Annual Membership Information

Annual membership dues are $25.00 per family, organization or professional.

Please provide the following information

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☐ I am a parent/caregiver.
☐ I am a professional working with children.
☐ I am a concerned member of the community.
☐ Enclosed is a tax deductible donation in the amount of $__________ to help support the efforts of Nevada PEP.
☐ I would like to be a member of Nevada PEP, please waive the annual dues.
☐ I would like to volunteer.
☐ I would like to receive E-POST updates.

Nevada PEP, Inc. is an independent non-profit tax exempt organization. #88-0301113

Please make checks payable to: Nevada PEP

Mission Statement

To increase the opportunities for home, community, and school success for children with disabilities, including those who are at risk or who have serious emotional disturbances, their families and their service providers, through education, encouragement and empowerment activities.

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- Wellness for the Caregiver
- Rural Mental Health Consortium
- Wraparound in Nevada

VISIT US ONLINE AT WWW.NVPEP.ORG
- Volunteer Opportunities
- Clark County Children’s Mental Health Consortium
- The Family Support 360 Center

Volunteer Opportunities

No one is more cherished in this world than someone who lightens the burden of another. ~Author Unknown

To all of our many volunteers, we at Nevada PEP want to thank each of you for your selflessness, patience, and kindness. We could never accomplish all that we do every day without your faithful support and encouragement. We consider ourselves fortunate because of you. On behalf of the many Nevadan families that we assist, Thank you!

Nevada PEP has various opportunities to volunteer throughout the year. We have volunteers who help us with information tables; help put together training packets, other office procedures, and a variety of others areas to use your talents. If you would like to be a part of our volunteer support, it would be our pleasure to talk with you. Please call us. For our Reno office, please contact us at 1-800-216-5188 or 1-775-448-9950, in our Las Vegas office call 1-702-388-8899.
Early Childhood Interventions Promoting Wellness in Early Childhood

BY JUDY MARTIN

According to the Encyclopedia on Early Childhood Development

*Early childhood is a crucial window of opportunity for families and societies to ensure that children have the resources and protections required to develop the adaptive tools and relationships they will need to engage the future well prepared.*

Over the past decade, research on early childhood intervention programs has shown positive long-term benefits for the families and the children involved with these programs. Evidence indicates long-term gains and positive outcomes in the areas of special education placement, grade retention, high school graduation rates, and labor market outcomes. Studies have also shown a reduction in the use of social welfare programs and a decrease in crime. Research regarding families and early childhood intervention indicates that parents who are specifically targeted by the intervention can also benefit from these programs.

Future labor market success is afforded through children who can attain an advanced education, allowing them to thrive as productive citizens while generating revenue for their communities. The fact is that the long-term advantages of funding early childhood intervention programs far exceed the initial funds required by these programs. During these difficult times financially for our state and our country, let us remember that our children are the future of Nevada. It’s time for us as a state – as a nation - to start investing wisely for the future. By funding programs like early childhood intervention that allow our children future success, our state and nation will reap multiple, long-term benefits both socially and economically.

**Key findings:**

- Early childhood intervention programs have been shown to yield benefits in academic achievement, behavior, educational progression and attainment, delinquency and crime, and labor market success, among other domains.
- Interventions with better-trained caregivers and smaller child-to-staff ratios appear to offer more favorable results.
- Well-designed early childhood interventions have been found to generate a return to society ranging from $1.80 to $17.07 for each dollar spent on the program.

(Adapted by www.rand.org)

Federal Highlight

BY RON KOPICKO

The experience of war doesn’t end when the members of the armed forces return. Military personnel and their families are changed forever by battlefield events. The deadliest wounds sometimes are the ones that can’t be seen. Those unseen wounds must be treated. The U.S. Government recognizes that proper care was not provided in the past, but that is changing. Federal organizations, such as Substance Abuse and Mental Health Services Administration (S.A.M.H.S.A.), the Department of Defense and Veteran’s Affairs are collaborating to provide care to returning personnel and their families. As a matter of fact, the program actually begins prior to deployment. Support networks and information are given to the military families in the areas of mental health and family dynamics. The same information provided the soldier is given to the other family members because the family is an important part of the mental health landscape. This happens before the soldier is deployed. Families are encouraged to develop plans to cope with having a parent away that are age appropriate. Military families are given the tools to become resilient and help the family recover from mental health challenges that arise.

