

Pass It On



Fall/Winter 2020

A collaboration of NH Family Voices and the Parent Information Center, informing and empowering families and professionals caring for children with disabilities and/or special health care needs from birth to adulthood for over 30 years.

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A Mother's Intuition

by Hollee Sampson

The first sign something was amiss was at my anatomy scan. The ultrasound tech kept going back to the baby's arms. Being my second pregnancy, I remember thinking to myself that it was odd. I didn't recall them concentrating on my oldest son's arms that much during his anatomy scan. As a matter of fact, I went in expecting the biggest reveal would be the sex of the baby to help pick out a name.

Instead after the scan, the tech sent me to a room to wait for the doctor. I remember the doctor took FOREVER to come in. It hit me at that moment maybe something was not okay. I was worried. The doctor finally came in and informed me the

baby's arms were measuring a couple weeks behind and his hands were in fists. They needed to refer me to Maternal Fetal Medicine (MFM) program.

About a week later at the MFM appointment, the doctor and genetic counselor told me they had never seen ultrasound results like mine with favorable outcomes. They said, in no uncertain terms, "It is not good news." I was given the option to abort the baby due to the unfavorable results or to do further testing with amniocentesis. Although nervous, I opted for the amniocentesis.



Continued on page 4



(603) 224-7005 www.picnh.org



(603) 271-4525 www.nhfv.org

Parent Information Center

Established four decades ago, with the belief that all children can succeed with the right support, the NH Coalition for Citizens with Disabilities dba the Parent Information Center (PIC) provides a wealth of services designed to help parents understand their child's special needs and the laws that govern the early intervention (called Family Centered Early Supports and Services in NH) and special education process. In 1995, PIC expanded its focus to serve all parents, not just parents of children with disabilities. PIC assists families, schools and communities to increase family engagement in children's learning and development.

PIC is a pioneer in creating family/school/community partnerships that help parents of all children get involved in their children's learning and development. PIC also offers additional support through workshops and resource and referral. From its inception to the present, the Parent Information Center has demonstrated an ability to identify and respond to the changing needs of children and families in NH.



NH Family Voices

New Hampshire Family Voices (NHFV) is part of a network of families and friends of children and youth with special health care needs/ disabilities around the nation. In the early 1990's, during the health care reform discussions of the Clinton administration, a group of families of children and youth with special health care needs realized that no one was speaking up for the unique concerns of their children. These families contacted other parents they knew around the nation. Families responded enthusiastically and there was an immediate ground swell of support to advocate for better health care for their children. Family Voices was born.

New Hampshire was one of the first Family Voices organizations in the nation to respond to this call. NH Family Voices began in 1994 as a grass roots network of families of children and youth with special health care needs for the purpose of sharing information, resource health programs and policies.

Today, NHFV continues its work to assist parents and professionals in navigating the systems of care that deliver services. Through the engagement of families across NH, and our partnerships, we participate in program development, implementation and evaluation, sharing families expertise in the formation of policies affecting their children. In addition, NHFV connects families with one another and provides families and professionals information to secure and utilize needed services for children and youth.

NOTE: Both organizations are open and serving families during the COVID-19 restrictions. Many of us are working from home as we care for our children and young adults with special healthcare needs, so don't be surprised if you see a return call with a different number.

- ♥ New Hampshire Family Voices is administered under a fiscal agreement with New Hampshire Coalition for Citizens with Disabilities Inc., d/b/a/Parent Information Center a 501c3 non-profit organization and is the state affiliate organization of Family Voices National.



Join our community!
On the public page we post the latest events, opportunities inspiring stories and news.

Look up
["New Hampshire Family Voices"](#)

["Parent Information Center of NH"](#)



Like us and be sure to click the "get notifications" option so that you receive all updated information.

The NH Family Voices private group is a parent to parent community and great way to connect with other families, like yours, in a more private setting. Our staff and group members exchange information, resources and support around the clock.

<http://www.facebook.com/groups/nhfamilyvoices/>



A Mother's Intuition Continued from page 1

The amnio results came back in several pieces of information over the course of a couple of weeks. The final results being, Henry, my sweet, very active belly dweller, has Shox gene deletion of his Y chromosome, and furthermore, some of his Y chromosomes are missing entirely.

In the midst of waiting for the amnio results, I asked to be referred to the Advanced Fetal Care Center at Boston Children's Hospital. Where a fetal MRI was performed. This technology gave me my baby back. We were able to clearly see his major organs were okay and his brain looked good. That he had fingers. The geneticist, at Boston's Children Hospital, told me that day my baby had dwarfism! I thought, what a relief...Dwarfism? (Henry is the first little person in our family.) Ok! That's a million times better than, "It is not good news."

