

Texas Parent to Parent

Providing support and information for families of children with disabilities, chronic illness and other health care needs

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Debbie D., Debbie W., Erika, Jeanine, Laura D., Laura W.,
 Lisa C., Lisa S., Lucy, Patty, Rosemary, Sue, Susan

Update: There are now almost 2,000 of you and over 500 professionals, donors, event sponsors, and other friends and supporters in our database. We are growing by almost 500 parents a year. So, if you move or change a phone number, please let us know. It takes a lot of time to contact families when we get a disconnected number or a newsletter returned with no forwarding address. Please contact Susan Prior with updates at Susan.Prior@txp2p.org or call at 866-896-6001 or local 458-8600. There are now thirteen people working to carry out TxP2P's mission, including 3 full-time and 10 part-time positions. Patty Geisinger has recently started scheduling parent "administrative volunteers" to come into the office to help with calls, updating parent contact information, copying materials for trainings, and any other job we have that needs to be done. If you would like to help with these type of tasks, please contact Patty Geisinger at Patty@txp2p.org or call the office.

Listserves: We coordinate parent-only listservs

for the following areas: Austin, Bryan/College Station, Dallas/Ft. Worth, Houston, Rio Grande Valley, San Antonio, San Marcos and Waco/Temple. Additional listservs focus on specific topics including ADD/ADHD, Advocacy, Bipolar, ECI, & Homeschoolers. We are starting new listservs for autism and transition soon. We welcome input on ideas for creating new listservs that will be beneficial to parents - please share your ideas with Laura Warren at Laura@txp2p.org or call the office. We are also looking for **volunteers** to moderate new local or topical listservs and to create resource lists from the archives of the local listservs to be placed on the local listserv's website. If you are interested in helping us with this, please contact Laura at Laura@txp2p.org or call the office.

Family to Family Health Information Center: We now have two Family to Family federal grants to help families learn more about health care for children with disabilities and special health care needs. These grants have increased our ability

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Help TxP2P by using our Randall's Good Neighbor Remarkable Card Number 10043!

It's New! - Important New Services for Kids with Disabilities: Personal Care Services for Children

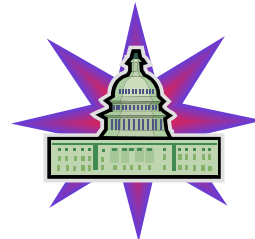
By Colleen Horton, Texas Center for Disability Studies

Spread the word...This is BIG! Personal Care Services (PCS) are now available for Medicaid eligible children and youth with disabilities through the Medicaid Comprehensive Care Program. As a result of the settlement agreement in the Alberto, N. lawsuit, the Texas Medicaid state plan has been amended to include a personal care service benefit specifically designed for children with disabilities and chronic health conditions enrolled in Medicaid. There are no waiting lists as this is a state plan service. Previously, children with physical disabilities or medical needs were eligible for PCS through Texas Medicaid's Primary Home Care Program but children with cognitive or be-

havioral disabilities were not eligible. Now they are! Most children who received PCS under Primary Home Care will now be served through the new PCS program for children.

What are personal care services? PCS are those services that assist eligible clients in performing activities of daily living (ADLs), instrumental activities of daily living (IADLs), and other health-related functions. (Texas Medicaid Bulletin, No. 207) These activities basically include a wide range of daily activities that children are typically engaged in. For example, a child with cerebral palsy may need assistance with bathing, toileting, eating, dressing, etc. A child with autism

may need supervision and cueing to perform daily tasks, communicate with others, or simply to be able to attend certain activities. PCS also encompasses things like grocery shopping and laundry for young adults or for younger children if their disability causes extra support needs in those areas for their family. PCS can also provide assistance for nurse delegated services, such as g-tube feedings, if the child's physician and nurses believe delegation is appropriate.