For more information about the program and how it can help, the website is: http://www.promotacceptance.samhsa.gov/
NEIGHBORHOOD FAMILY SERVICE CENTER

BY TJ ROSENBERG

As the State Division of Child and Family Services loses needed positions it is more difficult to continue to give help to families that need mental health services for their children. The Neighborhood Family Service Centers have people working hard to serve families in this time of budget cuts. They serve as many families as possible through the centers but there are many more waiting to be served. It is hard on families to get the help they need with less resources. At each site the services include:

- Individual, family, and group therapies and behavioral management,
- Psychological assessment and evaluation,
- Psychiatric services,
- Clinical case management,
- Consultation with other child serving entities involved with the child and family,
- 24-hour on-call emergency professional coverage.

Subcommittee for the Development of the State MH Plan for Children

BY KEVIN CROWE

The Nevada Commission on Mental Health and Developmental Services is a ten member Governor appointed body which is responsible for policy and program oversight of Nevada's public system of mental health services for children and adults. Legislation passed in 2009 requires the Commission to maintain a subcommittee to develop and track progress on a state plan for children's mental health in Nevada. The plan can be accessed at: http://mhds.nv.gov/dmdocuments/ChildMHStatePlanComm20100630.pdf

With the approval in June 2010 of the Commission’s first-ever Nevada State Plan for Children’s Mental Health. The plan can be accessed at:

http://mhds.nv.gov/dmdocuments/ChildMHStatePlanComm20100630.pdf

Currently, the MHDS Commission begins monitoring progress on the State Plan using an ongoing system of reporting via its Subcommittee. Since September 2011, the Commission has begun to track progress towards these strategies which are reviewed at each Subcommittee for the Development of the State MH Plan for Children meeting.

The MHDS Commissions 2011 meeting schedule is found at:

http://mhds.nv.gov/dmdocuments/CMHDSFY11Schedule.pdf

Inspirational

THOUGHT

“The ultimate measure of a man is not where he stands in moments of comfort, but where he stands at times of challenge and controversy.”

-Martin Luther King Jr.
RURAL MENTAL HEALTH CONSORTIUM  BY JENNIFER CUNNINGHAM

For the September meeting the members of the Rural Child Mental Health Consortium attended a training conference entitled “Embracing the Past and Planning for the Future.” This was a two day State/Tribal/County Social Services Summit held in Carson City. This training was sponsored through a collaboration of several State agencies: some appointed public Boards, private organizations and the Casey Family Foundation.

The keynote speaker for the first day was Dr. Maria Yellow Horse Brave Heart. She is an Associate Professor in the Columbia University School of Social Work. Dr. Brave Heart spoke about the trauma, grief intervention and healing strategies for Native Americans. She states that historical trauma is accumulated emotional and psychological wounds over the lifespan of people and generations with unresolved issues that accompanies that trauma. The historical trauma response (HTR) is how a specific large group reacts to separation and traumatic injuries over a long period of time.

Larry Curley, Executive Director of Indian Health Board of Nevada, also spoke about a similar subject emphasizing strategies for Nevada Native Americans. There also were two breakout sessions on the first day. One presentation was about substance abuse prevention and the other was focused on generating Ideas for future collaboration in Indian Child Welfare. There were two additional presentations on the second day which detailed the Indian Child Welfare Act and its impact on State/Tribal/County Social Workers entitled “Ensuring Safety and Permanence for American Indian Children”.