I patiently waited the remainder of the pregnancy. Feeling every kick, roll, and hiccup. Holding on to him with my heart. Knowing, somewhere deep in my soul an intuition that mothers have, that my baby was going to be okay. I even took the liberty to self-refer him before he was born to my area agency's Early Support and Services program. Something that had never been done before. Finally, Henry arrived at 18" inches long.

His arm length is immediately noticeable as shortened, his radius bones are bowed, and his ulnas are extremely short. But, he was and is truly perfect in every sense of the word. Henry is going to be 4 in a few months, let me tell you, he is a typical preschool age kiddo. He loves Batman and other superheroes, Transformers, Legos, video games, and his big brother. Things haven't always been easy for him. It was hard for him to gain weight at birth; he's had several surgeries; he has a very high narrow palate which makes swallowing thin liquids unsafe. Yet, Henry is this incredible little boy. He is who I want to be when I grow up. He adapts, is curious, happy, creative, and fun to be with. He uses his imagination unlike anything I've ever seen before. In my eyes, he is truly a superhero. (Maybe that's why he's so fond of them.)

Although it has not been an easy journey, I am thankful that I decided to pursue more testing and to have him enter our lives every day. Otherwise, my little superhero wouldn't exist to inspire me and others around him.



What is Shox Deficiency?

Shox is a gene located on the sex chromosomes (X & Y) in humans. It plays an important role in bone growth and development.

This gene was first found during research for the cause of short stature in women with Turner Syndrome. Shox Deficiency is a result of shox gene abnormalities that causes poor growth in humans. It has been discovered to play a role in other forms of short stature not related to Turner Syndrome.

Did you know New Hampshire Family Voices (NHFV) is a partner with the New England Regional Genetics Network (NERGN) previously known as the New England Genetics Collaborative? What exactly is NERGN?

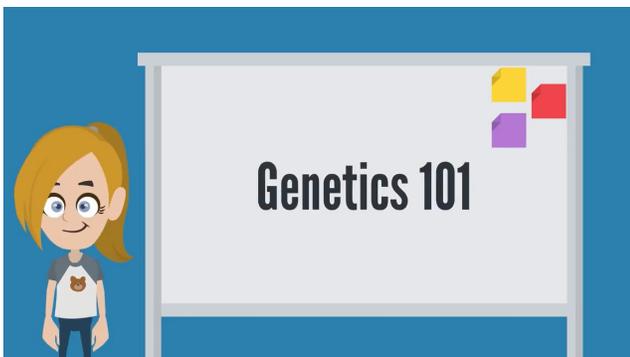
It is one of seven regional genetics networks spread across the country. These networks are made up of family/advocacy organizations like ours, genetic services and primary care providers, public health, telehealth specialist, and others whose goal is to improve the health and well-being of people with genetic conditions and their families.

We are fortunate that NERGN is housed with the Institute on Disability (IOD) at the University of New Hampshire. Right in our own backyard. They have built partnerships with Family to Family Health Information Centers in each of the New England States which includes us, Path Parent to Parent CT, Rhode Island Parent Information Network, Massachusetts Family Voices at the Federation for Children with Special Needs, Maine Parent Federation, and Vermont Family Network. This partnership ensures that the families and professionals we serve receive valuable information and resources about genetic services.

To learn more about NERGN visit their website: <https://www.negenetics.org/>

Check out this great video Genetics 101, produced by PATH, Parent to Parent Family Voices of CT.

<https://nhfv.org/new-englandregionalnetwork/>



Engaging Youth with Behavioral/ Mental Health Challenges

Looking for tools to help you engage a young person with Behavioral/mental health challenges? These workbooks may help.

A Youth Guide to Wraparound Services – Your Life, Your Future

Wrap-a-what? Someone cares about your life and future. That’s why you’ve been recommended for Wraparound. Funny name for a process that has one goal: supporting you in making positive life choices. This guide will help a young person understand the process and the importance of their role.



Youth Guide to Treatment & Treatment Planning: A Better Life

Provides strategies to engage young people in the treatment planning process and offers significant insights into strengths-based treatment planning.

This document is a follow up to the highly successful Youth Guide to Wraparound: Your Life, Your Future.

Both can be found here:

A Youth Guide to Wraparound Services - Your Life, Your Future - <https://bit.ly/39WBLP1>

Youth Guide to Treatment & Treatment Planning: A Better Life - <https://bit.ly/2KdbyR9>





Home-Schooling, Home Instruction, and Remote Instruction: What is the Difference?

Parent Information Center, 9/11/2020

The Parent Information Center recognizes that many families of children with disabilities are concerned about the impact that the Coronavirus, COVID-19 may have on their children's special education program. For continuous updates, please visit our COVID-19 webpage at www.picnh.org/COVID19/

Home schooling, home instruction and remote instruction are not the same; there are some very important differences. Even though parents may need to help their child (with support and oversight) while their children participate in remote instruction and that remote instruction may take place in the student's home, it is still public education; it is provided by public school teachers, and follows the school district-approved curriculum.

