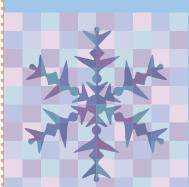
Winter Quarter 2016



WV Birth to Three

Winter Activity Ideas

Make your own Ptay Snow









Winter Nature Sensory [(EPLAY Learning and Exploring Through Play





Sensory play is a great way to let your children explore their five senses. Did you know that sensory play helps your children develop cognitively, linguistically, socially and emotionally, physically and creatively?

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Amber Huffman
Parent Partner
RAU III and IV
(304) 414-4465
ahuffman@rvcds.org
1701 5th Avenue Box 14
Charleston, WV 25387



Please visit the WV Birth to Three website at:

http://www.wvdhhr.org/birth23/

Events around the Charleston Area

- November 19 Sesame Street Live Charleston Municipal Auditorium, Charleston, WV 10:30 a.m. and 2:00 p.m.
- November 25 through December 31 Coonskin Park Foundation's Christmas Lights Drive Thru
- November 27—December 26 St. Albans Festival of Lights from 6:00 p.m.- 9:00 p.m.
- November 30 Trans Siberian Orchestra 7:30 p.m. at Charleston, WV
- December 3 Christmas Bazaar Vendor Sale at South Ridge Church starting at 9:00 a.m.
- December 3 Joytacular Albans Arts and Conference Center in St. Albans at 7 p.m.
- December 8-11 Christmas in the City (Charleston)
- December 10 Breakfast with Santa 9 a.m. –12:00 p.m. at WVU Kanawha County Extension Office



- December 17 Women's and Children's 3rd annual
 Southern West Virginia Toy Ride from 10:00 a.m. to
 12:00 p.m. at Daniel Boone Park
- December 17 Pinch Christmas Parade at 7:00 p.m. lineup starts at 5:30 p.m.
- December 17 Breakfast with Santa from 10 a.m.-12p.m. at Tamarack

Events around the Huntington Area

- November 16-18 A Christmas Carol Joan C Edwards
 Performing Arts Center, Huntington, WV at 7:30 pm
- November 18—27 Festival of Trees and Lights at Paramount Arts Canter in Ashland KY
- December 2, December 3, December 9, and December 10 Way Back Weekend Christmas Village at Heritage Farm in Huntington from 5:00 pm - 9:00 pm
- December 3 Cookies with Santa and Superheroes

Ronald McDonald benefit at First Presbyterian Church (1015 5th Ave)

- December 8 Barboursville Magical Christmas Parade
 Starting at Barboursville Middle School followed by Tree
 Lighting Ceremony
- December 8 Big Band Holidays with Wynton Marsalis and the Lincoln Center Jazz Orchestra at Keith Albee Performing Arts Center from 7:30 to 9:00 pm
- December 9 Elves and the Shoemaker at 7:30 pm at the Paramount Arts Center in Ashland, KY
- December 9 The Nutcracker Joan C Edwards Performing Arts Center, Huntington, WV at 8:00 pm



 January 19 Daniel Tiger's Neighborhood at 6:30pm at Paramount Arts Center



All About Birth to Three

WV Birth to Three is a statewide system of resources and supports for children under age three who have a delay in their development, or may be at risk of having a delay, and their family. The Department of Health and Human Resources, through the Bureau for Public Health and the Office of Maternal, Child and Family Health, WV Birth to Three, as the lead agency for Part C of the Individuals with Disabilities Education Act (IDEA), assures that family centered, community based services are available to all eligible children and families. These services are funded in part by the Individuals with Disabilities Education Act (IDEA), Part C, through the U.S. Department of Education and the West Virginia Department of Health and Human Resources (the state's lead agency responsible for implementation), Bureau for Public Health, Office of Maternal, Child and Family, Health, in cooperation with the West Virginia Early Intervention Interagency Coordinating Council.



How do I make a referral?

To refer a child to the WV Birth to Three system in-state, complete the <u>WVBTT Referral Form</u> and forward to the office that services the child's location or you may call 1-866-321-4728



It is important to remember that each child develops differently and in his or her own way.