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to provide support and matching for parents as well as provided trainings and presentations throughout the state. What's important for you to know is that we have added a Bilingual Trainer. For topics, please go to <http://www.txp2p.org/f2fpresentations.pdf> or contact Jeanine Pinner at Jeanine@txp2p.org or 512-217-3558 or Debbie De Luna at DebbieD@txp2p.org or 956-447-5568 to schedule trainings for your parent group or conference.

Deaf & Hard of Hearing Contract: We received a contract through the Department of Assistive and Rehabilitative Services (DARS) Early Childhood Intervention (ECI) program to provide parent-to-parent support for families with children who are deaf or hard of hearing. Our first step has been to train parents as Supporting Parent Volunteers. We still need more **volunteers**. We also have resources to support new families who have just learned that their child has a hearing loss. So, if you want to volunteer to help new families or if you know of new families, please contact Laura Davis @ Laura.Davis@txp2p.org or Lisa Crawford at LisaC@txp2p.org or call them at 866-896-6001 or local 458-8600.

Transition Program: We are in the process of creating a Transition Program for families of youth and young adults with disabilities or special health care needs based on parent-to-parent support and the book, *A Good Life*. We are recruiting parent **volunteers** who have experienced the transition process to be trained as Transition Supporting Parent Volunteers and plan to start an email-based training after the first of the year. Please contact Laura at Laura@txp2p.org or call the office if you are interested in volunteering.

We are also testing out a curriculum based on transition issues for a working parent group currently made up of staff and a few of our volunteers. We not only discuss the emotional aspects of transition but are also helping each other work on goals toward transition for our children and plan to read *A Good Life* together. It's been a terrific experience and one we plan to replicate across the state. If you are interested in this parent group model, please contact Laura at Laura@txp2p.org or call the office.

Supporting Parent Volunteer Training: Our volunteers attend an all-day training on a Saturday before we match them with new parents. This year's dates are: Austin, Jan. 19th
Weslaco, Feb. 16th
Waco, April 12th
San Antonio, May 17th
Corpus Christi, Aug. 9th
Longview, July 12th
Houston, Oct. 11th
El Paso, Sept. 13th

If you are interested in being trained as a volunteer, contact Erika at Erika@txp2p.org or call the office

OTHER WAYS YOU CAN HELP TxP2P:

Holiday Appeal: We recently mailed our holiday appeal requesting donations to help us cover the expenses of TxP2P programs and services. Grants and contracts only cover a portion of our costs. However, we know what it costs to raise a child with disabilities or special health care needs. If you typically donate to nonprofits, we hope that you consider adding TxP2P to your list of donations.

Family Stories: We share stories about our families for a variety of purposes - the newsletter, thank you notes to donors and sponsors, grant proposals, etc. So, if you would like to write a one-

page story about how parent-to-parent support has helped you and your family, we would love it if you would share your experiences with us. The story does not have to be specific to how TxP2P helped you as long as it relates to how connecting with other parents helped you. We are also looking for stories on how your extended family or community has been helpful. Please send them to Laura at Laura@txp2p.org or to our office at 3710 Cedar Street, Box 12, Austin, TX 78705-1449.

Email newsletter: We are now able to get the email newsletter to you without you joining a YahooGroup. If you are interested in receiving your newsletter by email and saving a tree and the expense of printing and postage, please contact Susan at Susan.Prior@txp2p.org or call the office.

Want Your Relatives to Receive Our Quarterly Newsletter: Although parents are our primary focus, we know sometimes that your relatives are a major support for you in caring for your child. If you think they would enjoy receiving our newsletter, please have them call us (866-896-6001 or local 458-8600) or have them go to the website (www.txp2p.org) and sign up.

Name Our Newsletter: Someone just asked me the name of our newsletter and I responded "Texas Parent to Parent." Very original - actually, kind of embarrassing! It then occurred to me that maybe we should ask you what you think our newsletter should be named. So, help us out - if you have any great ideas for our newsletter name, please email them to Debbie Wiederhold at Debbie@txp2p.org or call the office.

HAPPY HOLIDAYS!