The Rural Children’s Mental Health Consortium always welcomes parents and family members to the meetings each month. If you would like to attend a meeting for more information please contact Retta Dermody, Nevada PEP at 775-448-9950.

The Family Support 360 Center  BY CHRISTA PERTERSON

In July, 2010, Nevada PEP’s new Family Support 360 Center started working with families in Clark County. Our Center is now serving approximately 20 families, and we are accepting new families every day. The center is funded by the U.S. Department of Health and Human Services, Administration on Developmental Disabilities.

At the 360 Center, families who have children with an intellectual disability and co-occurring behavioral health care needs receive assistance from a 360 Center family navigator who is specially trained to provide an intensive, individualized level of family support services. The Center prioritizes those families who have children between 8 and 13 years of age who are at risk for out-of-home placement due to their needs. The goal of the Center is to serve at least 40 new families each year.

The Family Navigator serves as a peer mentor, guide and advocate assisting families in identifying their needs, developing a plan of action, and obtaining necessary services and supports in caring for their child. The Family Navigator’s role is adapted from the family-to-family support model that is currently used by Nevada PEP for families of children who have serious emotional disturbance. In addition to providing family support services, the family navigators partner with the child’s service coordinator to ensure family voice and choice in the service planning process.

If you would like more information about the Family Support 360 Center, please call Nevada PEP’s central office in Las Vegas, NV at (702) 388-8899 or the Family Support 360 Center in Las Vegas, NV at (702)877-0360

ASK the advocate  BY JENNIFER CUNNINGHAM

I am a foster parent of a child that I feel would benefit from special education services. The biological parents have their parental rights and don’t agree with me. Can I, as the foster parent, provide consent for an initial evaluation even if the biological parent refuses to provide the consent?

If the natural parent of the child refuses consent for the initial evaluation for their child, their parental rights have not been terminated or court has not designated the foster parent to make educational decisions for the child; in accordance with State law, a foster parent may not provide consent for an initial evaluation. See 34 CFR 300.30(b)(1).
Washoe County Consortium

The Washoe County Children’s Mental Health Consortium has joined in a collaborative effort with several agencies in the Wraparound in Nevada (WIN) services. The wraparound process is a way to improve the lives of youth and families who have complex needs. The process is used to help communities develop individualized care coordination plans. The actual individualized plan is developed by a Wraparound Team, the four to ten people who know the youth and family best, including the youth and their family. The team should be no more than half professionals. The needs of the youth drive the plan rather than the available services, although a plan may incorporate existing categorical services if appropriate to the needs of the youth and family. The plan is based on the unique strengths, values, norms, and preferences of the child, family, and community. Research indicates that youth and families with complex needs will have improved outcomes in their day to day functioning when they are involved in the wraparound process; they simply do better at home, in school and in their community.

The Division of Child and Family Services (DCFS), Washoe County Juvenile Services, Washoe County Social Services, Washoe County School District, and the Division of Mental Health and Developmental Services have entered into a memorandum of understanding. Each program will give resources for a wraparound facilitator position. DCFS will provide training, on-going coaching and supervision, and space for each facilitator through the Wraparound in Nevada (WIN) North program. Children and families will receive targeted case management/care coordination services that will assist them in gaining access to mental health, social, educational, and other services using a wraparound approach that provides assessment, development of a care coordination plan, linking and referral to services in all life domains, monitoring of services, and follow-up/transition from services.

Evaluation of outcomes for each youth and family will be collected. The program is being overseen by a steering committee composed of administrative level management positions from each partner and community stakeholders. This plan also includes the development of a Wraparound Review Team. This is a team of community system representatives, family organization representatives, and wraparound managers that will review specific assessment material, approve initial care coordination plans, assist in breaking down barriers, and monitor services utilization.

If you would like additional information about the program or are interested in making a referral, please contact Joe Pritchard at 775-688-1481 or Retta Dermody at 775-448-9950.

Wellness for the Caregiver!

