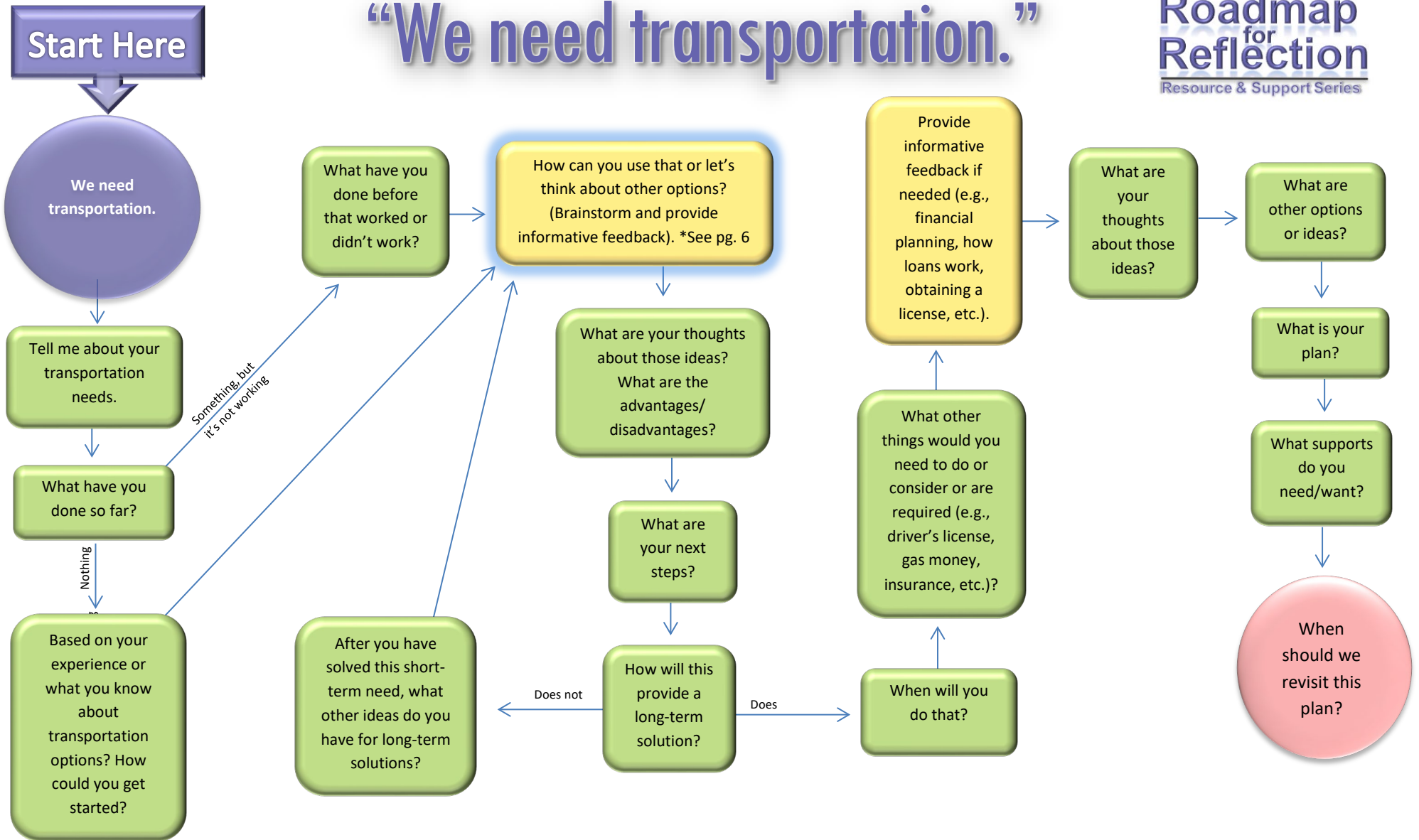
Coverage: While some providers may be more affordable, families must also consider the service coverage in their area, particularly in rural areas. Talking with neighbors and coworkers can aid in this process. Most cell phone carriers also offer interactive maps on their websites showing coverage in various locations.

Phone Types: “Smart” phones offer access to the internet as well as applications (apps). Some schools and workplaces use apps for essential communication. Families should consider whether a smart phone is necessary for their situation, as they are typically more expensive than phones without internet capabilities. Smart phones also require data plans to continue accessing the internet and many apps. Many phone contracts provide allowances for new smart phones every two years, and pre-owned phones are often available at significantly reduced costs from cell phone carriers, on the internet, or for sale locally.

Safety: Parents should make a plan for safety when using cell phones with or around children. The American Academy of Pediatrics recommends none to very limited screen time for all children age 2 years and younger. Additionally, older children may use cell phones to communicate with strangers or access websites that are unsafe. Parents should carefully monitor all use of internet and cell phones and have open conversations with children about appropriate use of cell phones and data, as well as considering parental control applications and password requirements for downloading new applications or using certain features.

Alternatives: Some cell phone plans restrict use when a certain volume of calls, texts, and/or data have been used for the month. Families should monitor this usage and know when service may be limited. Inability to make and receive emergency contact can be a significant safety concern, and families should always have a backup communication plan with family, friends, medical providers, and other community supports. Facebook Messenger, Google Voice, and other online services allow messaging for families who do not have access to the cell phone plans. In case of emergency, many landlines and cell phones will allow a user to call 911 without active phone service.

“We need transportation.”



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Informative Feedback to Assist with Acquiring a Vehicle

Many families seeking to acquire a vehicle will find it necessary to use a loan for part or all the cost of the vehicle. Transportation is important, but it is important to support families in considering ways to choose financing options that are fair and safe.

Predatory lending involves fraudulent or abusive practices on the part of a lender or broker that strip equity from the consumer, increasing the risk of foreclosure. These practices may promise to lower monthly payments, but drastically increase the amount the borrower pays overtime. Predatory lending establishments are often located in neighborhoods with high concentrations of people living in poverty and seem to be the only accessible resource for some families. In many instances, borrowers can qualify for a more suitable loan with significantly better terms by shopping around especially in neighborhoods that offer multiple car dealerships.

Families can guard against predatory lending by following these guidelines:

- Always shop around.
- Ask questions.
- If you do not understand the loan terms, talk to someone you trust to look at the documents for you.
- Do not trust ads promising "No Credit? No Problem!"
- Ignore high-pressure sales tactics.
- Do not take the first loan you are offered.
- Remember that a low monthly payment is not always a 'deal.' Look at the TOTAL cost of the loan and the length of the loan period.
- Be wary of promises to refinance the loan to a better rate in the future.
- Never sign a blank document or anything the lender promises to fill in later.

Information from Consumer Reports (www.consumerreports.org) and Center for Responsible Lending (www.responsiblelending.org).

Interest rates for new and used cars can vary (usually between 1.59% and 5.59%) depending upon the length of your loan and your credit score. Families should sign-up for the shortest-term length they can afford to get the lowest rate possible. Families can also check your credit score to be sure that it is accurate.

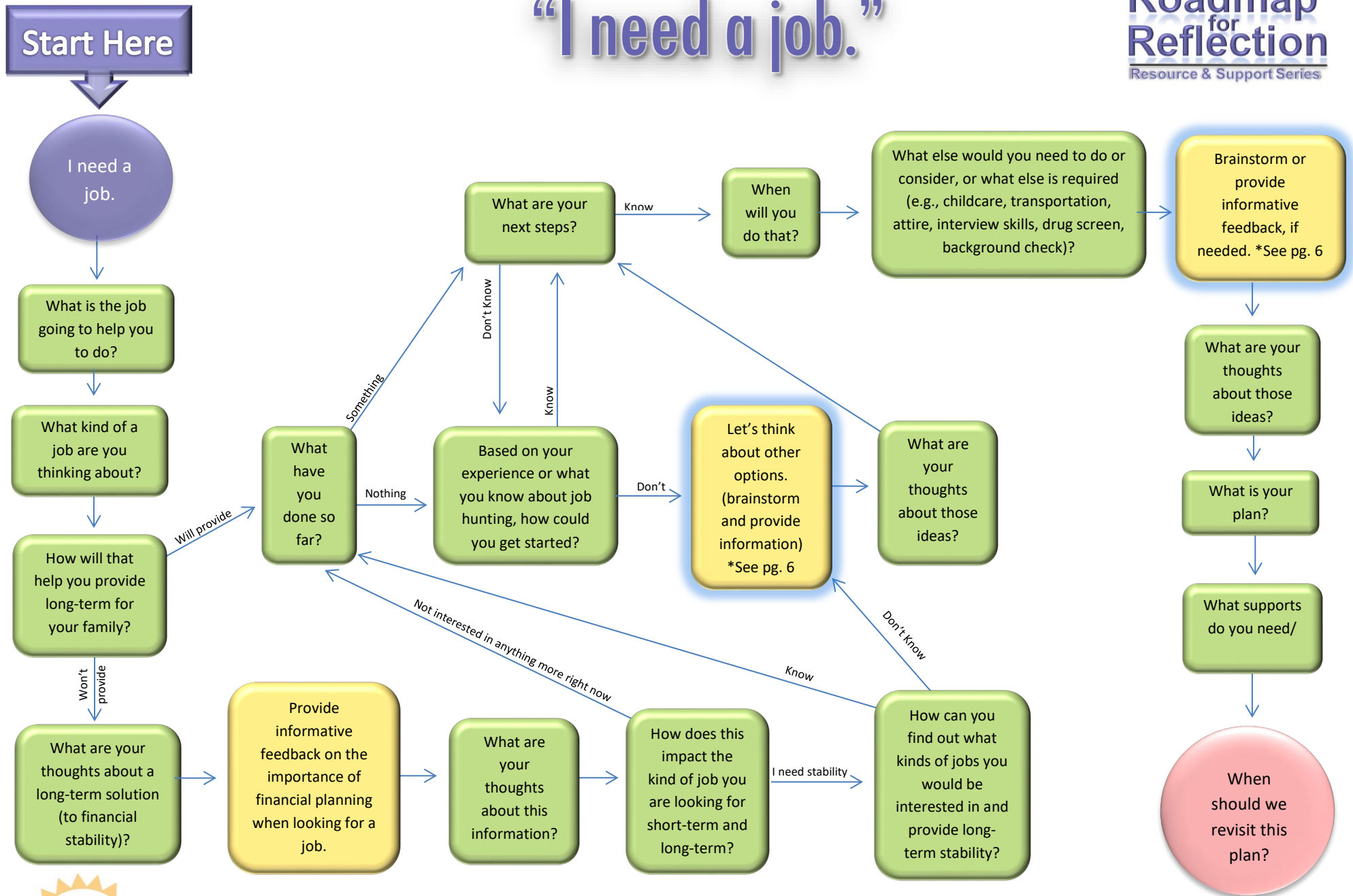
Finding out the true market value (TMV) of a vehicle is the best way to negotiate a good price. Edmunds (<https://www.edmunds.com/>) reports the average actual selling price around the country for specific vehicles. Kelley Blue Book (www.kbb.com) also calculates the actual value of a used car. Families who are able to share what they know about the value of the vehicle in which they are interested can give them leverage to lower the asking price.