Case Management Help - For Those with & without Medicaid

Laura J. Warren, TxP2P

Do you ever feel that you have too much to do in keeping up with your child's care and health? Do you wish someone would swoop in and help you get organized in caring for your child? Well, you are not alone - I've talked with so many parents who feel that way when they have a child with a special health care need. I never had a case manager's help with my son - I received a lot of help from various therapists, ECI workers and other parents but never had a case manager. While I know that you have all had good and bad experiences with this, I still would have liked to have someone to work with me in coordinating Jason's care. I remember when he was very young, I didn't feel qualified to orchestrate his care with all the specialists and therapists - I was the kid who hid under the bed when someone mentioned a doctor or shots - I knew nothing

about caring for a child with all these medical issues and therapy needs. I finally got over feeling that way and am now passing the torch over to him to orchestrate his own care - of course, he isn't interested in taking it but I'll use duct tape if I have to!

There is help provided by the state, even if you don't qualify for Medicaid! Its case management services through Texas Department of State Health Services (DSHS) Children with Special Health Care Needs Program (CSHCN). You can contact the Regional DSHS Offices and ask to speak to the Social Work Department or call the statewide inquiry line (800-252-8023) and ask for your local office. A list of local offices can be found on the Internet at <http://www.dshs.state.tx.us/cshcn/caseman.shtm>. They will work with you to determine if there are any other

sources for case management for your child and if not, they will provide the services. The following groups offer programs called "parents as case managers": Uniting Parents in the Panhandle, West Texas Rehabilitation Center in Abilene and San Angelo, Families CAN at the University of Houston in Houston.

If you are on Medicaid, you can contact your local Medicaid Office and ask for Children and Pregnant Women (CPW) Case Management.

If anyone has trouble accessing these services, please let one of us at the TxP2P office know (866-896-6001; local 458-8600; Laura@txp2p.org). We have heard about some problems and would like to know if you have trouble contacting these programs or getting appropriate services.

It's New! - Important New Services for Kids with Disabilities: Personal Care Services for Children

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Personal care services can be the life line that many families need to prevent institutionalization of their child and to maintain a healthy family.

Who is eligible? According to the Texas Medicaid Bulletin, No. 207, the personal care services benefit is available to Medicaid clients who:

- are younger than 21 years of age;
- are enrolled with Texas Medicaid fee-for-service, Primary Care Case Management, or Medicaid managed care; and
- have physical, cognitive, or behavioral limitations related to a disability or chronic health condition that inhibits the client's ability to accomplish ADLs, IADLs, or health-related functions.

This service is available to children on Medicaid waivers, but the things they will look at to determine PCS

hours for a child on a Medicaid waiver will be different. The PCS services will likely "wrap around" other waiver services to fill in the gaps.

How can referrals for PCS be made? Anyone who identifies the potential need for these services



may refer a child for an assessment. Referrals can be made by parents, guardians, case managers, health care providers, and others. Referrals for PCS may be made to

the appropriate Department of State Health Services Health Service Region (see blue pages of telephone directory), or by calling the TMHP Community Health Services Department toll-free at 1-888-276-0702. Once a referral is made, a Department of State Health Ser-

vices case manager will be assigned and will schedule an assessment. Prior authorization for this service is required.

Is this really new? Yes, and this is good news! Limited PCS services were previously provided to some children with medical needs through the Primary Home Care Program (PHC) at the Department on Aging and Disability Services (DADS). PCS services, however, *were not previously available to children with cognitive or behavioral disabilities. Children with these disabilities will now be eligible to be assessed for personal care services.*

For more information, contact Colleen Horton, Public Policy Director, Texas Center for Disability Studies, colleen.horton@mail.utexas.edu or Elizabeth Tucker, EveryChild, Inc., etucker@everychildtexas.org

Assistive Technology: Short-term Device Loan Program & Demonstration Centers

Short-Term Device Loans

When individuals with disabilities, their families and qualified professionals are able to borrow AT devices and assess them in the individual's normal environments, they are then better able to determine if the devices meet their needs or the needs of individuals with disabilities they are serving. They are then able to make informed choices about what device to purchase or whether to purchase a device at all.