Remote instruction is an alternate way for public schools to teach students when circumstances prevent in-person, in-class instruction. In the past, some schools used "blizzard bags", a very basic type of remote instruction, when they were closed for a short period of time, such as for a snow day. Blizzard bags are usually not "bags"; they are assignments the teacher has planned and given to students ahead of time to complete while school is closed for a snow day or similar emergency. The coronavirus (COVID-19) pandemic moved remote instruction to a whole

new level. When the Governor issued an emergency executive order closing all public K-12 schools, school districts, parents and students had to quickly shift from in-person, in-class instruction to remote instruction. Remote instruction is not limited to online learning; it may also include instruction provided using print materials, videos or other media. It may also be part of a "hybrid" model where a student receives some in-person services, either in school or another setting. If a school district offers parents a choice between multiple options (e.g. remote, hybrid or in-school instruction), that choice is made by each child's parent, including parents of children with disabilities.

Additional information about remote instruction may be found on the NH Department of Education's website: <https://bit.ly/3nnDsZ2>

During remote instruction, children with disabilities and their parents keep all of their special education rights. School districts must continue to provide children with disabilities the special

education and related services the child needs (the services in the child's individualized education program or IEP).

Home instruction is a home-based special educational placement option for school-age children with disabilities. This placement is made by the child's IEP team when the team determines that home-based instruction is the least restrictive environment in which the child's special education needs can be met. The child's school district continues to provide the child with the special education and related services in accordance with the child's IEP.

Home schooling, or home education is an option that parents may choose instead of participating in the public school system. When a parent makes the choice to home school their child, the parent withdraws their child from public school and the parent becomes responsible for educating their child.

Key Point: *Children with disabilities who are participating in in-school instruction, remote instruction, a hybrid model of instruction or home instruction retain the right to receive all of their special education and related services. Each child's IEP team, including the child's parent (s), determine how and where the services will be provided.*

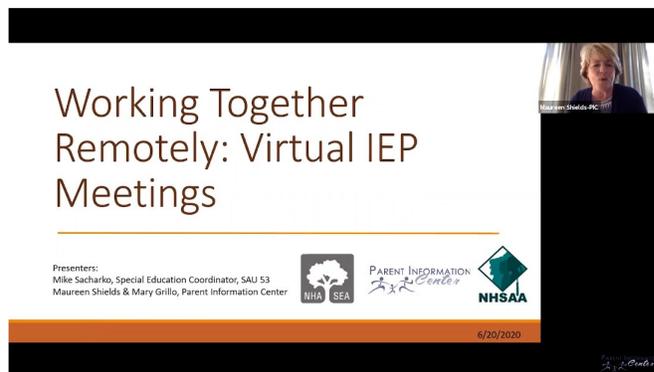
The NH Department of Education has a process and provides resources for parents who wish to home school their child.

While they are not entitled to receive the special education and related services, home schooled children with and without disabilities may participate in school district curricular and extracurricular activities/programs, such as a class, school sports or clubs. Reasonable accommodations must be provided to children with disabilities so they have an equal opportunity to participate in and benefit from these programs/activities.

Additional information about the NH special education law and process and other issues relevant to children/youth with disabilities and/or their parents may be found on the Parent Information Center's website: www.picnh.org

Key Point: *A home-schooled student with a disability is not entitled to receive the special education and related services the child would receive if he/she were enrolled in the public school.*

Note: The Parent Information Center is not a legal services agency and cannot provide legal advice or legal representation. The information in this presentation is provided as a public service for general information only and is not a substitute for legal advice about the facts of your or your child's particular situation. In addition, the law is always changing, through actions of the courts, legislature and public agencies. If you have a problem or issue that requires legal advice, such advice should be obtained from an attorney.



The Parent Information Center with the collaboration of the NH School Administrators Association and NH Association of Special Education Administrators developed a **free webinar** on virtual IEP meetings.

- *Understanding and Identify Barriers to Virtual IEP Meetings*
- *Prepare for Virtual IEP Meetings*
- *Engage IEP Team Members During the Virtual IEP Meetings*

This informative 55 minute webinar provides information for families and school districts to help navigate the new world of remote.