Driver's License: Some adults may have access to a vehicle, but not a current driver's license. Adults over the age of 18 who have never had a driver's license are eligible for licensure without a learner's permit in most states. Most states require a knowledge test, road test, vision test, and proof of legal permanent residency for applicants seeking a driver's license. For more information on each state's specific requirements, families can search online for their state's Department of Motor Vehicles (DMV) website or visit the office in person.

Public Transportation: This may also be an option for some families, particularly those in larger urban areas. Local government websites often have information about public transportation options. Informal resources can also be an option for transportation. Consider who families may know who have reliable transportation and how carpooling or other collaboration can help meet transportation needs. For emergency trips, ride share services may also be an option.

If families are not able to purchase a car or access public transportation, consider how formal and informal transportation options might support transportation needs. Non-emergency medical transportation is often available from Medicaid for families who qualify. These services may vary by county and state but are typically available for transportation to medical appointments covered by Medicaid.

“I need a job.”



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Informative Feedback for Finding a Job

Supporting individuals in looking for a job is a great way to help build capacity for long term financial independence. Caregivers looking for jobs should consider several factors when thinking about what sort of job is the best fit:

- What skills or qualifications do I already have?
- What hours or shift would I be available to work?
- Who will care for my child while I am working?
- How will I get to my job each day?
- What kind of salary and benefits does my family need?

Finding Potential Jobs: Once these factors have been considered, the next step is to look for opportunities in the community. Potential jobs may still be found through traditional means, such as newspaper ads, seeing a sign at a business that is hiring, or through word of mouth, from a friend or acquaintance. Using social networks to find a job can be particularly helpful as friends and acquaintances may be willing to serve as a reference. Help the caregiver think about their network and finding out about where their friends or family work that may be hiring. Online job search engines, such as <https://www.indeed.com/>, <https://www.careerbuilder.com/>, or <https://www.simplyhired.com/> can be helpful starting points to find potential jobs and many allow you to apply or submit your resume straight from the site.

Applications: Once individuals have located a job, they will need to start the process of applying for jobs that fit their priorities. Most applications require a resume and references. Help the coachee brainstorm about people in their life who might be willing to serve as references. References who have worked with the individual in a professional capacity are often the best option, and it is important to talk to potential references about what type of reference they are likely to provide.

Resumes:

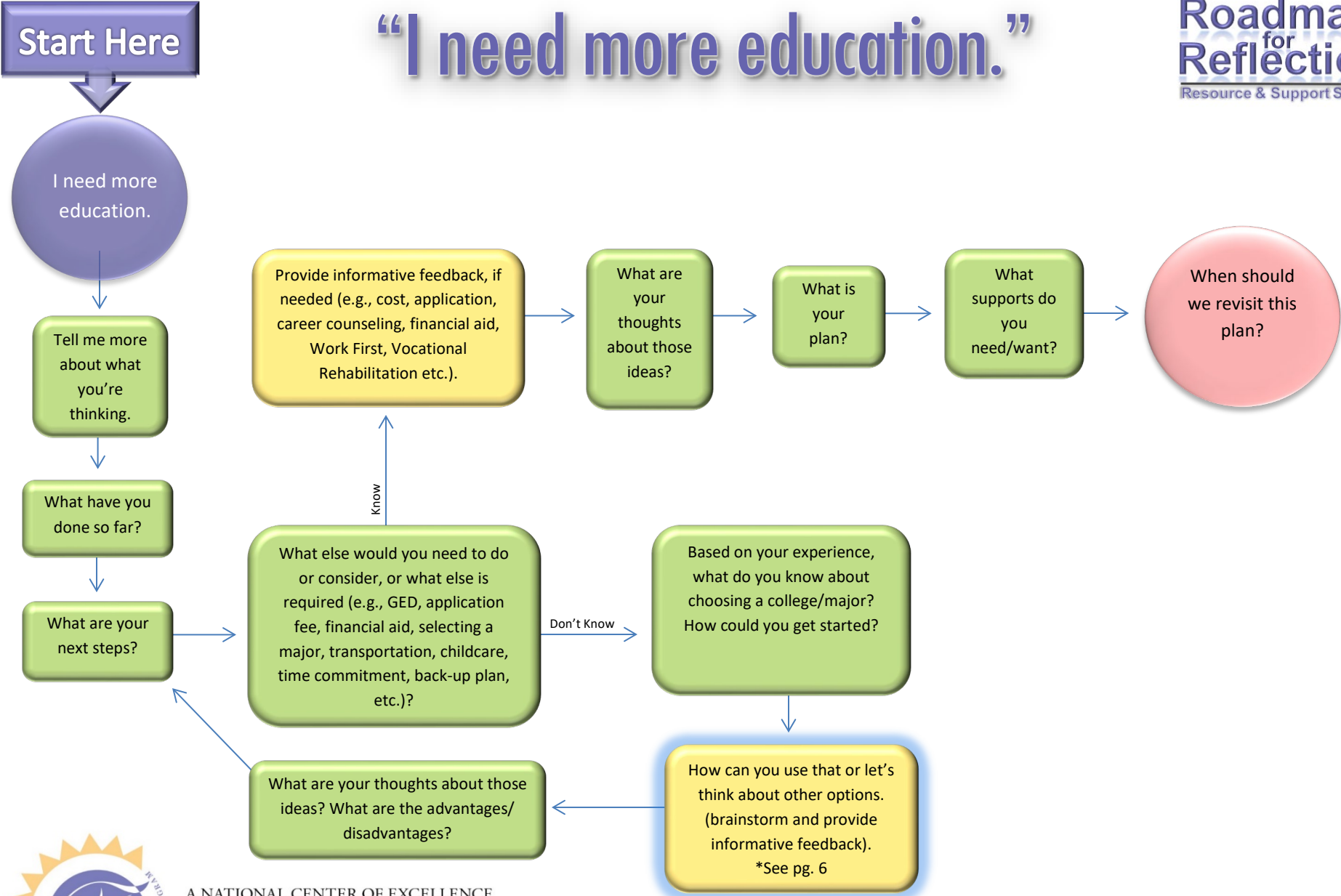
Resume building is another important piece of the application process. A good resume will include recent job experience, education, and community involvement. Many local colleges and organizations will offer resume building workshops to help applicants build a strong resume. Templates for resumes are also available online through a variety of sources. Applicants should also be prepared for the possibility of an interview or background questionnaire.

Job Interviews:

Most job interviews will ask the applicant about their work history, their interest in the job, and may ask what questions the applicant has for the interviewer. Applicants should consider how their clothing, eye contact, and grooming may contribute to their first impression. Community agencies such as vocational rehabilitation and non-profits may offer mock interviews in addition to resume support and job skills training. The following link contains tools for job seekers from the state of North Carolina:
<https://files.nc.gov/ncdhhs/documents/files/JobSeekersToolKit%282019WR%29.pdf>

Community Resources: Caregivers with a disability may be eligible for vocational rehabilitation. This community resource can both aid in the job finding process and provide supports in the work environment. Other organizations in the local community may be available to assist job seekers and calling 211 is a great way to start the process of finding community resources.

“I need more education.”



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Informative Feedback to Assist with Choosing an Educational Course of Study

Selecting a course of study requires balancing the individual's interests, skills, and personal strengths. Most colleges and universities have a career services office, sometimes called a career center or placement office that helps students find a career that matches their education. Before selecting a major, the career services office can use some assessment tools to help them examine potential majors that might be a good fit and help accomplish their career goals. Toward the end of a degree, this office can help with resume and cover letter writing and job interview preparation to obtain the job they were educated to do.

Many states offer vocational rehabilitation services to assist individuals with disabilities to access training and support to enter the workforce. The vocational rehabilitation program can help individuals to determine where their strengths, skills, and interests lie. Individuals can find out about the vocational rehabilitation offered in their state by searching for vocational rehabilitation online, or by calling 211. Each state's Temporary Assistance to Needy Families (TANF) also provides individuals with resources to help select a course of study that will lead to a career that matches your interests and strengths and will support your family.

Many states also have a system for providing college and career planning resources. For example, the College Foundation of North Carolina also provides online assistance in planning for college, including selecting a major, choosing a college, meeting the entrance requirements, college test preparation, and career planning.

Information from: College Foundation of North Carolina (<https://www.cfnc.org/>) and U.S. News and World Report, 2011 (www.usnews.com).

Informative Feedback to Assist with Obtaining Educational Financial Aid

College Foundation of North Carolina (CFNC) is a free service that helps students plan, apply, and pay for college and provides extensive resources to prospective students including a mechanism for streamlining the application process, information about financial resources including grants and scholarships, work, loans, saving, installment payment plans, and financial literacy assistance.

Students interested in obtaining any need-based financial aid should start with completing the Free Application of Federal Student Aid (FAFSA). The application can be completed online and sent to each school to which the student is applying. In addition, students may qualify for merit-based scholarships. It takes time to investigate the opportunities. The best way to get started is to contact the college or university to learn about eligibility to apply for their merit scholarships. Students can also check with their high school counselor to learn about possible scholarships from foundations or other organizations in your community. In addition to school or state-based options, many websites will search for scholarships for potential applicants based on background information, such as fastweb.com.

Information from: College Foundation of North Carolina (<https://www.cfnc.org/>)