The Texas Technology Access Program is designed to meet the needs of persons not served by existing agency loan programs. Texas residents may borrow assistive technology devices for a period of six weeks. The device loans are free and we even pay for the shipping!

For a current inventory, please see our website at <http://techaccess.edb.utexas.edu/loan>.

Device loans:

- are free
- are for 6 weeks and may be renewed if the device has not been requested by another borrower

- available to anyone in Texas
- shipping both ways is free

Loans are available to people with disabilities, family members, educators, service providers, employers. As a borrower you must be responsible and agree to treat the device with care, return the device on time, and pay for repair or replacement of the device if damaged due to abuse or neglect.



While some assistive technology devices are easy to understand and use, many require special training, set-up and support. Those devices that require special support are indicated in the Current Inventory List. If you request one of these items you will need to have a support person available in order to borrow the equipment. Section 2 in the Loan Request Form asks for information about your support person. Support persons are often teachers, occupational, physical or speech therapists, or early childhood intervention specialists.

For more information, go to <http://techaccess.edb.utexas.edu/loan>, call 800-828-7839, or e-mail

techaccess@teachnet.edb.utexas.edu

Demonstration Centers

The Texas Technology Access Program has developed a statewide assistive technology demonstration network, including general assistive technology, computer access and portable computer access demonstration centers. Demonstrations will be available to consumers and their family members, as well as advocates, employers and educators. Demonstrations will include an explanation of the function of the device and instruction in its use. There will be an opportunity at each demonstration for participants to try a number of devices so that each individual will be better able to determine the most appropriate device to meet his/her specific needs. Upon the completion of the demonstrations, participants will be given information about further assessment, if required, funding, and assistive technology vendors so they can make an informed decision regarding accessing or

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Assistive Technology: Short-term Device Loan Program & Demonstration Centers

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acquiring assistive technology devices.

Statewide Demonstration Centers

Full Demonstration Centers

Easter Seals, Fort Worth, 817-759-7907 (V); El Paso Rehabilitation Center, 915-544-8484 (V); United Cerebral Palsy, Dallas, 214-351-2500 (V); United Cerebral Palsy, Houston, 713-838-9050 (V); Warm Springs Rehabilitation Hospital, San Antonio, 210-592-5421 (V)

Computer Access Demonstration Centers

RISE Center for Independent Living, Beaumont, 409-832-2599 (V); East Texas Center for Independent Living, Tyler, 903-581-7542 (V/TTY), 903-581-8289; Brazos Valley Rehabilitation Center, Bryan, 979-776-2872 (V); Goodwill Industries of Central Texas, Austin, 512-637-7520 (V); Brazoria County Center for Independent Living, Angleton, 979-849-7060 V/TTY, 979-

849-8465; Palestine Center for Independent Living, 903-729-7505 V/TTY, 903-729-7505

Portable Computer Demonstration Centers

REACH Center for Independent Living, Dallas, 214-630-4796 V, 214-630-5995 TTY; Houston Center for Independent Living, 713-974-4621 V/TTY, 713-974-6927; Heart of Central Texas Independent Living Center, Belton, 254-770-2350 V, 800-326-4921 Toll Free

New DARS Autism Program Announced

DARS is embarking on an exciting new initiative that will soon expand our services to provide assistance for children with autism. With a \$5 million grant authorized by the Legislative Budget Board and the Governor's Office, DARS will offer a limited program designed to serve Texas children ages 3-8 diagnosed with autism spectrum disorder.

On November 15, 2007, DARS will issue a Request for Applications (RFA) to establish up to five grant contracts with applicants capable of providing autism services, including Applied Behavioral Analysis (ABA).

Contracts will be awarded in February 2008. The RFA can be viewed at www.dars.state.tx.us/business/grants.shtml after November 15, 2007.