Who is eligible?

An infant or toddler under the age of three can either have a delay in one or more areas of their development, or be at risk of possibly having delays in the future. A child may have delays in one or more of the following areas:

- **Cognitive** thinking and learning
- **Physical** moving, seeing and hearing
- Social/emotional feeling, coping, getting along with others
- Adaptive doing things for him/herself
- Communication understanding and communicating with others

A child may have risk factors such as:

- A condition which is typically associated with a developmental delay such as Down Syndrome; or
- A combination of biological and other risk factors.
 Some of these factors may include family stressors.

A Parent's Birth to Three Story

I remember the day we got the phone call asking if we would be willing to foster three little boys like it was yesterday. I remember the DHHR worker dropping off the two older boys, 2 and 8, and quietly telling us that they didn't know if the baby would make it. See, our youngest was born addicted to heroin. He began his life by fighting for it. He was going through such severe withdrawals that his little body could barely take it. And this was only the beginning for him.

He spent the first week of his life in the NICU, with nurses trying to soothe him when his little body was shaking a shivering from the pain. Even though he was taken as soon as he was born and we got his two older brothers that day, we didn't get to meet our little man until he was 4 days old. I remember the first time I held him; I just rocked him and told him how much I loved him already. He was my baby from the first time I saw him, and no one will ever tell me any different.

After a week in the NICU, he was released to come home. My wife and I excitedly took our boy home and introduced him to his brothers for the first time. Even though they were brand new to our family, they were loved more than words can explain. Once we were home, the days were long and the nights were longer. The withdrawals continued and he was miserable. It seemed like it would never end.

As a few days passed, we started to notice that his tremors were starting to look more and more like seizures. At this point, we were worried, so we took him to his pediatrician. The pediatrician kind of blew it off thinking we were just overreacting because we were new parents and suggested it might just be reflux and gave us a prescription for that since he did not have an episode while we were there. However, a few days later, his tremors had worsened to the point where I was no longer satisfied with the pediatrician's answer and I took him to the emergency room. The emergency room doctors didn't think much of it; that is until he had an episode and they saw it. They immediately started running tests.

Within 30 minutes, the results were back. He was having seizures due to hypocalcemia. His levels were so low they immediately took us to the PICU and put him on a calcium and magnesium drip. His seizures had increased to every 30 minutes or so. He was not well. Had we waited any longer, our baby may not have made it. He had a PIC line in his head and IVs in his arms and head; our poor boy looked awful.

But slowly the time in between seizures got further and further apart. After a week and a half, we got to leave the PICU and go to the regular part of the hospital. We spent another week there, slowly recovering, and finally starting to smile. Once we were finally released, our boy looked tiny and frail. But he was stronger than he looked; he was my fighter.

After a few weeks of being home, we got a terrifying phone call from our pediatrician; his newborn screens had come back and they indicated he had a severe combined immunodeficiency (SCID), or as most people know it, bubble boy syndrome. We panicked. We got all the tests and waited for the results, all while afraid to leave the house. Finally, the results were back and we were sent to see the State's only pediatric immunologist in Huntington.

Once, we got there, we got good news; he didn't have SCID. However, he did have an immune deficiency, just not as severe as originally thought. Because of his history of hypocalcemia and now the immune deficiency, this triggered testing to find out if our boy was born with DiGeorge syndrome, a genetic disorder.

After a few weeks of testing, it was confirmed.

At the recommendation of the immunologist, we had a swallow study completed around 5 months because our boy was spitting up more than normal. During the swallow study, the doctors said everything looked good and told us the video would be sent to an ENT to review just in case there was something they didn't see. It finally seemed like we had some good news.

However, the next day we got a call from the ENT telling us they saw what they thought was a submucosal cleft palate. From there we were referred to a maxillofacial surgeon who confirmed. Since he was so young, they didn't want to repair the cleft and just wanted to follow him until he reached a year old and decide if a repair was necessary when he was older.