<https://picnh.org/free-webinar-virtual-iep-meetings/>

Tips to Preparing and Navigating Virtual IEP Meetings:

- ⇒ Stay calm this is new to everyone.
 - ⇒ Be patient technology may not work as intended.
 - ⇒ Ask what technology platform will be used for the meeting to familiarize yourself with it.
 - ⇒ Ask for an agenda.
 - ⇒ Remember to charge devices prior to meeting.
 - ⇒ Introduce yourself before speaking and use video if possible.
 - ⇒ Remember to mute yourself when not speaking.
 - ⇒ Listen closely and wait to share your thoughts and ideas until the current speaker finishes.
 - ⇒ Stop frequently and provide enough wait time to allow for questions and feedback.
- ♥ Find the full sheet here: <https://bit.ly/3mzZ019>



A Look at Medical Home in NH

Medical Home is a model or approach to care; it defines **HOW** primary care should be delivered. Central to the model is a partnership between patients and health providers; with a goal to deliver care that is accessible, continuous, comprehensive, coordinated, compassionate, family-centered and culturally effective.

The Medical Home Project conducted a needs assessment regarding medical home in New Hampshire last year, gathering input from 142 family members and 95 providers through surveys, interviews and focus groups. At NH Family Voices, we have often wondered about the stories behind some of the available data around health care, and used this opportunity to dig a bit deeper.

What did we learn?

We learned that only a third (33%) of parents and caregivers were familiar with the term “medical home”. However, when provided the definition of medical home, a majority (61%) felt their child’s practice provided care in a manner that met the definition. When we asked those who felt their child’s practice did not meet the definition to explain their answer, the majority of families identified challenges with communication. Families felt these challenges prevented practices from providing comprehensive care. What we really took away from these discussions with families; even if they were unfamiliar with the term medical home, they cared about having one.

33% of parents and caregivers were familiar with the term “medical home”.

We also learned that for the majority of family members, *access to care*; the ability to get an appointment, when needed, was the most important component of medical home. What became apparent in our conversations with families was that their rating of components in order of importance was directly related to having encountered barriers in that area. The fact that the majority identified access to care suggests that obtaining appointments in a time frame the family feels is appropriate can be a challenge. Providers recognized this, and shared efforts they were making to improve access, with some offering extended office hours, and engaging in an ongoing review of scheduling to allow for the appropriate number of “sick visit” slots. Both parents and providers acknowledged that despite efforts to improve access at the primary care site families continue to make use of walk-in clinics due to location, convenience and cost purposes. As this practice is likely to continue, making sure that communication between alternate sites of care and primary care occurs is important.

Only 22% of parents of teens indicated they had been engaged in conversations about transition to adult providers.

We learned that work needs to continue on health care transition in order to make sure all youth maintain access to care. Only 22% of parents of teens indicated they had been engaged in conversations about transition to adult providers. Several caregivers who participated in focus groups expressed concern over their young adults currently being “in limbo”, without identified adult primary care providers. Other parents expressed concern about the availability of adult providers prepared to take on young adults with complex health needs. These fears were shared both by parents whose child had yet to transition, and those whose young adults were receiving care in the adult care system, but not receiving care in a manner the family felt fully met their needs.

This is but a glimpse of the lessons we learned in the process. If you are interested in reviewing the full report, please contact us at NH Family Voices to request a copy. Of note, our needs assessment activities were conducted prior to COVID19 and the rapid increase in the use of telehealth in NH, and how it has impacted not only access to, but experience of care. A future article in Pass It On will look at this more fully.

♥ *The Medical Home Project at NH Family Voices is funded by the NH Department of Health and Human Services, Bureau of Family Centered Services.*

Winter is a great time for tactile experiences!

By Libby Sullivan, M.S. OTR/L - Reprinted from PIO 2015

The tactile system is our ability to interpret what we feel on our skin. Knowing if something is hot or cold, coarse or fine, dry or wet, slimy or smooth, is all thanks to our tactile system. This sense of touch provides feedback to our central nervous system and helps us understand and know the differences in sensations like temperatures and pressure. This kind of sensory feedback is what enables a child to hold a pencil, zip a jacket, and attend to daily activities without being distracted by say, the tag in their shirt or their dirty hands after recess.

When a child experiences challenges processing tactile information they may be tactile defensive. This means they are very sensitive to textures, temperature or even the wind blowing on their face and can become easily overwhelmed by such sensations. Alternatively, a child could be tactile seeking, which may mean they like to engage in rough house play but don't notice when they are hurt or injured, they may also be indifferent to temperature changes. If a child is this under sensitive to tactile input, she may require intense stimulation to process what she is feeling on her skin. Sometimes, it could be a mix of both tactile defensiveness and seeking behaviors. Either way, difficulties with processing tactile stimulation can make it difficult for children in learning and social environments. If you suspect a child you know may have a sensory processing disorder you can start by contacting your school district's occupational therapist, or your local early supports and services program if the child is under the age of 3.