There will be an applicant's conference in late November or early December for interested bidders to receive more information about this RFA. The actual date and location will be set when the RFA is released. The program is intended to:

- offer positive behavior support strategies, including ABA;
- compliment services by a child's Individualized Education Plan (IEP), if such a plan exists; and

•bill Medicaid, CHIP, private insurance and any other available third party source before using DARS funding.

If you have comments about DARS autism services or the RFA process, please send them to DARS.autism.program@dars.state.tx.us.

DARS looks forward to establishing new partnerships that will serve children with autism in Texas.



Who's Driving the Bus? Wow - I didn't know the bus

stopped at the doctor's office, too!

By Jeanine Pinner, TxP2P

OK, I'll admit it - I thought we were doing pretty well with self-determination and transition issues at the doctor's office. I make the appointment, pick Jake up from school, wait patiently (all right, maybe not so patiently) in the examining room, and zip my lips while the doctor has a conversation with Jake, with me speaking only when spoken to or when absolutely necessary. I'm a good mom - I'm doing a great job! A few more visits like this and Jake will be able to take over for himself!

Nothing to it ... right? Attending the 8th Annual Chronic Illness and Disability: *Transition from Pediatric to Adult-Based Care Conference* in early November caused me to rethink the high opinion I had of myself. So, back up the bus. Maybe the way I'm doing this isn't really going to give Jake the information or experience he needs to be in charge of his own health care.

From one of our presenters, Patti Hackett (Team Lead & Co-Director,

Healthy & Ready-to-Work National Resource Center), we received a checklist that really caught my attention: *Transitions - Changing Role for Youth*. The checklist doesn't indicate a suggested age for implementing or working on developing these skills, but that's going to be different for each of our kids, anyway - different ages, abilities and needs. (The checklist is at the end of this article.)

Look at #3: **"I carry my health**

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Who's Driving the Bus? Wow - I didn't know the bus stopped at the doctor's office, too!

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insurance card every day." Jake doesn't even carry a wallet, much less an insurance card (besides, we only received one card this year - probably an insurance company cost-saving measure - ha!). #11: "I have a part in filing my medical records and receipts at home." Hmphh ... do I really have to admit that I've become one of the folks who needs a bulldozer to excavate her desk to even find the files? Now you've probably figured out that Jake doesn't do #11, either.

Try #8: "I know I have an option to see my doctor by myself." Eureka! Got one right! Or do we? Well, at least I always tell Jake that he has the option to see the doctor by himself. Even if he never does actually do it, that counts, right? But, if he goes in to see the doctor all by himself, how will I know what they talked about? Will Jake take notes that I can read later? What if the doctor prescribes something and gives Jake verbal instructions? What if he needs a blood test, x-ray or MRI? **What if ... what about ... stop!**

This is all workable - I can do this - it should be a piece of cake compared to some of the things we've had to do before. How to begin? With one step and then another - then it's not overwhelming. I know - systems, charts & calendars - my friends! This is all beginning to sound familiar to me - figure out 1) what he can already do, and 2) what he needs to learn how to do (wow - just like on the chart!).

Let's focus on just a few of the skills on the checklist for now:

Back to #3: "I carry my health insurance card every day." Jake doesn't carry a wallet, so I guess he needs to start. What if he loses his wallet? By looking at the insurance card, I can see that there's not

really a lot of personal information on it that would put us at risk if it fell into other hands. Perhaps we can start with a copy of the card. We can write a social story or put together a list of do's and don'ts about carrying a wallet. This will help make it part of his routine (he's really good with routines!). Practice, practice, practice!

5: "I track my own appointments and prescription refill(s) date." Not! But he can! All this takes is a calendar, a little information & practice. The huge refrigerator calendar we have will really come in handy for this. For medication, we try to utilize the 90-day mail order feature of our insurance policy. So, it's a pretty simple matter to figure out when it will run out and back up 2 or 3 weeks, complete the paperwork and put it in the mail. Piece of cake!