With the multiple diagnoses and our little guy's history, our pediatrician referred us to the birth-to-three program. We started our evaluation in November and qualified based on his special needs and history. At this time we started seeing an occupational therapist and a developmental specialist, along with the coordinator. It was great to have these lovely ladies come into our home and teach us was to help our little man learn to meet all of his developmental milestones.

In December, after multiple ear infections and failing four hearing tests (newborn, 1 month, 3 months and 5 months), our little guy got bilateral ear tubes. At 9 months old, we returned to make sure his ears were clear and to have another hearing test. At this time our little guy failed the test again and was diagnosed with moderately-severe deafness. With his new diagnosis, we began the process of getting him fit for hearing aids and getting it approved by insurance.

We continued to receive birth-to-three services for DT and OT and the ladies worked with us while he started crawling and even walking! At the end of March 2016, our little man finally received his fire engine red hearing aids. We then began the process of adding a speech therapist to his team. However, in mid-April, we went in to have his cleft palate surgically repaired. This was a process for my boy, it was a 5 ½ hour surgery that basically deconstructed the roof of his mouth and put it back together the way it should have formed.

Again, he was a trooper. The doctor said he has never seen a baby recover as quickly as he had. I mean, he literally wanted to drink as soon as he got out of surgery and was eating within the next hour. The doctor said that he had never witnessed a baby eat on the same day they had surgery. Within 5 days, our boy was back to his normal, happy self.

By the end of April, we were able to add the speech therapist to his team and we were seeing the OT, DT and the speech therapist. Our boy continued to strive; however, he still was not making much sound. At this point, multiple people kept suggesting we add a hearing specialist to our team. Because of the rave reviews from our audiologist and the DT, we added her. And boy was that the best decision we ever made.

Now our little man is jabbering, listening and running around, being a regular 17 month old. He seems like such a regular baby. If you would see him, you would have no idea what he's been through or that he is considered special needs. Everyone has worked so hard to get him where he is today. The birth-to-three program has been an integral part of getting him here. We latterly meet with at least one of our birth-to-three team members at least once a week. They have watched our boy grow and helped teach us the best way to teach him. They have been a key process in our little guy going from the frail baby he was to the hulk of a boy he is today.



-Kris and Diana Taylor



What should you expect from a WV Birth to Three home visit?

Home visits come in all shapes and sizes. They occur in the child's natural environment, i.e. in their home, at a daycare/preschool, babysitter's home, grandma's house, playground etc. and should be based on a child's/family's daily routines. When a family is given the choice of their birth to three team, it can be a daunting task. How do you know who and how the person will blend with your family? Once your evaluations/home visits begin, you will begin to develop a rapport with your team. The next step is knowing what to expect from a home visit

Practitioners work as a team, however, each discipline functions under their own specific scope of practice. Home visits are intended to be family friendly. Sessions should be a balance of hands on time with the child, as well as, parent/caregiver training and education. Education/training serves as a critical piece to allow those spending the most time with the child to implement strategies between visits.

Practitioners will vary in the approach to service delivery but all services should be family friendly and respectful of the family's values. Communication should be clear and open among the Birth to Three team, which includes the family/caregiver. Your practitioner should be asking in depth questions about what your child is doing and what your biggest challenges are throughout your day. Our job is to problem solve solutions to your child's daily challenges. It is very important for families and practitioner's to have a good working relationship. Practitioners need to know what strategies work and which strategies do not.

Birth to Three services are not intended to add "work" to a family's busy schedule. Based on the family's concerns- we offer suggestions for improvement or to tweak what is already happening. We hope to help families integrate therapeutic activities and strategies into your daily routines, so that your child may become more independent and the parent/caregiver less frustrated.

Cathy Jo Higgins, M.A.

WVBTT Developmental Specialist

The Developmental Advantage, LLC-Owner

Sonya Frye OTR/ L

WV Birth to Three

Occupational Therapist



"Please know that as the Parent Partner, I have seen the parent's side of WV Birth to Three. My goal is to provide families with support and information that they need to succeed from the services WV Birth to Three provides."