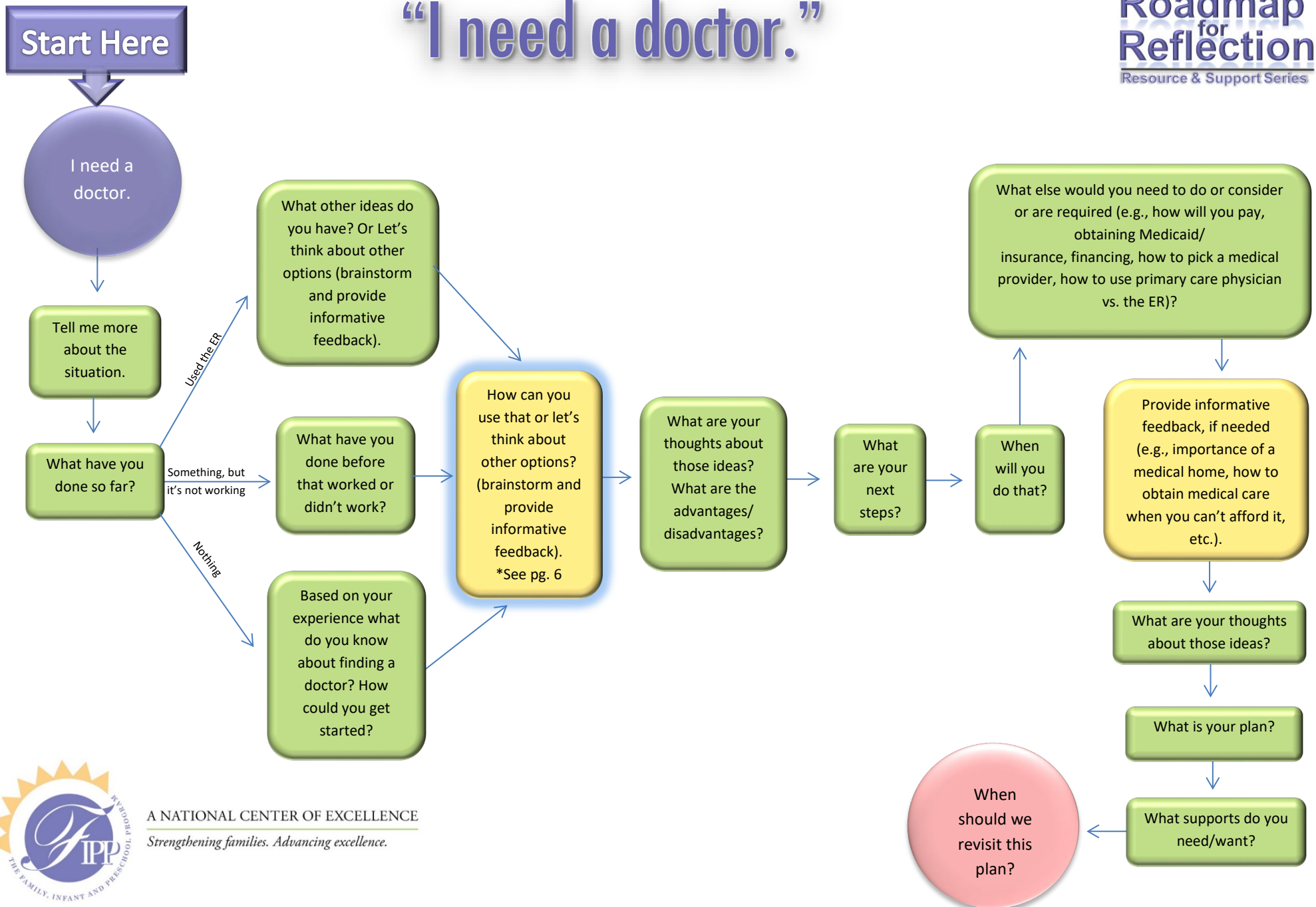
Resources for Funding Higher Education

Tax Benefits for Education through the Internal Revenue Service (<https://www.irs.gov/>)

Free Application for Federal Student Aid (<https://studentaid.gov/h/apply-for-aid/fafsa>)

North Carolina State Education Assistance Authority (<http://ncseaa.edu/>) (or search for similar options in your state)

"I need a doctor."



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Informative Feedback to Assist with Selecting a Doctor

A medical home provides acute, chronic, and preventative health care services, coordinates health care services, and promotes optimal health. The American Academy of Pediatrics stresses that health care for children and adults should be provided by a medical home and that the medical home must be accessible, family-centered, continuous, comprehensive, coordinated, compassionate, and culturally effective. Using a medical home and reserving emergency room visits for unexpected emergencies saves time, money, and lives. Having an ongoing relationship with a physician who knows the family and the child well is the best way for the family to stay healthy.

The following are examples of what to look for in a medical home:

- If it becomes necessary for your child to be hospitalized, where would he/she be admitted?
- Is the pediatrician's office conveniently located? Is it easily accessible by car or public transportation?
- Are the office hours convenient for your own schedule? Some offices have weekend hours.
- Is there a nurse in the office who can answer routine questions?
- Do you sense a genuine interest by the doctor in the problems of your child, including health disorders he/she may have?
- Do both the physician and the office staff appear friendly and courteous? Do they demonstrate compassion and patience? Is there a feeling that patients are being rushed through, as though the doctor is eager to move on to the next patient?
- How are visits for acute illnesses handled? Can appointments be made on short notice if your child needs to see the pediatrician because of a sore throat or an infection, for example?
- Does the doctor communicate clearly, using layman's language (not medical jargon) to explain illnesses and treatments, and does the doctor make an effort to ensure that all your questions are answered?
- Do the office staff and providers speak a language known by the family or provide onsite interpretation services?
- What are the doctor's usual fees for sick visits, routine examinations, and immunizations? What is the office policy regarding the processing of insurance forms or Medicaid?

- If your child should ever develop a complex illness that requires the care of one or more specialists, will your pediatrician coordinate care among all the doctors providing treatment?
- What medical school did the pediatrician attend, and where did he or she undergo postgraduate and residency training? (Medical directories in many public libraries—such as the Directory of Medical Specialists and the American Medical Directory—can also help answer these questions.)

Other providers: In addition to a pediatrician, some children and families may receive care from other medical professionals, potentially including some of the following:

Physician's Assistant (PA) or Nurse Practitioner (NP): These professionals also see young patients and work alongside pediatricians and other physicians. They are able to do many of the tasks physicians do, including writing prescriptions. For some families, a PA or NP may be an option for a primary care provider.

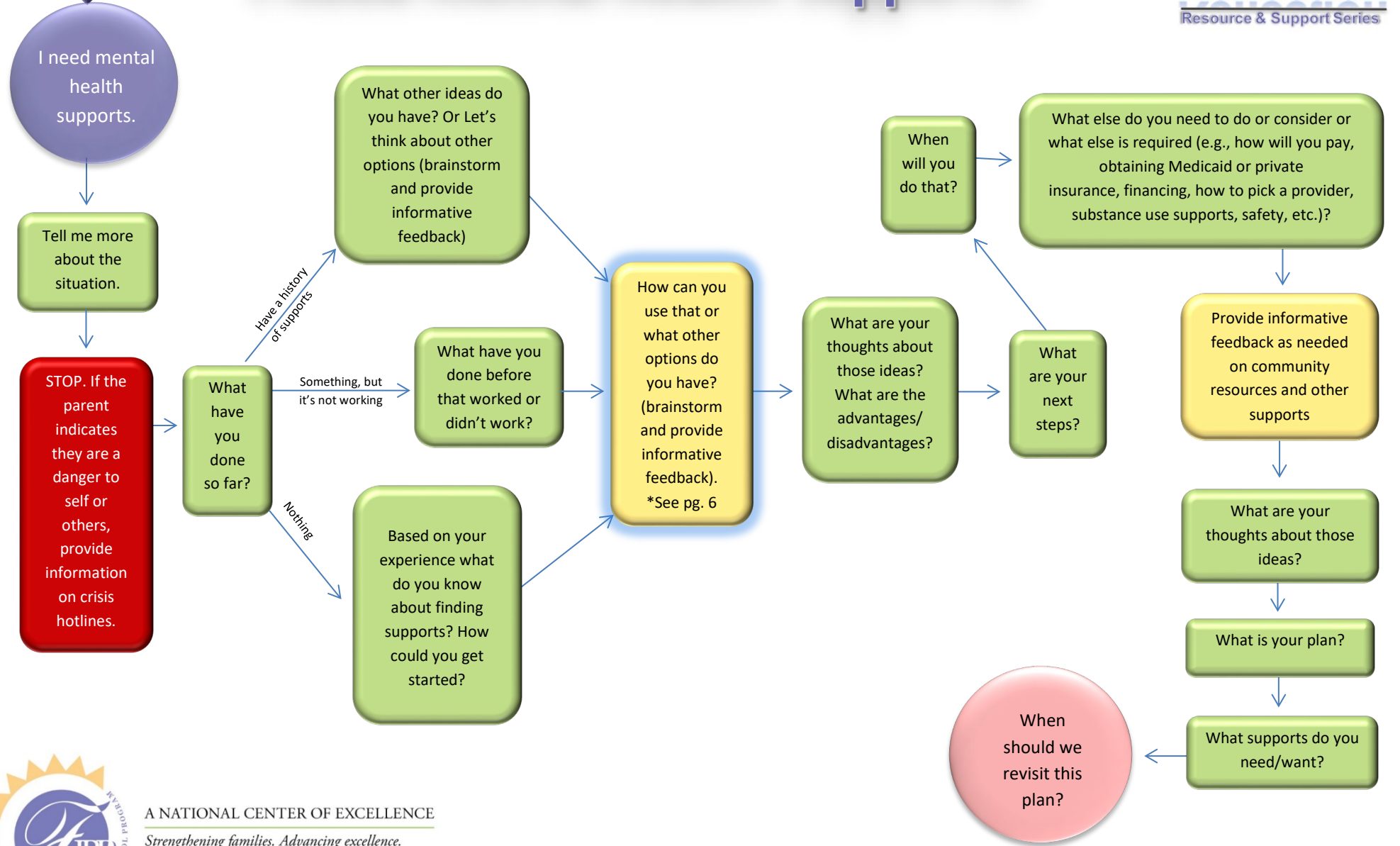
Specialists: Some children will be referred to physicians who have received additional training in a medical specialty. Specialists may operate in different locations, and often these appointments require more travel and planning. Families can research options when referred for a specialist service, and should consider how a specialist's location, specific expertise, partnerships, and other factors are a match for family priorities. Specialists may be more expensive, located exclusively in more populated areas, have longer waiting lists, and require a referral from the child's primary care provider.

Family Practitioners: Family physicians take care of patients of all ages, from children to seniors. Their training time is similar to pediatricians, but their training is less specifically focused on child development. Some families find it convenient to have one provider for the entire family, but others prefer having more specific pediatric knowledge for their child's provider. Families of children with developmental delays or disabilities may need to consider their provider's level of knowledge about their child's specific condition.

Information from the American Academy of Pediatrics. For more information visit www.aap.org.

Start Here

“I need mental health supports.”



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Informative Feedback on Accessing Counseling/Recovery Help

Counseling, recovery, and other mental health supports are vital lifelines. When an individual expresses a need for mental health supports, it is important to remember that early childhood intervention providers are not licensed mental health providers. While early childhood intervention providers can support families in identifying and accessing resources for mental health supports and may provide supports related to child social-emotional development and behavior, they should never provide direct mental health supports to children or parents without specific licensure to do so. If providers have concerns that mental health support needs may be endangering any individual, including the individual reporting the concern, they have a duty to report those concerns to child or adult welfare services.

Crisis/Emergency Hotlines

National Suicide Prevention Lifeline

1-800-273-TALK (8255) (Spanish 1-888-628-9454)

<https://suicidepreventionlifeline.org/>

National Sexual Assault Telephone Hotline

1-800-656-HOPE (1-800-656-4673)

<https://www.rainn.org/about-national-sexual-assault-telephone-hotline>

National Domestic Violence Hotline <https://www.thehotline.org/>

1-800-799-7233 (TTY 1-800-787-3224) or text LOVEIS to 1-866-331-9474

Crisis Text Line <https://www.crisistextline.org/>

Text “HOME” to 741741 (US & Canada- also available in UK & Ireland)

National Alliance on Mental Health HelpLine

The NAMI HelpLine can be reached Monday through Friday, 10 am–6 pm, ET. 1-800-950-NAMI (6264) or info@nami.org

Accessing Mental Health Supports: Adults seeking mental health supports can receive a referral from a physician, clergy member, or local crisis center. Once they have a referral, insurance providers will have records of in-network providers. Many employers also offer Employee Assistance Programs (EAP) that may offer mental health services free or at reduced cost. If an individual cannot afford mental health supports, local health departments or other agencies often offer low-cost services on a sliding fee scale.