There are many winter activities you and your child can do to strengthen their tactile system like playing outside in the snow! When getting ready to play in the snow, experiment with different textures in gloves, hats, sweaters, and socks to see what your child can tolerate. If your child needs a little more tactile input, try wool socks, knitted mittens, or a heavy sweatshirt. If your child is more tactile defensive, use soft fabrics like fleece for mittens and socks and down coats and vests. Try making snow angels outside and then indoors on the carpet.

For indoor activities, you can play dress up with clothing that has a variety of textures. This is also a great opportunity to work on dressing skills in a fun, low pressure way. Arts and crafts like finger paint, play dough, and putty are another option. Sensory bins of rice, beans, or noodles, or a mix of all of these is always fun. How about baking cookies and letting your child mix the batter with their hands? Of course, you can have them help you clean up afterwards in hot, soapy water. At bath time, add different textures like shaving cream, bubble bath, or bath salts for an added tactile experience.



JT Fortin Foundation for Autism

Jack's Family Grant Fund Program accepts grant applications from families in New England that are in need of financial assistance for their family member(s) with autism. Families can apply for up to \$750 through the program. You may apply for one service or item that directly improves the life of a family member with Autism Spectrum Disorder.

<https://www.jtfortinfoundation.org/>

Military Exceptional Family Member Program

When your family member has special needs, you have an extra roster of must-do's to be a good guardian of your family. The Exceptional Family Member Program, EFMP, offers many services for military families. It's all about helping your family navigate the medical and educational system, so you can have more peace of mind about your family member's care.

<https://bit.ly/2K93K2O>



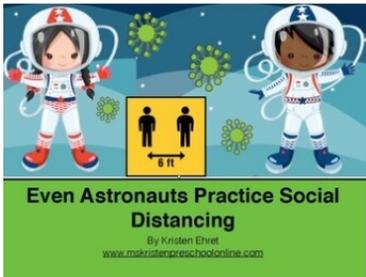
New Hampshire
FAMILY VOICES[®]
Lending Library

Family and Children's Books related to COVID-19

NH Family Voices has collected and compiled a list of free downloadable books for your easy access that can be found on our website: <http://bit.ly/36XreBd>. Below are a few from our list.

Even Astronauts Practice Social Distancing

By Kristen Ehret



This free downloadable book can be found in our lending library. This is a story meant to answer children's questions about the Coronavirus. It teaches children about how to practice social distancing, wear masks, and answers questions about how long we will need to stay at home.

The Virus Stopping Champion

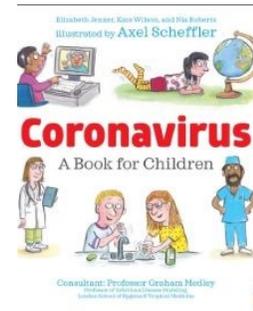
By Lauer, Vaughn



One of four stories from the collection aiming to help address the confusion and misinformation of COVID-19. Featuring a child superhero who learns how to prevent the spread of the virus, the story touches on the courageous steps every child and their family can take to fight COVID 19. From hand-washing, social distancing and the importance of staying home *The Virus-Stopping Champion* can be enjoyed by children of all ages.

Coronavirus A Book for Children

By Consultant
Professor Graham Medley



This guide for young readers defines the coronavirus, explains why everyday routines have been disrupted, and lays out how everyone can do their part to help. The book addresses several key questions in a child appropriate way. Recommended for children 6-years-old and above.

Give us a call or search our catalog by subject online. Books are sent free of charge through the mail with a postage paid return envelope.

To borrow a book call 603-271-4525 or visit www.nhfv.org



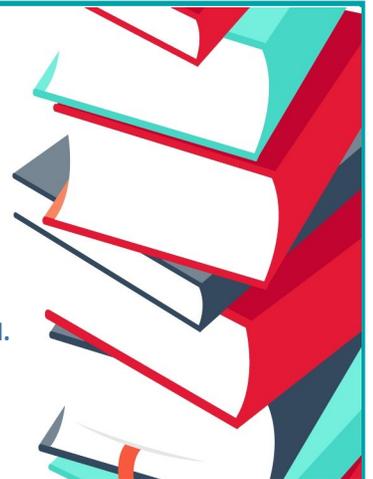
Call us or log on to www.nhfv.org and click on "how we can help, then choose Lending Library



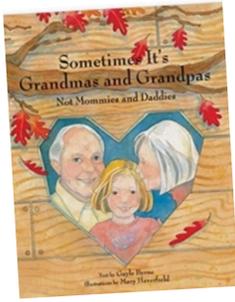
Search thousands of books by subject. Drop selection into cart & send.



Books will be delivered to your home/office with a prepaid postage envelope for you to return them



To support Kinship care....