#6: "I call for my own doctor appointments." Jake and I can write a script about the conversation and practice it. We've used scripts for a lot of things before, and I think they'll work nicely here, too. I can also call the doctor's office in advance of Jake's phone call and let them know to expect a call from Jake. I think it will help pave the way for a good experience for him if I call the doctor's office first (I haven't been able to find anything that says this is against the rules!). Since he's new to this, he will need quite a bit of practice speaking up, *really listening*, and responding appropriately.

Coordinating calendars and appointment times could be a little tricky, so we'll make a list of our available days and times before the call. We'll role-play the situation a few times before the first call, and

problem-solve as we go along. Another piece of cake!

Back to #8: "I know I have an option to see my doctor by myself." I really have been telling Jake this, but what I haven't done is make it happen. I can do this. Jake can do this. Maybe this will work: Jake and I are in the examining room - when the doctor comes in, we'll tell him our plan - that it's time for Jake to take charge of this part of his life, but that Gary and I are still part of it and need to know what's going on. We'll ask the doctor for his suggestions on how we can make this happen. Maybe for the first couple of times, I'll need to come back in when the exam is finished and hear from Jake (hopefully) or the doctor (if necessary) how

it went. Perhaps we'll set a system in place where I only get involved if Jake needs to do something (blood test, etc.) or if there's a problem of some sort. Kind of a "no news is good news" event. This is an instance where we really need a system, because Jake doesn't always relay complete information to us. Not a piece of cake, but certainly not impossible!

#9: "I call in my own prescriptions." Since this would only apply to refills and the pharmacy we use has an automated system, this won't be too difficult. We can both listen in as the automated system gives directions ("If you're calling to refill a prescription, press 1.") We can write down the steps and prepare a template so that Jake can gather the required information and write it down before beginning his call. Our pharmacy's services also include the ability to request a prescription refill online.

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Who's Driving the Bus? *Wow - I didn't know the bus stopped at the doctor's office, too!*

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The directions are visual and very clear. This is a task that would be very easy for Jake to complete successfully and without a great deal of confusion or frustration, even the first time! Using a computer is one of Jake's strengths. Again, piece of cake!

And, finally, #12: ***"I pay my co-pays for medical visits."*** Jake doesn't have a checking account, and you've already heard about our filing system, so you know that a cash receipt would probably get lost (OK, I admitted it). So, for now, I think I'll take a shortcut here and just give Jake a check for the co-pay. At our clinic, we check in at the front desk and give them our co-pay before the office visit. Jake and I can role-play what to say and do ahead of time. I'm confident he will easily make the connection when he's on his own and has his own bank account. Are we finished? No! Is there more

to do? Yes! But, if we let this overwhelm us, we won't get any of it done. One step at a time...

Our children each have different medical issues, some more complicated than others. Some of our kids don't have verbal communication skills or the ability to understand everything that's on the checklist. That's OK. The checklist has a ***"Someone else will have to do this - Who?"*** option for the tasks/skills our kids can't do. I think the real point is to change the way we, as parents, think. It will help us better prepare our children to do *as much as they can* for themselves, and to *make a plan* for the things they can't do. We won't be around forever, and it's our job to teach our children as much as we can about how to advocate for themselves and to make informed decisions about their lives - this includes their health care. Look at it as OJT (on-the-job training) - it

starts right here, right now - and there's no time to waste.

Take some time to explore the Health & Ready-to-Work website (www.hrtw.org). It has a wealth of helpful information. And, while you're on the web, be sure to visit http://usfpeds.hsc.usf.edu/adolescent/pdf/Curriculum_Students.pdf.

This site provides an amazing tool to help teach our kids how to make informed decisions about their health care: ***"What's HEALTH Got to Do with TRANSITION?"*** curriculum.

Share your ideas about how to help kids develop the skills on the checklist by emailing me at jeanine@txp2p.org and we'll publish your ideas and comments in an upcoming newsletter. The more information we have, the better prepared we'll be to help our kids drive their own buses by becoming effective self-determined self-advocates! Happy navigating!