Types of Mental Health Supports: Mental health supports can be provided by a variety of professionals using a variety of methods. Individuals seeking supports should consider whether they would prefer individual therapy, group therapy, family therapy, art or music therapy, and whether they prefer a provider such as a psychiatrist or psychologist, a licensed social worker or counselor, a religious or pastoral counselor, or a provider specializing in substance use disorders.

For more information on finding and accessing mental health supports, consider exploring local support groups or visit <https://www.mhanational.org/finding-help-when-get-it-and-where-go> or <https://www.nami.org/Support-Education>

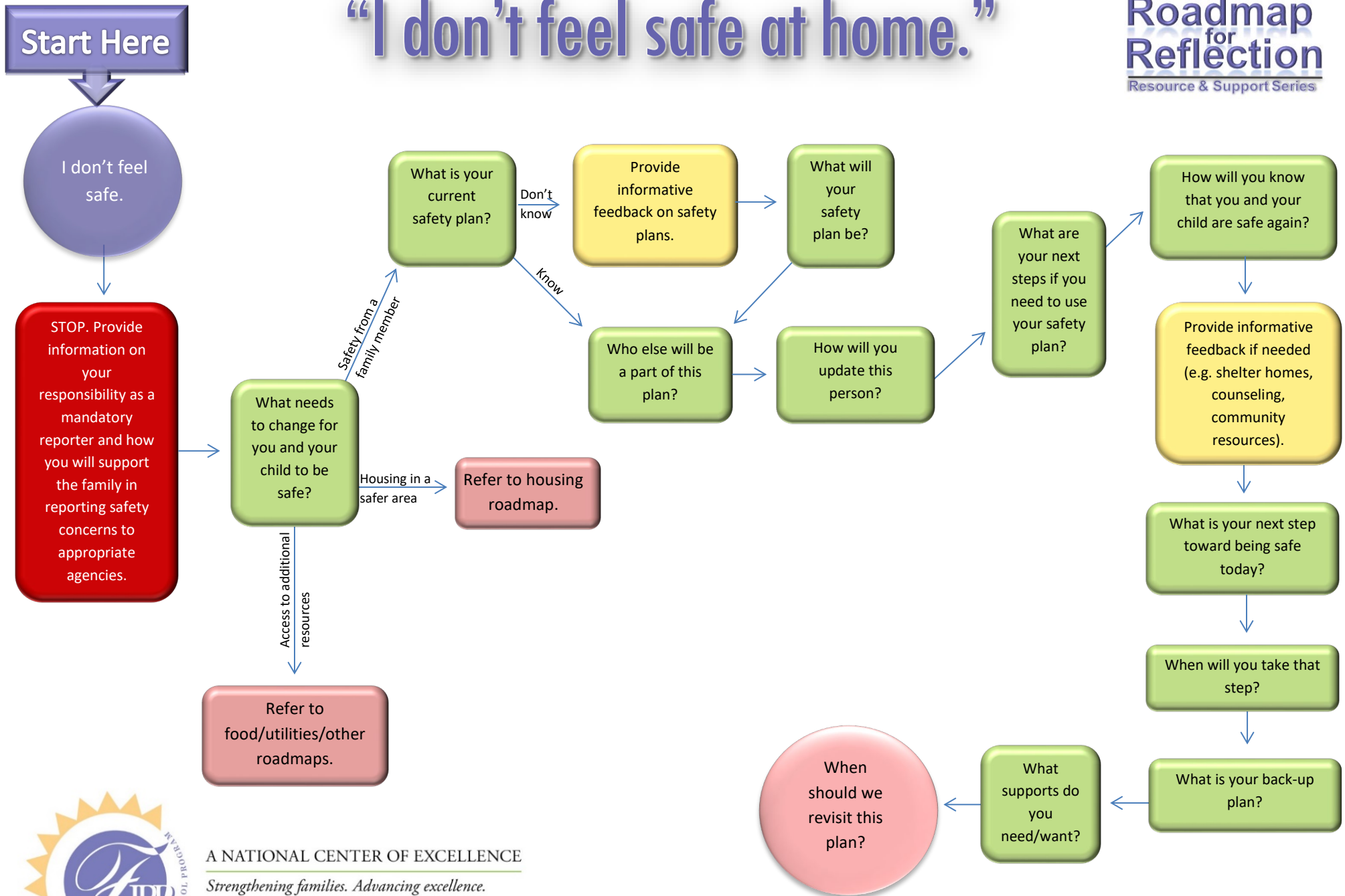
Substance Use Disorders: Individuals seeking support for recovery from substance use disorders can access a variety of supports specific to this need. National groups such as Alcoholics Anonymous and Narcotics Anonymous provide social supports, and other clinics such as opioid rehabilitation clinics can provide medical supports from trained professionals to help individuals in recovery.

For more information on supports for individuals with substance use disorders, visit <https://dpt2.samhsa.gov>.

Trauma and Toxic Stress: Children and adults with a history of trauma may experience what is known as toxic stress. Toxic stress can negatively impact health and wellness long after the initial trauma has resolved. Individuals with a history of toxic stress benefit from trauma informed care that promotes resiliency and strong social relationships. Families who receive early intervention supports can learn to build social skills to support resiliency in adults and children alike.

For more information on toxic stress and trauma informed care see Harvard’s Center for the Developing Child at: <https://developingchild.harvard.edu/science/key-concepts/toxic-stress/>.

“I don’t feel safe at home.”



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Informative Feedback for Making a Family Safety Plan

Providers with a reasonable suspicion for abuse or neglect of any adult or child are legally obligated to report their suspicions to local authorities. Reports may always be issued anonymously. For suspected abuse or neglect of a child, contact your county child protective services, and for suspected abuse or neglect of an adult contact adult protective services. **In case of an emergency that poses immediate harm to any individual, call 911.**

Resources Available to Families

When possible, providers can work with families to make a plan to prevent abuse and neglect. Social services can support a family without removing a child, and often can provide access to resources such as vouchers for childcare and assistance in finding employment. Providers should discuss these resources with families and communicate clearly and openly with families whenever doing so will not endanger another individual's safety or well-being.

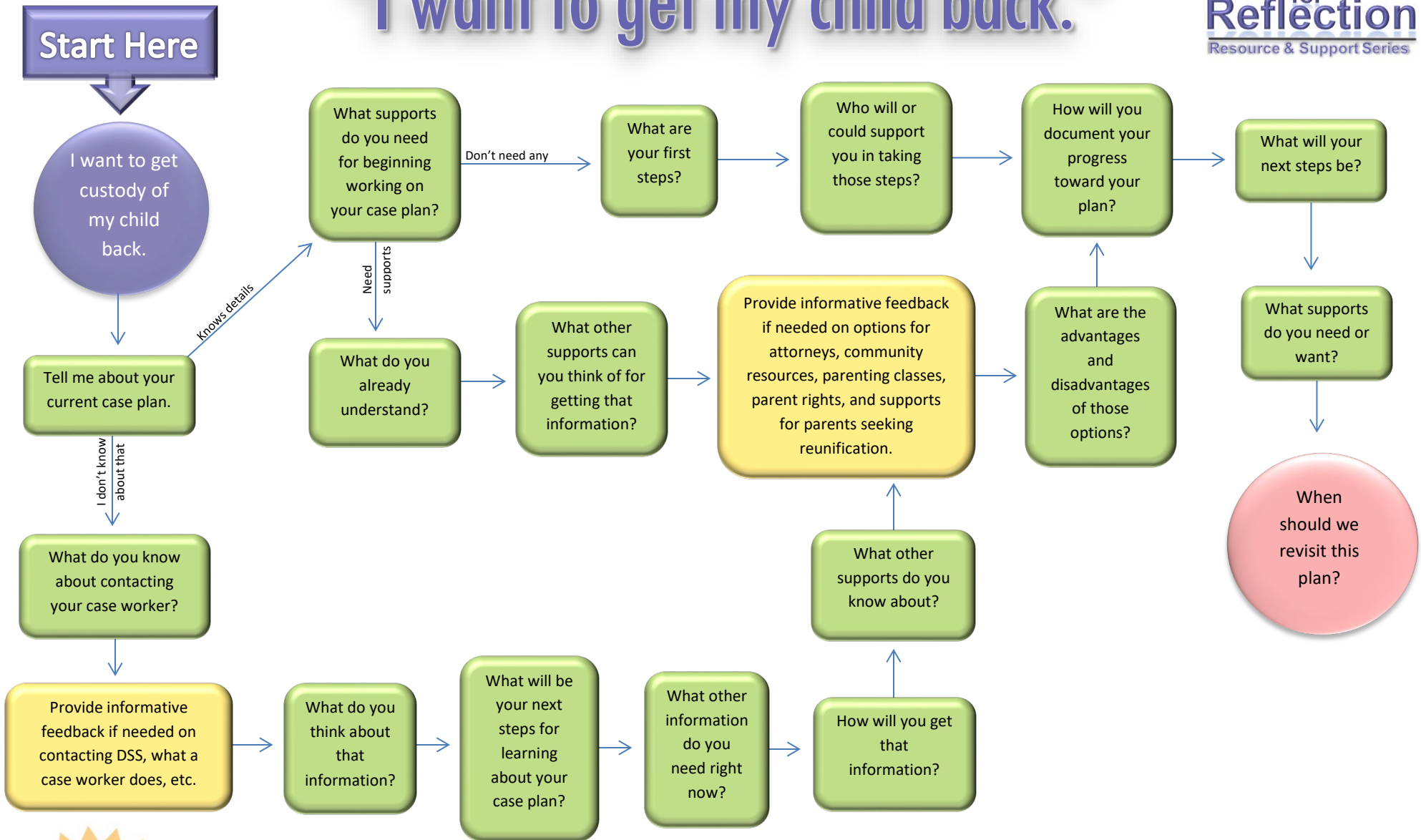
Individuals who feel unsafe at home may also benefit from discussion about accessing appropriate mental health supports for themselves and their children. For more information about ensuring family safety and resources about safe relationships see: <https://eclkc.ohs.acf.hhs.gov/publication/families-thrive-zero-five-safety-card>.

Developing a Safety Plan

In cases where a family member feels unsafe, providers can provide information on developing a safety plan. Safety plans should include:

- Individuals who will be contacted when the plan is enacted.
- Methods for communication such as cell phones that cannot be tracked using location services or turned off by other family members.
- Methods of transportation that do not rely on other family members such as public transportation, friends and family, or a vehicle with keys on one's person or hidden in a safe place.
- A safe place to go, whether a local shelter, home of friends or family, or public safe space.
- A plan for contacting authorities to provide restraining orders and other legal protections.
- Plans for child safety in schools, childcares, or other public places.
- Clear communication among trusted friends and family members.
- Documentation of history of violence, threats, abuse, or other unsafe behavior.

“I want to get my child back.”



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Informative Feedback on Family Reunification

Reunification is the primary goal of the foster care system. Families seeking reunification with their children have rights including, but not limited to the following:

- The right to know why children were removed from the home
- The right to have children placed with relatives whenever possible
- The right to have siblings kept together whenever possible

All families whose children enter the foster care system will be assigned a case worker. The case worker facilitates contact between the foster family, birth family, and children in addition to monitoring the case plan. Case plans are designed to ensure that reunification is safe for children. In addition to a case worker, families and children may be assigned a guardian ad litem (GAL) or court appointed special advocate (CASA) to advocate for the needs of children involved.