Sometimes It's Grandmas and Grandpas: Not Mommies and Daddies

By Gayle Bryne

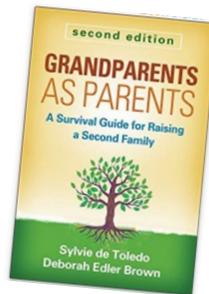
Poignant moments expressing the child's curiosity and questions give way to a comforting and playful exchanges at home with Nonnie and Poppy. Spending the day with this grandparent - led family, we see that it's not always

Mommies or Daddies that care for children, and that's okay! This book shares a child's experience living with and being cared for by grandparents through the eyes of a cheerful and delightful little girl. Uplifting watercolor illustrations give extra warmth to this caring and loving story.

Grandparents As Parents: A Survival Guide for Raising a Second Family (2ND EDITION)

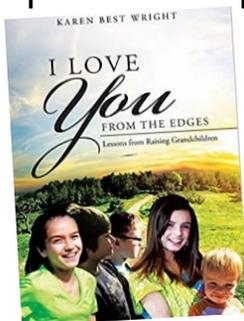
By Sylvia De Toldeo, Lscw and Deborah Elder Brown

Learn effective strategies to help you cope with the stresses of parenting the second time around, care for vulnerable grand-kids and set boundaries with their often-troubled parents, and navigate the maze of government aid, court proceedings, and special education. Wise, honest, moving stories show how numerous other grandparents are surviving and thriving in their new roles.



I Love You From The Edges: Lessons from Raising Grandchildren

By Karen Best Wright



Karen's love story of raising her young granddaughters for several years, letting them capture her heart, her life, and her soul, and then having to give them back – resulting in a painful, yet spiritual journey of love, healing, and reunion.

Along with her story, she includes suggestions on the "how's, what's and why's" one should consider when beginning the journey of raising someone else's child. Included is the health and wellness assessment program Karen designed specifically for grandparents and relatives raising children.

Resource...

NH Kinship Navigator Program

Rooted within NH's Family Resource Centers, the Kinship Navigator Program links grandparents and other relative caregivers, both inside and outside of the formal child welfare system, to the services and supports specific to their family's needs.

<https://www.nhchildrenstrust.org/kinship>

Resources

Helpful Educational Tools for Children



Khan Academy Kids

FREE EDUCATIONAL GAMES AND BOOKS

With this free app, children can learn reading, language, writing, math, social-emotional development, problem-solving skills, and motor development. Open-ended activities and games like drawing, storytelling, and coloring encourage creativity and self-expression. New activities are always being added. Recommended for ages 2—7 years old.

<https://learn.khanacademy.org/khan-academy-kids/>



If you are looking for ways to keep your children active and engaged, Varsity Tutors offers some free, live, large online classes in a variety of subject matters:

- Art
- English
- Enrichment
- Math
- Science

These classes are geared towards grades K-12.

https://www.varsitytutors.com/virtual-school-calendar?f_class_size=large-group

Concussions & Athletics

Did you know at least 10% of athletes suffer from a concussion every season with an increase during football season? Learning about concussions, the signs and symptoms can help keep your young athlete safe.

A concussion is a type of traumatic brain injury (TBI) caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This impact can disrupt the normal function of the brain. Often times signs and symptoms of a concussion appear soon after the event. But, they can also appear days or weeks later. Unlike adults, children/youth/teens may not be able to express how they are feeling. They may say "I don't feel right." Knowing the signs and symptoms can help parents identify the possibility of a concussion and seek appropriate care for their child.

Some common symptoms of a concussion include:

- Headache that gets worse and does not go away
- Nausea or repeated vomiting
- Memory difficulties / difficulty concentrating
- Slowed thinking
- Tiredness / change in sleep
- Blurred vision
- Mood changes – difficulty to control moods/ restlessness, or agitation
- Sensitivity to light or sounds
- Can't recall events after/or prior to the hit, bump, or fall.
- Convulsions or seizures (this is not in all cases)

Some of these concussion symptoms may appear immediately, sometime after the injury or recurrently with exertion until the brain has recovered. No two concussions are alike. Do not attempt to diagnose a concussion or the severity of it. Only healthcare providers should make the assessment and determine whether your child has a concussion and the severity.



Concussions not only can impact a student athlete physically but can impact them in the classroom. The most common effects of a TBI include memory problems, difficulty learning and recalling new material, difficulty involving non-verbal tasks, difficulty processing information, problems with self-monitoring behavior and performance which may include the ability to complete task/assignments, and speech or language difficulties. This is not a complete list but some things to consider if you find your student is struggling after acquiring a TBI. You may find their endurance is limited and may require accommodations to be made until they are recovered. If your child/youth has a concussion, notify their school, teacher, and nurse to work on transitioning them back into school. Dependent on the severity and issues caused by the TBI, they may be eligible for a 504 or other accommodations.