Transitions - Changing Role for Youth

Health & Wellness 101 The Basics	Yes I do this	I want to do this	I need to learn how	Someone else will have to do this - Who?
1. I understand my health care needs and disability and can explain my needs to others.				
2. I can explain to others how our family's customs and beliefs might affect health care decisions and medical treatments.				
3. I carry my health insurance card every day.				
4. I know my health and wellness baseline (pulse, respiration rate, elimination habits).				
5. I track my own appointments and prescription refill(s) expiration dates.				
6. I call for my own doctor appointments.				
7. Before a doctor's appointment, I prepare written questions to ask.				
8. I know I have an option to see my doctor by myself.				
9. I call in my own prescriptions.				
10. I carry my important health information with me every day (i.e.: medical summary, including medical diagnosis, list of medications, allergy info, doctor's numbers, drug store number, etc.)				
11. I have a part in filing my medical records and receipts at home.				
12. I pay my co-pays for medical visits.				
13. I co-sign the "permission for medical treatment" form (with or without signature stamp, or can direct others to do so).				
14. I know my symptoms that need quick medical attention.				
15. I know what to do in case I have a medical emergency.				
16. I help monitor my medical equipment so it's in good working condition (daily and routine maintenance).				
17. My family and I have a plan so I can keep my healthcare insurance after I turn 18.				

Meaningful Gift-Giving

Revolutionary Common Sense by Kathie Snow, www.disabilityisnatural.com

Ahhh, the joy of sharing during wonderful gift-giving times: holidays, birthdays, and more! What's on your shopping list? Toys, clothes, electronics, books, DVDs, or...? Your friends and loved ones will be happy with the gifts you give. Did you know you can give even more without spending a penny? Check out the following avenues for meaningful gift-giving:

PARENTS: Give your child's teacher PERMISSION TO FAIL. Most educators try diligently to do their best. But teachers in inclusive classrooms may be unsure of themselves as they learn new strategies to include and support children with disabilities. In addition, they may often feel an extreme amount of pressure to do things perfectly. As the parent of a child with a disability, I learned many years ago that what worked with my son at one time, or in a particular environment, didn't always work the way I thought it would at other times or in other environments. My husband and I frequently need to try new things at home, *knowing we'll make mistakes*. We need to give educators (and anyone else who works with our children) the same PERMISSION TO FAIL that we give ourselves. When parents let educators (and others) know it's okay to make mistakes, so long as they're willing to keep trying new things and do whatever it takes to be successful, educators can relax and do a better job. So with kind eyes, a warm smile, and a gentle touch on the hand or shoulder, say something like, "I'm not a perfect parent, and I don't expect you to be a perfect teacher. It's okay if you make mistakes, and I support your efforts as you try new things. Let's keep working together and help each other figure out the best ways to ensure both you and my child are successful and feel good about everything!"

EDUCATORS: Give mothers and fathers the gift of RESPECT FOR PARENTAL EXPERTISE. Parents of children with disabilities have years of experience—they are experts! Recognize that combining your professional expertise with parents' intimate knowledge of their child will result in success for you and the student.

PARENTS AND EDUCATORS: Give chil-

dren with disabilities the gift of RESPONSIBILITY. When we expect children to be responsible, they know we trust them and believe in them. Being responsible can take many forms, such as: doing chores at home, making their own decisions (small and large), actively participating in their IEP meetings (including writing goals), finding their own jobs, and...the list is endless! When we *expect* a child to be more responsible, we send the message that we believe she's competent and able, and then *she* will believe she's competent and able. This is a gift that can change a child's life, now and in the future!

PARENTS: Give your child a VACATION TO KIDLAND. The daily routines of too many children with disabilities are governed by disability-related services. *Many don't have time to be kids!*

So give your precious son or daughter a two-week break (or more) from home visits, speech/physical/occupational therapies, and other special services. Let him choose what to do with the hours in Kidland: sleep, watch a DVD, play with friends, do nothing, sit for hours playing a computer game, or spend dynamite time with mom and dad. Grown-ups take two week vacations from work. Why shouldn't kids get a vacation from the *work* of therapies and special services? Think how you and other family members will enjoy this vacation, too! (And, who knows, you might just decide to extend the vacation indefinitely!)