Case plans may include:

Parenting Education: Some case plans include a requirement for parenting education classes. Many local agencies offer parenting supports and will document successful completion with a case worker. In many cases, early childhood supports may qualify as parenting education if provided over a sufficient period.

Counseling or other mental health services: Parents may be asked to complete counseling, undergo drug testing, or participate in substance use recovery programs. Case workers can provide information on local programs, many of which are available at reduced cost. These programs will provide documentation of completion to your case worker.

Specific safety plans: Some case plans include cleaning, home maintenance, or other safety projects for children to be safe in the physical environment. Case workers can provide more information on the specific requirements.

Visitation: Case plans may include supervised visitation with children in public spaces or brief unsupervised visitation. Additionally, family members may be able to supervise visitation. Participating in visits is an important piece of reunification, and early childhood intervention providers can provide supports during visitation for families seeking reunification.

Legal assistance: Families can hire an attorney, and those qualifying for financial assistance can be assigned an attorney free of charge. Attorneys can help manage court appearances and help families navigate the reunification process.

Families seeking reunification can use the following tool for further guidance on navigating the reunification process:

<https://www.childwelfare.gov/pubPDFs/reunification.pdf#page=2&view=What%20can%20I%20expect%20while%20my%20children%20are%20in%20foster%20care?/>

Excerpted from: Child Welfare Information Gateway. (2016). Reunification: Bringing your children home from foster care. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau.

Informative Feedback on Building a Social Network

Social networks are a valuable source of renewable, informal supports. In addition, social networks provide emotional supports for caregivers and children alike. In fact, social relationships have been shown in a variety of studies to improve maternal and child health, lessen the impact of toxic stress, and promote increased family quality of life. Children who are exposed to healthy social networks early in life have the tools they need to form healthy relationships and build resilience as they grow. Increasing the social supports of parents can impact the health and development of an entire family for many years after a child leaves an early childhood intervention program. Some families may see ECI providers as a source of social support, but providers should always provide guidance on how to develop social networks outside of providers and maintain professional boundaries.

Community/Eco-mapping is one way to begin the process of building a social network. An eco-map is a graphic representation or visualization of the family and linkages to the larger social system, including informal (e.g., friends, extended family members) and formal (e.g., early care and education providers, early intervention providers) supports. Families identify values, goals, and needs and use eco-maps to brainstorm potential connections. For a sample eco-mapping tool, visit <https://www.nndss.navajo-nsn.gov/Portals/0/PDF%20Files/Eco%20Map.pdf>

Information referenced from:

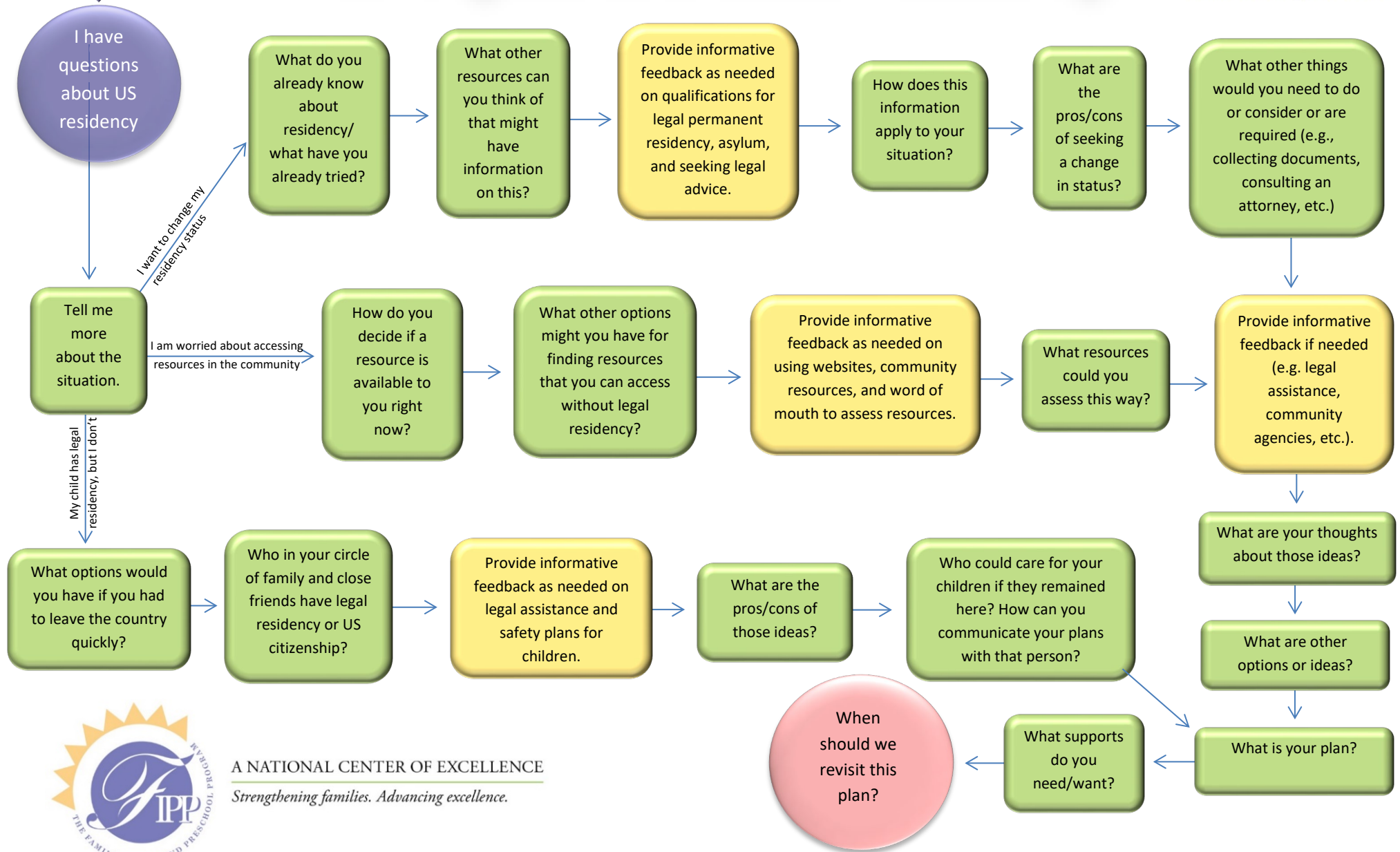
Thompson R.A., Flood, M.F. & Goodwin R. (2006). Social support and developmental psychopathology. In: Cicchetti D, Cohen DJ, editors. Developmental psychopathology. 2. Vol. 3. Hoboken, NJ: John Wiley & Sons, Inc; pp. 1–37.

Identifying Existing Connections: Whether using an eco-map or not, here are some places to begin brainstorming for social connections. Begin by identifying existing connections and then support families in brainstorming other ways to expand connections in these areas:

- **Workplace:** For parents looking for a job, refer to the *Roadmap* on finding a job.
- Extended family networks, including friends of extended family members.
- **Support groups:** Many areas have support groups specifically for families of children with specific diagnoses, populations such as grandparents raising grandchildren, young parents, or families in specific areas or demographic groups.
- **Library events/story times:** Many local libraries offer an open story time with activities for parents and children to complete together.
- **Childcare:** Many schools and childcare centers offer play groups where parents and children can meet in various community locations.
- **Church/religious gatherings:** For families with no religious affiliation, churches may offer free community groups and activities in addition to religious services.
- **Neighborhoods:** Many neighborhoods have formal and informal events for residents to meet one another and build rapport.
- **Recreation centers/community centers:** Agency such as the YMCA or local parks and recreation centers often offer community classes for parents and children or classes that also offer childcare.
- **Play groups:** Social media and other community parents may be helpful in connecting families to local playgroups.

Start Here

"I have questions about residency."



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Informative Feedback on U.S. Residency

Legal residency in the United States is an important factor in most employment, as well as for other resources such as getting a driver's license, accessing health insurance, and other social supports. In addition, individuals who do not have legal residency may worry about being forced to leave the country against their will. Never make assumptions about which families may have concerns about legal residency. Families benefitting from supports in this area can be of any ethnicity and any socioeconomic status. This is often a very sensitive topic of discussion that is best if brought up by the family, rather than probed by the provider. For families who request support around legal residency, several options and considerations can be discussed.

Understanding Status: There are many ways to legally reside in the United States. Individuals who are not US citizens may have a variety of residency statuses.

- **Legal Permanent Residency:** Sometimes called a “green card,” legal permanent residency means that an individual may live and work in the US indefinitely. This status is typically achieved through connections via family, marriage, or employment.
- **Refugee or Asylum Status:** Individuals who can establish a concern for harm or persecution in their native country may be able to apply for refugee or asylum status if they do so soon after entering the country. An immigration attorney can offer more information on this status.
- **Deferred Action for Child Arrivals (DACA):** DACA is available to individuals who came to the US as children and have no significant criminal record. DACA defers deportation for these individuals and allows them to work in the US. This status must be reestablished every two years.
- **Temporary Protected Status (TPS):** TPS may be available to individuals who have been impacted by a short-term event such as a war or natural disaster. For more information on individuals who may qualify for TPS, consult an immigration attorney, or visit <https://www.uscis.gov/>.
- **Visas:** Individuals seeking short term work, education, or other specific reasons for residency in the US may come on a Visa. Individuals in the US on a Visa should be aware of the time and location limitations indicated.