-Amber Huffman, RAU III Parent Partner

As the Parent Partner I am here to provide families with:

- Helpful resources
- Support
- Transition with services after your child turns three
- Give the information needed to make referrals
- Information on child development
- Information on community resources that will personally benefit each family



10 Reasons to Build Forts







1. Kids Will Discover Their Inner Engineer

The problem solving, creative thinking and cooperation required to build forts embody the basics of engineering. You'll see your children's minds work right before your eyes as they assemble their forts.

2. Fort Building Gives Kids Hours of Entertainment

There are endless ways to put together a fort, and once the fort is assembled, your kids will then get to create a new world inside their fort. Rainy days, snow days, and too-hot summer days meet their match with a fort.

3. Kids May Find a New Career Path

We all know kids can change their mind about what they want to be when they grow up 100 times, but there are some things they do as a kid that can stick with them into adulthood. Building forts can teach the basic ideas of architecture, engineering, geometry, and design, and the enjoyment of this process can give your child an idea of what he or she wants to be in the future.

4. Fort Building Requires Imagination

Kids will envision worlds they've never seen and go on journeys from their wildest imaginations when they build forts.

5. Fort Making Is Physical Play

With all of the technology available to kids today, it can be hard to get them off of the couch to do some physical activity. Physical play is important for your kid's development, and playing with forts can help pave a healthy and active future.

6. Kids Learn Cooperation

If two or more kids build a fort together but don't actually "work together," the fort probably won't stand for long. Building a sturdy and functioning fort requires cooperation between the builders, and this skill will be needed their whole lives.

7. Fort Building Shows That Hard Work Pays Off

It's so fun for kids (and adults) to see the finished product of their hard work, and fort building gives kids a chance to see what their focus and dedication can make.

8. Mom and Dad Can Play Along

Fort building is fun for the whole family, and the kids may need mom and dad's help sometimes. You'll enjoy constructing a fort almost as much as your children do, and they'll love that their mom and dad are spending some quality time with them.

9. Fort Building Enhances Creativity and Language Development

Your kids will challenge themselves to see who can build the most extravagant designs, and the play that happens after the fort is built will be from their creative thinking.

10. Fort Building Is FUN!

Parents know how fun forts can be when they are merely constructed from just some blankets and chairs. Kids can take fort building to a whole new level of fun, plus experience all of the other benefits of building forts. What's not to love?

Now that the winter weather has arrived, is your child safe?











Is it Time for a Change?



If your child's head is one inch or less from the top of the seat, or if he outgrows the seat by height or weight, it's time for a new seat.



If the shoulder straps come out of the seat from below your child's shoulders, it's time for a booster seat.



If the knees bend at the edge of the seat, with the strap on his shoulder (not neck) and belt on his hips (not belly), it's time for the seat belt.

RULE OF THUMB: Every time you move from one type of seat to the next, you lose protection, so delay progression as long as you can.

Be sure to check the laws and regulations in your area to make sure your children are safe!

Five Common Mistakes Most Parents Make Using Car Seats

- Right Seat. Check the label on your car seat to make sure it's appropriate for your child's age, weight and height. Like milk, your car seat has an expiration date.
 Just double check the label on your car seat to make sure it is still safe.
- Right Place. Kids are VIPs, just ask them. We know all VIPs ride in the back seat, so keep all children in the back seat until they are big enough to ride without a booster seat.
- Right Direction. You want to keep your child in a rear-facing car seat for as long as possible, usually until around age 2. When he or she outgrows the seat, move your child to a forward-facing car seat. Make sure to attach the top tether after you tighten and lock the seat belt or lower anchors.
- Inch Test. Once your car seat is installed, give it a good shake at the base where the seat belt fits. Can you move it more than an inch side to side or front to back? A properly installed seat will not move more than an inch.
- Pinch Test. Make sure the harness is tightly buckled
 and coming from the correct slots (check car seat
 manual). Now, with the chest clip placed at armpit level, pinch the strap at your child's shoulder. If you are
 unable to pinch any excess webbing, you're good to
 go.



Salt Dough Ornament Ideas









Kids only/



Draw your favorite thing to do in the snow!

Decorate your snowflake tic tac toe