Want to learn more about concussions in children/youth and resources for their educational needs after a concussion visit: <https://bit.ly/39Y14A1>

Wrightslaw

PIC's - Wrightslaw Conference 2021

SAVE The DATE.... May 6, 2021 @ 9:00 am - 4:30 pm

The Wrightslaw Special Education Law & Advocacy Conference is designed to meet the needs of parents, educators, health care providers, advocates and attorneys who represent children with disabilities regarding special education; it is not disability specific. Come hear Pete Wright talk about:

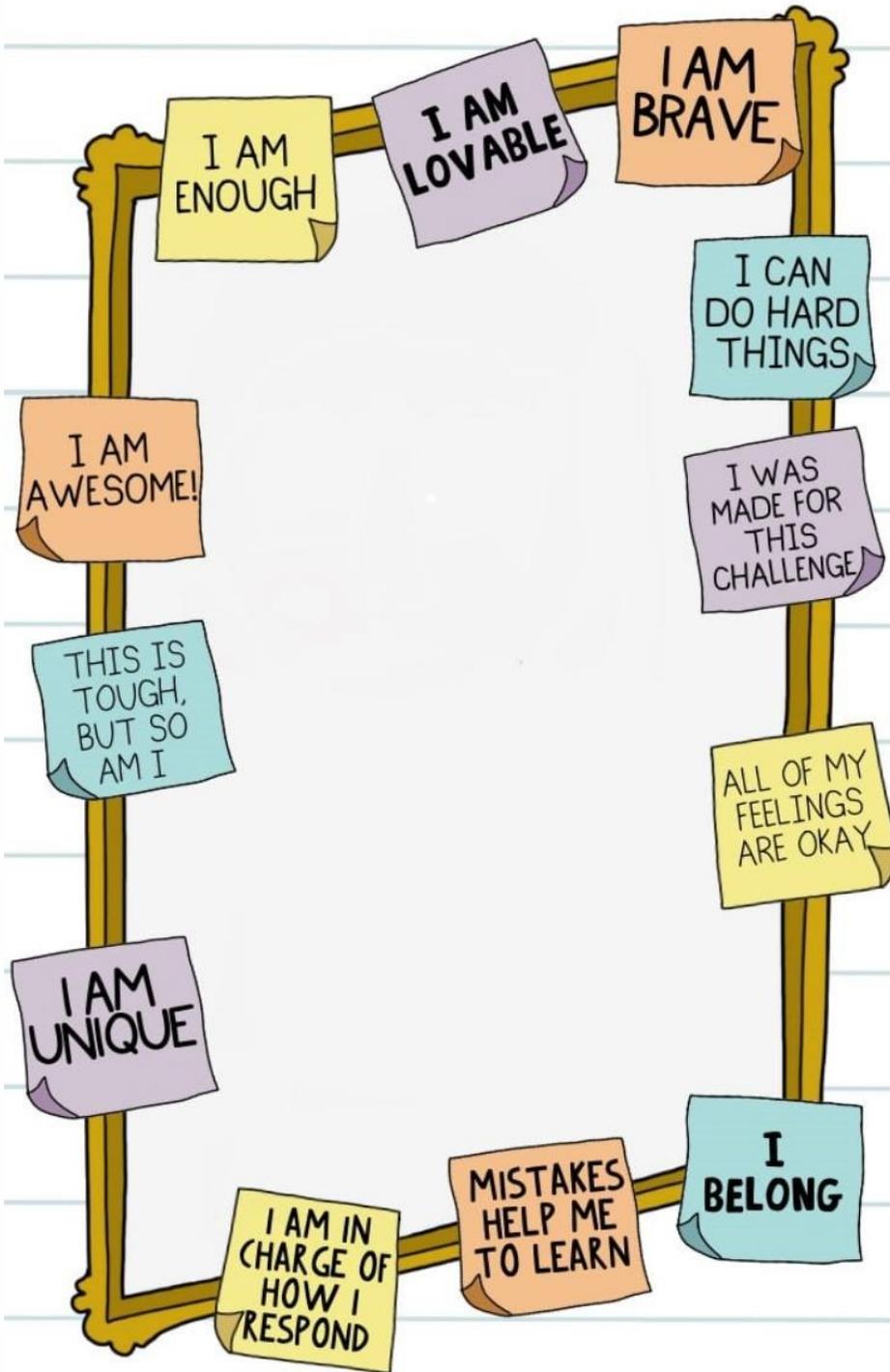
- Special education law, rights and responsibilities;
- Tests and measurements to measure progress & regression;
- SMART IEPs; and
- Strategies for effective advocacy

For more information and registration:

<https://picnh.org/pic-event/wrightslaw-conference-2020/>

We all need this once in awhile ♥

POSITIVE SELF-TALK



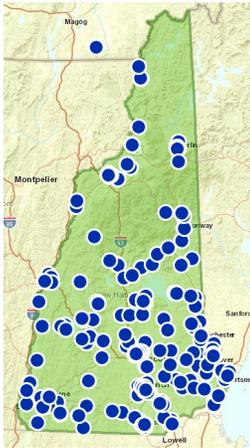
1. Circle which kind and caring messages you want to remind yourself of.