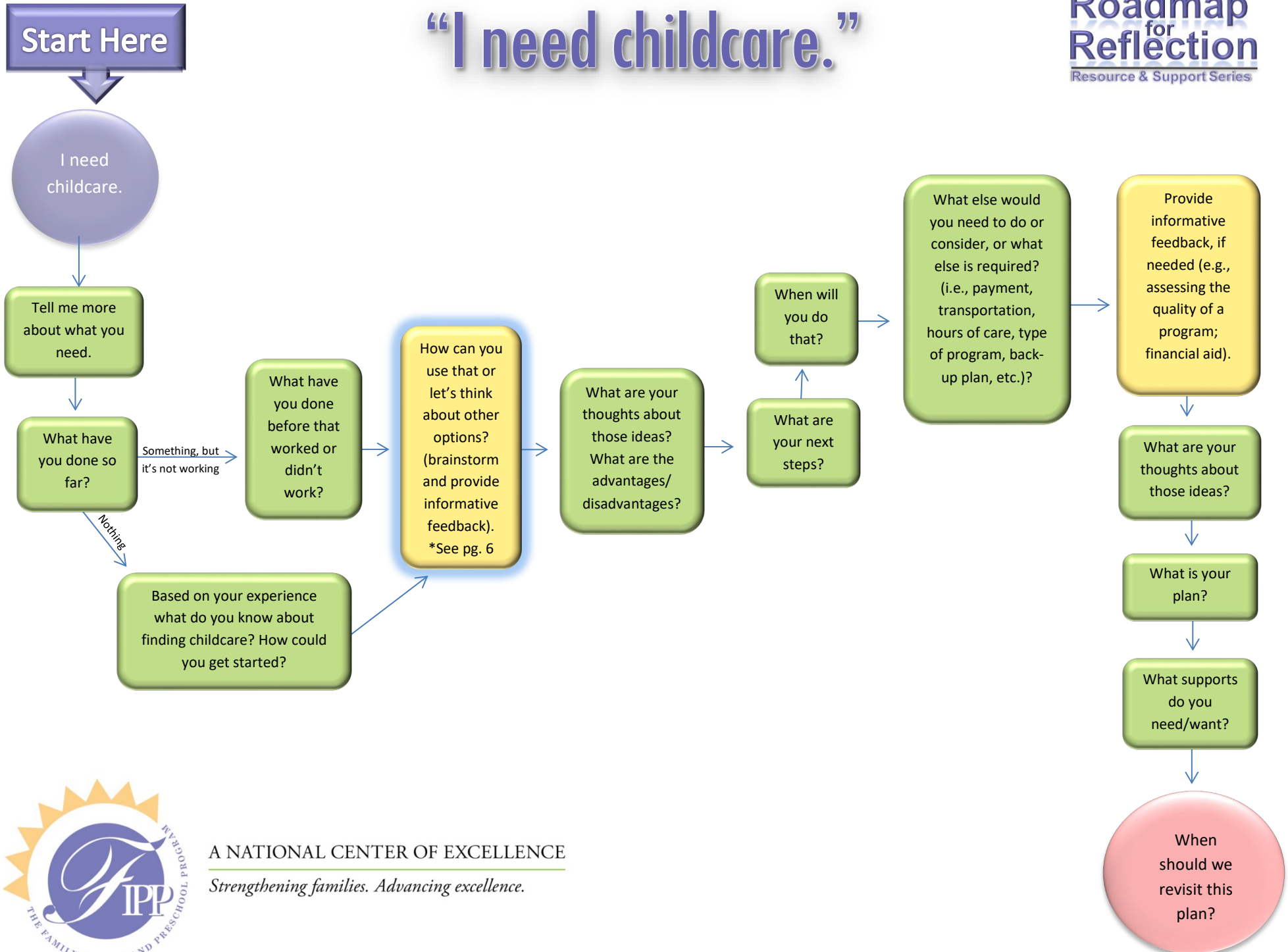
Options for changing status: Individuals seeking to change their residency status must complete paperwork, sometimes including a return to their native country. An immigration attorney can help individuals understand their status and make a plan for attempting to change their status. The American Immigration Lawyers Association provides a tool to search for attorneys in your area at AILA.org. Individuals seeking legal consultation should always ask what fees will be charged both initially and should a case continue. In many areas, pro bono legal assistance may be provided in certain cases. Local advocacy groups and assistance programs may be able to provide more information on these programs in your area, and a brief list by state can be found at <https://www.justice.gov/eoir/list-pro-bono-legal-service-providers>.

Social Supports: Many individuals with concerns about their residency status may be wary of accessing social programs and forming social networks. It is important to understand what supports do and do not require proof of legal residency for access. Online searches can be helpful in the process, as can discussing resources with trusted friends and community members. An individual should never feel compelled to share their residency status against their will. Individuals without documentation of legal residency may always access hospital emergency rooms, services provided by public school systems, emergency Medicaid for women who are pregnant, and emergency resources such as Special Supplemental Nutrition for Women, Infants, and Children (WIC).

Emergency Plans: Individuals who do not have documentation of legal residency should have a plan for what will happen if they are forced to leave the country quickly. Any child born in the United States is automatically granted citizenship, and some families may include members who do and do not have legal residency. In these cases, families should have a plan for whether any family members who have US citizenship will also leave, or whether they will stay in the US with a friend or family member. Clear planning for these situations can be stressful, but it is essential to keep children safe and cared for in emergency situations.

Information referenced from: U. S. Citizenship and Immigration Services (www.uscis.gov) and American Immigration Lawyers Association (www.aila.org).

“I need childcare.”



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Informative Feedback for Selecting High Quality Childcare

Deciding what to look for in a childcare program can be a personal decision. Not everyone defines “high quality” the same way and the most appropriate environment for one child may not be the most appropriate environment for another. Many parents look for a comfortable balance of the following:

- Clear policies and procedures
- Opportunities for parent involvement
- Opportunities for play throughout the day
- A violation-free license
- Close proximity to the family’s community
- Small group sizes
- Small child/teacher ratios
- Staff who smile a lot and use positive language
- Trained staff with early childhood degrees
- Safe and welcoming environment
- Regular parent communication
- Regular child assessments
- A nutrition program
- Regular parent communication

Many states make information about licensed childcare center available online. Additional resources to help parents think about what they value in a childcare program are available from a variety of sources, including checklists parents can bring with them as they tour a potential facility. Learn more about choosing high quality childcare at these sites:

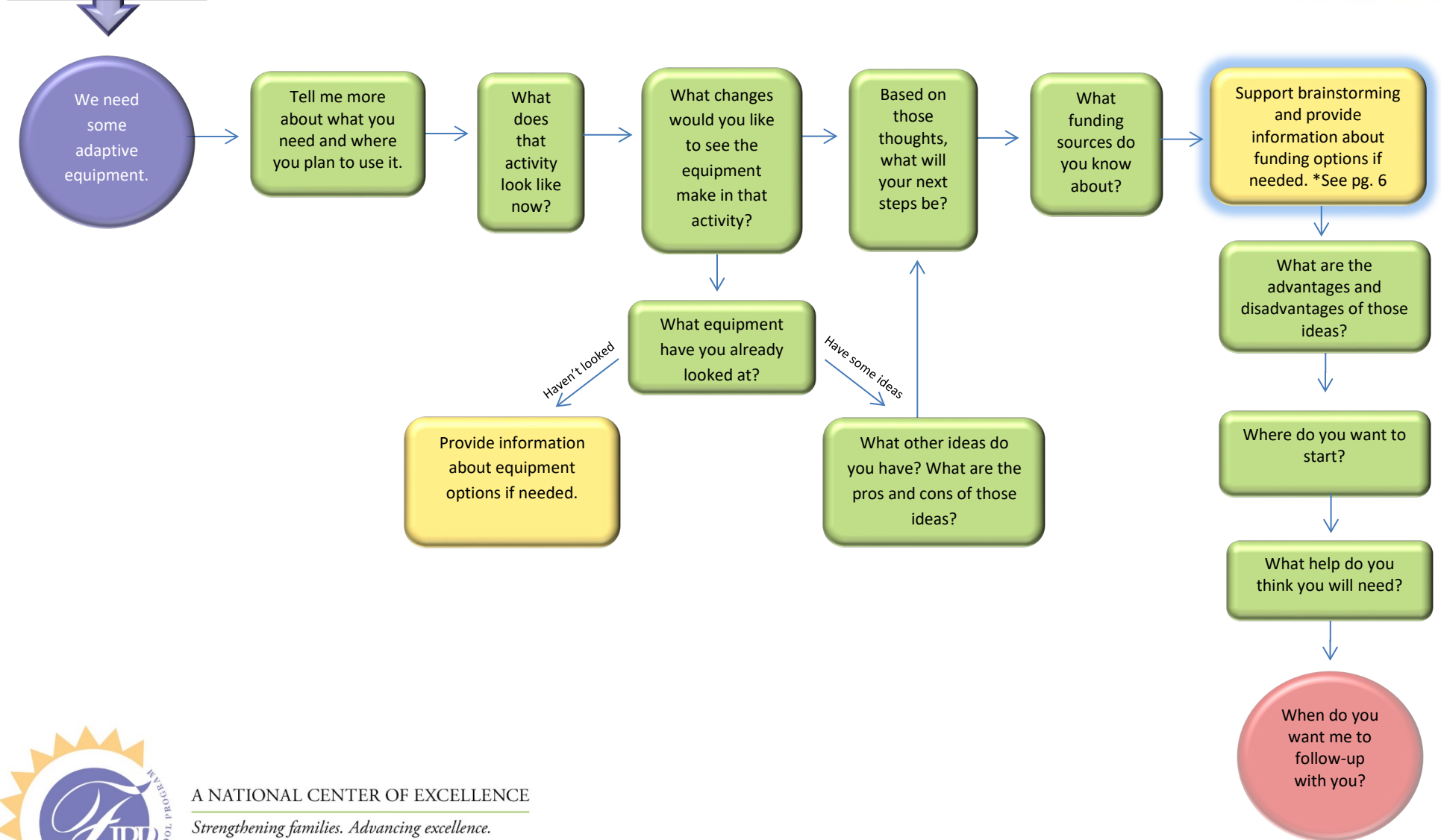
Childcare Aware (<https://www.childcareaware.org/families/choosing-quality-child-care/>)

National Association for the Education of Young Children (<https://www.naeyc.org/>)

Better Beginnings (<https://arbetterbeginnings.com/parents-families/how-choose-child-care/choosing-appropriate-child-care/choosing-child-care>)

“We need some medical/adaptive equipment.”

Start Here



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Informative Feedback for Accessing Assistive Technology and Medical Equipment

Some children need specialized equipment to be successful in daily routines and activities. Typically, an ECI provider and a doctor can help families with identifying a need for equipment. Families should focus on what routines and activities the equipment will support and what their priorities are.

Trials: Testing or trying out a piece of equipment is important when possible to ensure that the equipment and any accessories are a good match for the child and family. Many state ECI programs provide an equipment lending service for these trials. Vendors and equipment manufacturers may also provide demos upon request. To select what equipment will be tried, families can use resources such as doctors, therapists, support groups for families of children with similar diagnoses, or online searches. Trial periods with equipment that will be funded by Medicaid or private insurance often make the approval process faster in addition to other benefits for children and families.