CHILDREN AND ADULTS WITH DISABILITIES: Give someone the gift of FRIENDSHIP. Too many people with disabilities are seen primarily as recipients of help and assistance, and they're surrounded by professionals and paid staff. But people with disabilities—just like people without disabilities—need friends and companions, *and* they need to be "givers," not just "recipients." Someone in your community needs your friendship and support! And the best way to "get a friend" is to "be a friend." So make connections through church, community groups, or volunteer organizations, and find that person who needs you for a

friend. When you give the gift of friendship, you give yourself a gift at the same time!

MOMS AND DADS OF CHILDREN WITH DISABILITIES: Give yourself the gift of SERENITY. Many parents are on the never-ending merry-go-round of services, IEPs, therapy goals, interventions, and more. When all this "disability business" is combined with being a wife/husband, having a job, and parenting *all* your children, disaster is in the making. Perpetual stress, exhaustion, and burn-out can create chaos in our lives, as well as in the lives of our loved ones. Everyone loses! Resolve to live a more peaceful, calm, serene life—be good to yourself and those you love. You don't have to "do it all!" What can you stop doing? What can you let go of?

Parents around the country are discovering that cutting back on "disability business" has enabled them to rediscover a "normal" life. On a regular basis, ask yourself, "Will this [therapy, services, or whatever] really matter six months, one year, or five years from now?" We're often so caught up in the daily grind that we fail to look at the long-term outcomes. Do whatever it takes to simplify your life so you can enjoy time for yourself, and with your precious children and sweetheart.

Make SIMPLICITY part of your daily life, in all areas—not just disability issues. Clear out the clutter in your house, your car, your life. Say "no" more often, so you don't overextend yourself or your children. Turn off the TV. Play a game with your family one night each week. Play some music and dance together. Cook together, then clean up together. Read a book together. Let everyone pile in one bed and cuddle together!

Give the gifts that truly matter—meaningful gifts from your heart and soul.

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Texas Parent to Parent is committed to improving the lives of Texas children who have disabilities, chronic conditions, and/or special health care needs. We accomplish this by empowering families to be strong advocates through parent to parent support, resource referral and education, and by educating professionals about the unique needs of these children.



ATTENTION PLEASE!! We have found a new way to get our email newsletter out to you without using Yahoo Groups! Starting with this newsletter, we will use a new service to email our newsletter. If you are currently getting this by mail but would prefer to receive it via email, please contact Susan Prior (512-458-8600 or 866-896-6001 or susan.prior@txp2p.org) and ask to receive the TxP2P Newsletter via email. If you leave a voice mail, please remember to give us your email address. Thanks!!

Conference Schedule

Date	Conference Title	Location	Registration Information
Wednesday, Feb. 6 th to Friday, Feb. 8 th , 2008	Texas Transition Conference	Hilton Hotel and Conference Center College Station	Center on Disability & Development MS 4225 Texas A&M University College Station, TX 77843-4225 http://tti.cehd.tamu.edu/
Wednesday, Feb. 20 th to Saturday, Feb. 23 rd , 2008	15 th Annual Inclusion Works! Conference	Renaissance Hotel Austin	The Arc of Texas 8001 Centre Park Drive, Suite 100 Austin, Texas 78754 For questions, call: 800-352-9729; fax: 512-454-4956 http://www.thearcoftexas.org/conference
Thursday, Feb. 21 st to Saturday Feb. 23 rd , 2008	Building Bridges Through Communication 52nd Annual Texas Speech-Language-Hearing Association Conference	Henry B. Gonzalez Convention Center San Antonio	918 Congress Ave., Suite 200 Austin, TX 78701-2422 Toll Free: 1-888-SAY-TSHA Phone: 1-512-494-1127 Fax: 1-512-494-1129 http://www.txsha.org/