2. Draw a picture of yourself or something that represents you in the center of the mirror.

3. Say these positive self talk statements out loud.



by WholeHearted School Counseling



New Hampshire Food Access Map

UNH Cooperative Extension and their partners seek to better connect communities to up-to-date food resources in this interactive Food Access Map. The COVID-19 pandemic has both increased the need for food resources and created an environment in which they are more difficult

to obtain. In response, countless food-access sites around our state have stepped up to meet the needs of their communities. Many organizations have altered schedules and site locations during this time.

Most listings are submitted directly by the site. Accuracy of site information is checked often and is the result of best efforts. Once you have identified a site relevant to your needs, please connect with them directly using one of the methods suggested in the listing before traveling to that location.

<https://bit.ly/3n1HTZL>



Watch Me Grow New Hampshire

Watch Me Grow (WGM) helps NH families to ensure their child's brightest future by tracking his or her growth and development. It is NH's developmental screening, referral and information system for families with a child ages birth to six years. Like a yardstick for measuring height, developmental screening is a tool that helps families measure important areas of their child's development through the early years. WGM provides information about a child's health and development; screening materials based on the child's age; timely connections to appropriate services, supports, and resources when needed.

Learn more and see materials available at:

<https://bit.ly/3m6q6j5>

Winter Adaptive Programs In New Hampshire



Bretton Woods - New England Disabled Sports (NEDS) at Bretton Woods is an independent, non-profit organization providing adaptive sports instruction to adults and children with physical and cognitive disabilities. For more information visit:

<https://nedisabledsports.org/>



Cannon Mountain - Cannon Mountain has partnered with the Adaptive Sports Partners of the North Country (ASPNC) to make adaptive on-snow ski/ride opportunities & instruction available to people of all abilities and ages 5+. For more information visit: <http://adaptivesportspartners.org/>



Gunstock Mountain Resort - Lakes Region Disabled Sports (LRDS) is a non-profit program providing recreation and fitness for individuals with disabilities in a safe, supportive, independent, and fun environment at Gunstock Mountain Resort. For more information visit: <https://lradaptive.org/>



King Pine - Granite State Adaptive is a Chapter of Disabled Sports USA. We are a non-profit organization established to provide adaptive sports opportunities in the Carroll County area of NH. For more information visit:

<https://www.qsadaptivesports.org/snowsports.html>



Loon Mountain Resorts - For more information visit: <https://nedisabledsports.org/programs/winter-programs/>



Mount Sunapee Resorts - NEHSA was founded as a non-profit organization run by and for individuals with disabilities who wanted to enjoy active and independent lives through participation in sports. It is one of the oldest programs on the east coast. For more information visit: <https://nehsa.org/>



Waterville Valley Resorts— For more information visit: <https://www.skinh.com/adaptive-programs>

Online Subscription



NHFV and PIC are striving to deliver valuable information and resources to families and the professionals that work with them through a variety of outreach tools. The paper copy of *Pass It On* serves many purposes and is one of our most valued resources. But reality is... many do their reading and sharing online. The webpage pdf of *Pass It On* contains live links so that readers may click and get to more in depth information in

seconds. We would like to encourage those who are receiving a hard copy to think about this alternative and feel free to switch to the web page newsletter. This is easy to do, just follow these steps!

- Go to www.nhfv.org and click on **Membership**.
- Fill out the form as if you were a new member (please include address information).
- Add nhfamilyvoices@nhfv.org to your email safe senders list, address book or contact list so that an email notice of a new newsletter is not blocked or filtered into your spam folder.

This free resource is intended for sharing so please continue to **"Pass It On"** to friends, family and professionals you think might find it useful.



Pass It On is a free newsletter for parents of children with special health care needs and the professionals that support them.

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This publication is not intended to provide medical advice on personal health matters. All health concerns should be discussed directly with your physician.

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I am a Parent / Family member of a child/teen/adult (circle) with a: chronic health condition physical disability
 learning disability developmental disability behavioral challenges

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I am a Professional working with families and/or children/adolescents/adults (circle) with: chronic health conditions
 physical disabilities learning disabilities developmental disabilities behavioral challenges

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I am a Professional in Education (circle one), EI, Head-Start, Pre-school, Elementary, Middle, High school, Residential setting. Health Care Field (circle one), Community clinic, Hospital, VNA, Physician, Family Practitioner, Nurse.

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