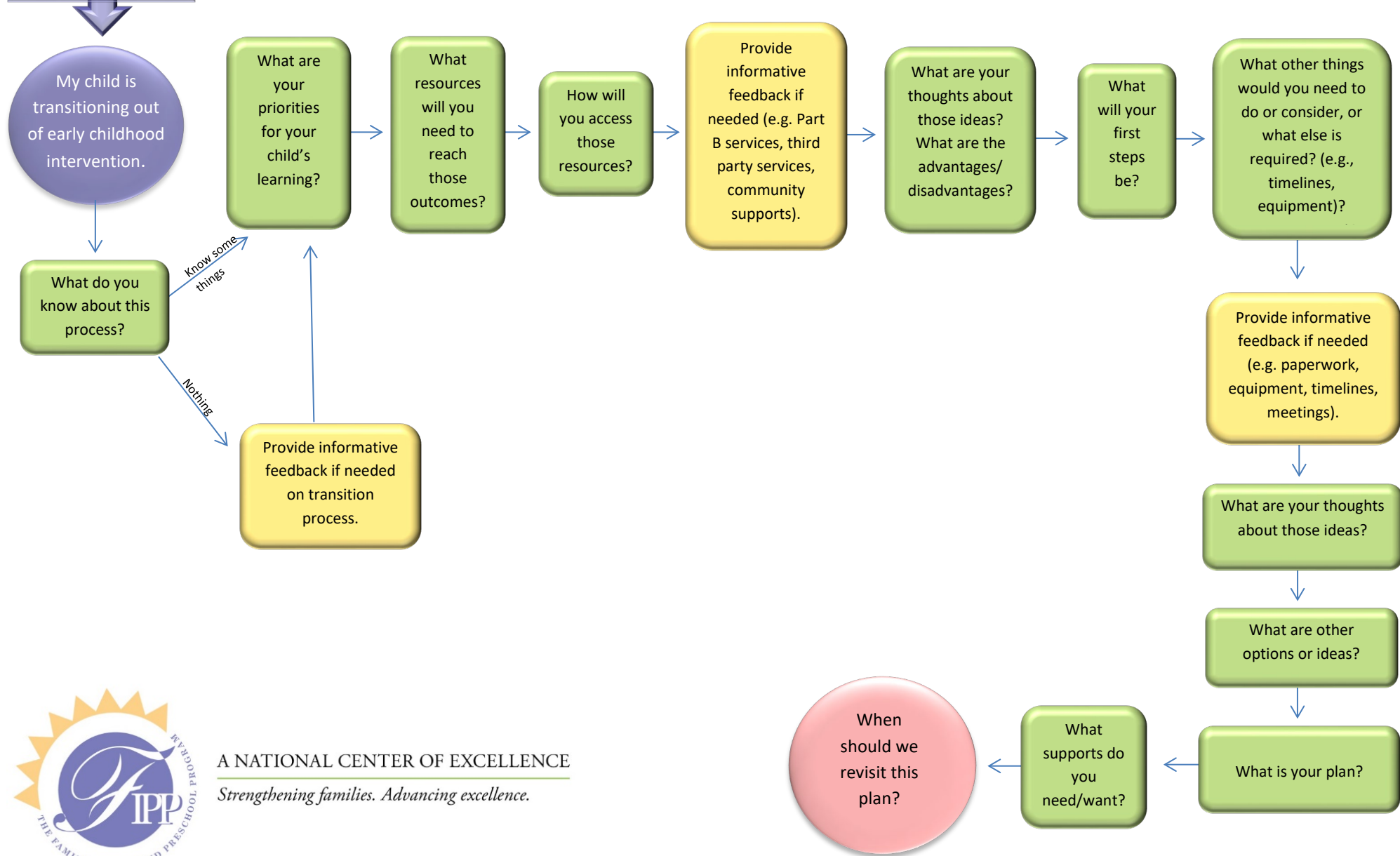
Funding: There are several ways to find funding for equipment. In some states, ECI programs or state disability services will pay for certain equipment. Families can speak with case workers to find out about these options. In other cases, separate funding will need to be secured. Using insurance is the most common way of paying for equipment. For this, families will need to work with a therapist and a vendor to meet and discuss the equipment needed. The therapist or doctor will then write a letter of medical necessity explaining the need for the equipment to the insurance payor. The vendor will submit the request to insurance, which typically has 90 days to either approve or deny the claim. If a claim is denied, families are entitled to appeal by providing more information on the need for the equipment.

Alternative Funding: Many communities have agencies that provide support for equipment not covered by insurance. Family support networks and other support groups may have resources that support equipment funding. Support groups may also be a potential source of locating and sharing used equipment. Another option may be securing funds from crowdfunding websites such as GoFundMe. This is the practice of funding a project by raising small amounts of money from a large number of people, via the internet. Other crowdfunding options include Mobility Funder through Tadpole Adaptive, and Kiddie Pool through Adaptive Mall.

Receiving Equipment: Once families have received equipment, makes sure they know how to adjust, clean, and maintain it. The vendor or therapist who delivers the equipment is responsible for providing information on how to take care of it as well as how long it can be expected to last and who to contact if it needs repair or maintenance. Encourage families to set up a file or storage system for maintaining all records pertaining to the order such as copies of the order form, Letter of Medical Necessity, and any information and tools that come with the equipment. Teach families how to get help with future equipment needs.

“My child is transitioning out of early childhood intervention.”

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Informative Feedback for Early Childhood Intervention Transition

In the United States, children age out of IDEA, Part C services at age 3 years. Each state has different regulations in place regarding this transition, but all states require providers to support families in planning for this transition before age 3. For more information on state policies, visit the Early Childhood Technical Assistance Center at www.ectacenter.org and search for your state of practice. Some of the key differences between Part C services and Part B services, also known as school services, include:

- **Eligibility Criteria and Determination:** Children receiving part C services are not automatically eligible for school services. The receiving agency will conduct evaluations to determine whether the child's needs qualify them for supports. Part B services are designed specifically to support a child's participation in educational activities. Some services and equipment specific to home or community settings may not be addressed by Part B services.
- **Service Setting:** While Part C services occur in a variety of natural learning environments, Part B services take place in a classroom setting in what is known as the least restrictive environment. Part B services should take place in a school setting with same-aged peers.
- **Caregiver Interaction:** Part C services directly support caregivers, while Part B services support children and classroom teachers in an educational environment. Caregivers participate in Part B services through IEP reviews and contact with a child's classroom teacher. In some cases, children with medical conditions that make a school environment unsafe qualify for homebound services, in which school services are provided in the home environment.
- **Payment:** Part B services may bill insurance with caregiver permission but are free for all eligible students regardless of insurance status.
- **Outcome Planning:** In the school setting, Individualized Education Plans (IEP) replace the Individualized Family Service Plans (IFSP) from the early childhood intervention program. Similar to IFSPs, IEPs, should focus on family priorities and child self-determination. Children who do not qualify for an IEP may be eligible for a 504 plan, which provides limited, specific supports for children in a classroom setting.

Different school systems will have different options for children ages 3-5. Some children may qualify for preschool classroom placements, play groups, or home-based services for children whose medical or developmental conditions make a school setting unsafe. The school system will assign a representative to guide the early childhood intervention team through the transition process and ensure that families are aware of all options.

Families should consider what kind of classroom and what amount of time they would like for their children in Part B services. Family advocacy in the transition to school services is essential, and families who feel their child's rights are being violated can contact local family support agencies to learn more about their options. One example is <https://disabilityrightsnc.org/>.

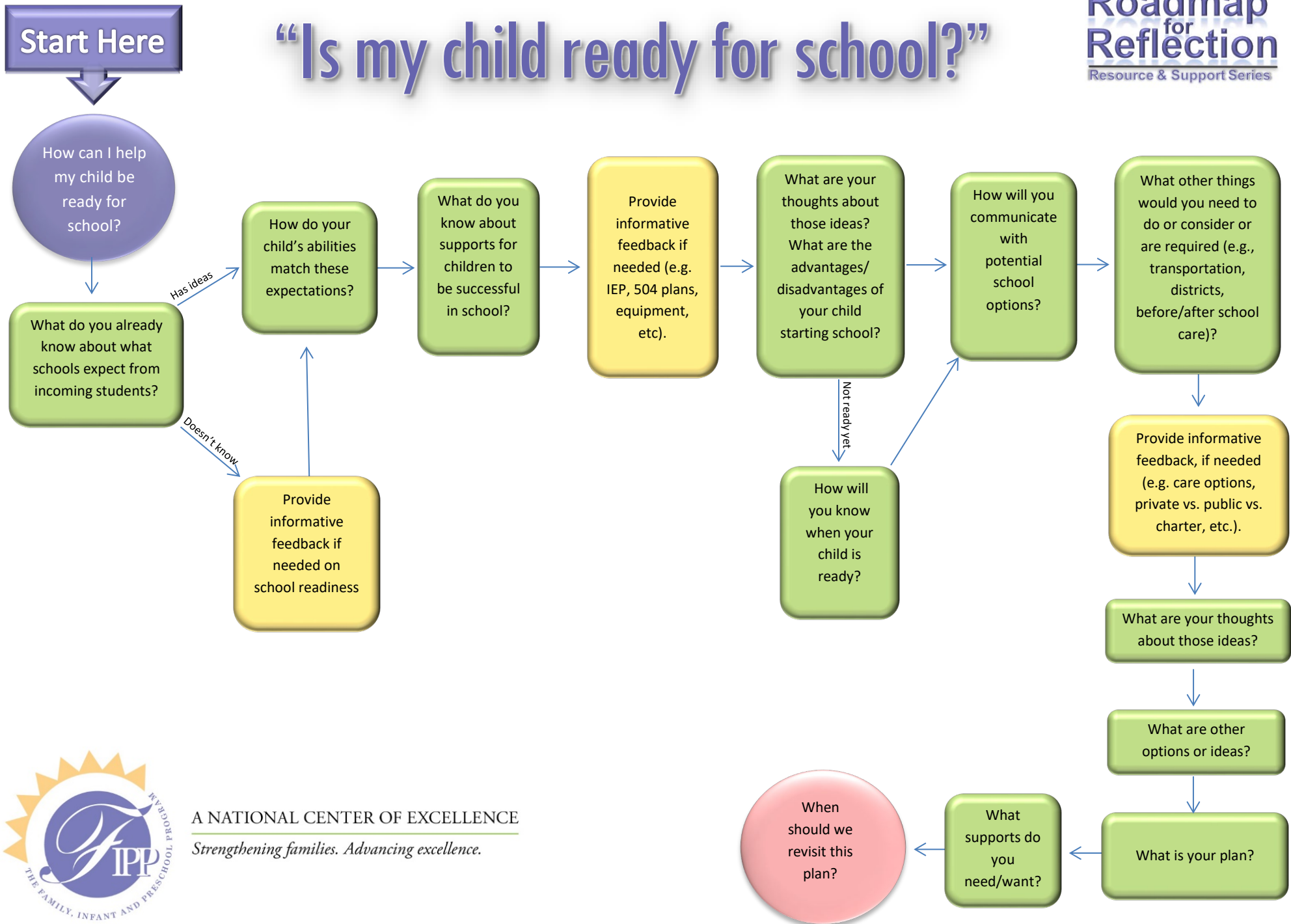
Types of Services Available

School services include occupational therapy, physical therapy, speech-language therapy, and other related services, but families seeking therapy or other services in addition to Part B services can also explore private therapy options. Most private therapy is provided in a clinic setting with limited caregiver involvement. Families can advocate for services that support children and caregivers in their natural environments. It is important to communicate clearly with all providers about expectations prior to initiating services.

Self-Determination

Finally, as children get older, they should be encouraged to make more decisions for themselves. This is called self-determination. This means pursuing outcomes and priorities focused on child participation and interest, rather than deficits and skills. For more information on self-determination, see: <https://www.aaid.org/news-policy/policy/position-statements/self-determination>.

“Is my child ready for school?”



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Informative Feedback on Preparing for School

Many parents wonder about their child's readiness for school, specifically what abilities will be most important. Academic skills are not necessary for a successful transition to school. Instead, support families in preparing children for the social-emotional and self-care skills that will help them thrive in a classroom setting. Some considerations for preparing for skill readiness include:

- **Self-help skills:** Many schools require children without a known diagnosis to be potty-trained prior to attending a full day of school. In addition, children should have strategies for independence in eating and drinking. For children who do not have these skills, parents can explore Part B services to determine what supports the school system can provide to help children succeed in the classroom.
- **Social-emotional skills:** New environments and caregivers can be challenging for some children. Families can help prepare for this by requesting a tour of the child's new school and classroom, using social stories to help the child manage expectations, and developing morning and evening routines prior to the start of school. A child may be interested in helping to select clothes, school supplies, and other items that will be an important part of the school day. Families with social-emotional concerns should talk to their child's school and teacher about strategies that have been successful and what classroom expectations will be.
- **Communication:** How will parents communicate with their child's teacher? Many classrooms are now using interactive tools to update parents throughout the school day. Families should have a good understanding of what communication they will receive from teachers, how they are able to communicate their own questions and concerns, and what they will do if their child needs to be picked up unexpectedly.
- **Transportation:** How will families get a child to and from school? Many schools provide buses or other transportation support. Families should know where the pick-up and drop-off locations are for their children as well as who can pick children up. Most schools require a list of approved individuals who can pick up a child. Many schools also offer before and after school care options for working parents. If these services are not available at the school, parents may need to explore community options for childcare.

Alternatives to Public School

- **Private and charter school options:** Some families choose private or charter school options for their children. Private schools generally require tuition, while charter schools may be free to those who qualify through a lottery system. Private and charter schools may offer smaller classroom sizes, enrichment programs, or other incentives. Families choosing private or charter schools may have to arrange transportation independently of the school. Private and charter schools sometimes have their own special education teachers and systems for providing supports for students who need additional academic supports or therapy services. Children who attend private and charter schools may still be eligible for Part B services through the public school system and the director of special education for the school district can provide further information on the process to access those services.
- **Homeschooling:** Families may also prefer homeschooling as an option. Each state has specific requirements for school days, testing, attendance, and other criteria for all children of school age. There are many local groups providing outings, periodic group activities, sports programs, and other social supports for families who homeschool. For more information visit: <https://hslida.org/legal>.

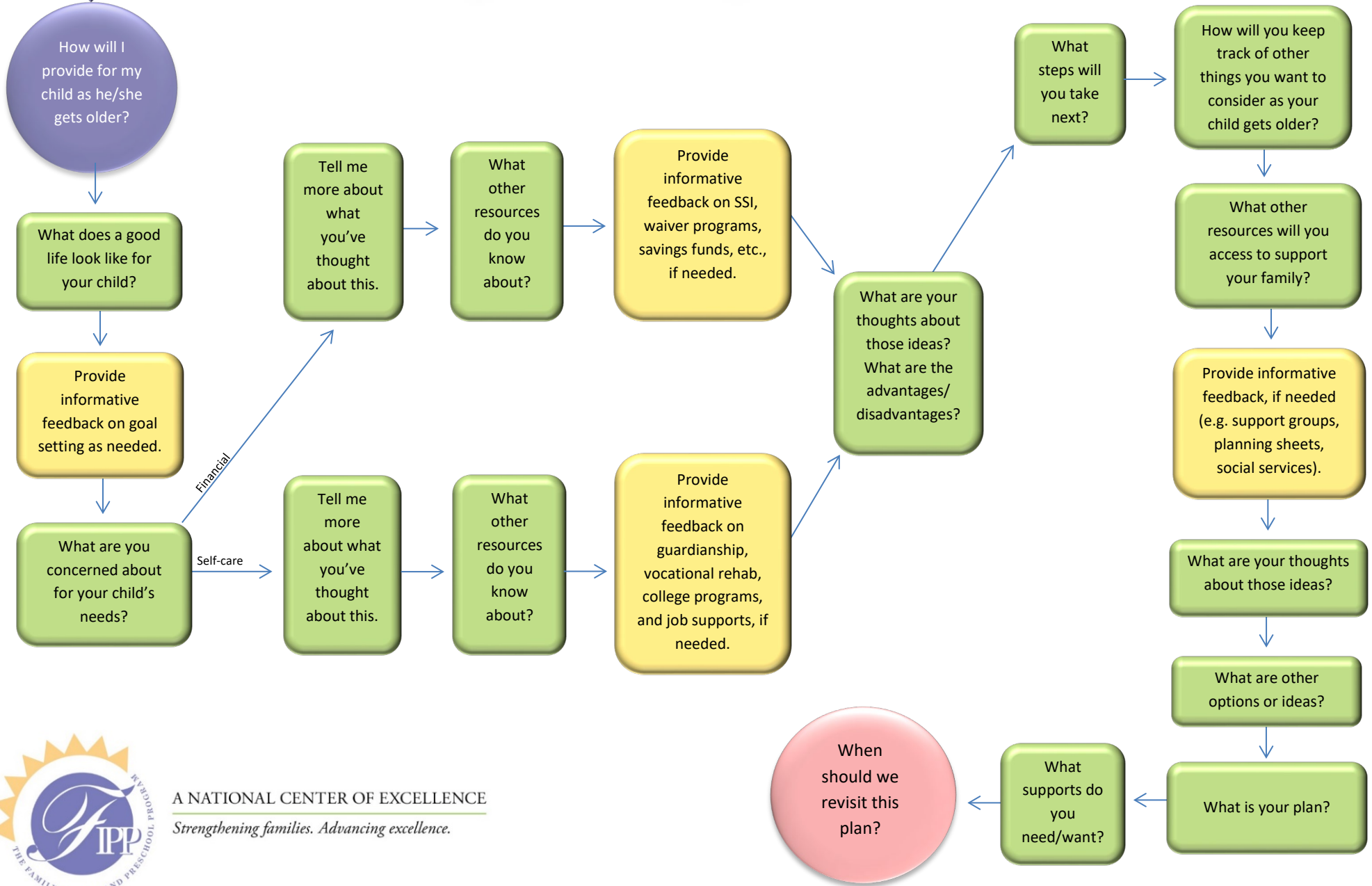
For more information on preparing children for school, visit the following resources:

<https://www.healthychildren.org/English/family-life/work-play/Pages/Preparing-Your-Child-for-Child-Care.aspx>

<https://www.zerotothree.org/resources/78-preschool-prep-how-to-prepare-your-toddler-for-preschool>

"I need to plan for my child's future."

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Informative Feedback for Plan for Long-Term Financial Stability of Child

Children with intellectual disabilities or significant developmental delays may require high levels of care throughout their lives. Caregivers should begin preparing for this possibility early, particularly in situations in which children with significant care needs may outlive their primary caregivers. The resources below, and others in many states, are available to support individuals with disabilities in remaining in community living arrangements into adulthood.

Supplemental Security Income (SSI): SSI is a federal income supplement program for individuals with disabilities. To qualify, individuals must have both a documented disability and financial need. SSI is intended to cover costs of basic needs such as food, clothing, and shelter and may not be sufficient as a sole source of income. Families of children with a developmental disability likely to impact them across their lifespan may be eligible for SSI. For more information, visit www.ssa.gov/ssi.

Savings Accounts: Achieving a Better Life Experience, or ABLE accounts are tax-advantaged savings accounts available to individuals with disabilities who are 26 years old or younger at the time of opening the account and their families. These accounts are important because the money saved in them accounts does not affect the eligibility of SSI allowing families to save without losing benefits. For more information on ABLE accounts, visit ablenrc.org or speak with a financial planner. 529 college savings accounts are another great long-term financial planning tool and can roll into ABLE accounts as needed. For more information on 529 accounts, contact a financial planner or visit a local bank.

Supported Homes: The goal for every individual is to live in the community and participate as a member of that community. In many areas, group homes with regular support staff exist to provide community environments for individuals who need more support for safety and medical assistance. Group homes can also be a solution for individuals whose primary caregivers are unable to provide the level of care needed for whatever reason. Unlike institutional facilities, group homes are integrated into the community and provide more autonomy for individuals.

Community Supports Waivers: Community supports waivers are financial supports through Medicaid for individuals who would be likely to receive institutional care as they age to remain in community living. These waivers exist to prevent individuals with disabilities from entering congregate care facilities such as nursing homes and institutions. Many individuals use the waiver supports to hire support staff to work in their homes to provide a higher level of care than they can receive from familial caregivers alone. These supports can also help pay for home modifications and equipment not covered by insurance. Each state administers these waivers independently, and most have very long waiting lists. Children with diagnoses likely to impact independence across the lifespan should get on waiting lists as soon as possible to ensure that they can receive supports as they move into adulthood. For more information on your state's specific waiver program, visit www.medicaidwaiver.org.

Other Considerations: Families of children with developmental disabilities who are likely to require high levels of care throughout their lives should also begin considering options for guardianship of adult children, supported employment opportunities, college support programs, and other long term supports when determining child and family goals. Family support networks can be a valuable resource for families to meet mentors and adult self-advocates who can provide insight and support as children grow. The Family Support Network (FSN) is a national program serving many areas. In addition, families can consider vocational rehabilitation, job training programs, and college programs for individuals with disabilities as their children move into adulthood. Support networks can be helpful in connecting individuals and their families to the resources available in a particular state or region.

Frequently Asked Questions

What about families who do not have any resources?

While it may seem like some have fewer or less access to the same formal and informal resources as others, all families have resources. Practitioners often do not know the depth of a family's resources because their informal networks of supports and potential networks of support make up a large portion of the available resources. Having a capacity-building philosophy includes believing that all families have strengths and assets and that promoting the use of families' strengths and assets further strengthens them and promotes family well-being.

One way to help families increase their access to informal resources is to talk with them about how to expand their networks of support. Families who belong to organizations, clubs, and groups often have access to acquaintances who may be able to provide some support.

Wouldn't it be more efficient to just tell families about the available resources?

While it may be faster to tell families upfront about the resources you know of, it is not more efficient. Families may become dependent on you as their primary source of information and resource support. As a result, you can become responsible for ensuring family well-being for many families. Teaching families a systematic process for addressing priorities ensures that all families have the support they need when they need it, whether you are available to them or not. When you teach families the systematic process, you are available to help more families and families become highly confident and competent to address their own priorities, serving them well over the long-term. Ultimately, a capacity-building approach is more efficient for practitioners and families.

What if families don't choose the best resource option?

Families are entitled to choose the resources that best match their priorities and values. Since practitioners may have different personal values and priorities, they are not in a position to accurately judge the decisions families make. The role of the practitioner is to help families make informed decisions. Prompting families to brainstorm a variety of different options and asking them to reflect on the advantages and disadvantages of each option, helps them evaluate the impact of each option. Furthermore, practitioners can ask families to think about how preferred solutions might impact their family and how they match the family's values and long-term vision. Practitioners can provide families with information and ask them to reflect on the information. When practitioners systematically use a coaching interaction style and the predictable process provided by the *Roadmaps*, families are positioned to make the best decision for their own family. Practitioners should also remember to plan a follow-up conversation with the family to prompt them to reflect on and evaluate the usefulness of their chosen course of action and develop a back-up plan, if needed.

What do I do when I am a potential resource for a priority?

Sometimes early childhood professionals can be a resource for priorities such as developmental information, specialized equipment requests, or other specific knowledge and information. While it can be appropriate to serve as a resource to families in some circumstances, practitioners should also remember that as children age, their family supports change. Practitioners should take care to ensure that any priority for which they serve as a resource is discussed well before transition and that a family has a plan for how that priority will be addressed across a child's lifespan.

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Notes

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