By Marcia O’Malley, Family Voices of Nevada

Caring for a family member is becoming more common place as life expectancies increase and medical treatments advance. Many of us provide care to children, youth and adults who have special health care needs and/or disabilities as well as our aging parents. Unfortunately, care giving can take a heavy toll if you don’t get adequate support. Care giving is stressful. It creates changes in the family dynamic, is disruptive to a household, causes financial pressure, and can amount to a great deal of work. Here’s a reminder to take care of you along with some ideas for stress reduction and a few resources too.

4 Messages for Family Caregivers to Live By

1. Believe in yourself. Trust your instincts. Let your inner voice guide your decision making for your loved one and yourself. Believing in “You” is the first step toward building confidence, an essential tool in coping with being a family caregiver.

2. Protect your health. Taking care of yourself is not a luxury: it is a necessity. If your health is compromised, it is hard for you to be an effective caregiver. Your life is hard enough. For your sake, and your loved one’s, take good care of yourself.

3. Reach out for help. Family care giving is not a one-person job. Asking for help is a sign of strength, not weakness. Help comes in various forms from others pitching in, to having more information about your loved one’s condition and sympathetic understanding from your boss.

4. Speak up for your rights. In your daily life speak up for respect and more support for yourself and your loved one. Speak up for the rights of all family caregivers by talking about the need for education, financial support and better chronic illness care.

Here are some helpful websites:

- National Family Caregiver Association: http://www.thefamilycaregiver.org
- Jessie Ferrell Author/Speaker: www.jesstalk.com
- Resources for family and professional caregivers: www.caregiver.com
- Nevada Aging and Disability Resource Center: www.nevadaaadrc.com
- “Caring for the Caregiver”, Topical Call (Archive includes audio recording and handouts): www.familytiesnv.org/training/learning_center
What do you do when you have a good idea and you put that good idea into practice and it has good results? You want to repeat it, right? But how do you make sure that when your good idea is repeated and used by other people that it is done just right? This is one of the challenges encountered when implementing the research-based wraparound model. There needs to be a way of ensuring that the model is replicated in a consistent manner that maintains its integrity. This is referred to as fidelity. To ensure that the wraparound model is implemented as intended there are several tools that can be used to measure fidelity. The most commonly used measure is the Wraparound Fidelity Index (WFI). The WFI is an interview tool that solicits feedback from parents/caregivers and youth receiving wraparound and their facilitators.

In 2010, the Wraparound in Nevada (WIN) Program in the northern and rural region of the state participated in WFI interviews. Eighty youth who were receiving services from WIN were randomly selected. Results from the WFI show that the program met or exceeded national mean scores. The graph below compares the fidelity scores with the national mean. The higher the score the more consistent the program is with the model. WFI findings are important because higher WFI scores are generally associated with more positive outcomes, and WFI scores provide feedback to the program about how it is doing. Each question on the WFI is analyzed to determine whether it is an area of strength or an area that needs improvement. Areas needing improvement are targeted for program improvement.

WIN manager Joe Pritchard states that his program is addressing items with low WFI scores. Low score areas included crisis planning, mission statements that team members use to focus on what they want to achieve, and transition planning for how the wraparound process will end. WIN facilitators are focusing on developing crisis plans with families. Crisis plans are what the team will do if something gets in the way of accomplishing the care coordination plan. The WIN Program will focus next on writing mission statements and transitioning from wraparound says Pritchard.

WFI interviews will be conducted again next year for the north and rural region and are currently underway in the southern region to ensure that the WIN Program continues to be the real thing.

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COLLABORATION Highlight

By TJ Rosenberg

Nevada PEP collaborates with the Garrett Lee Smith (GLS) Suicide Prevention Grant to teach and train Pediatric Physicians, Nurses and School Personnel how to screen children during their regular office visits and classroom observations. The idea behind these trainings is to inform the physicians, nurses and educators on early intervention so that children at risk can be referred to the appropriate mental health professional.

During the training, the Nevada PEP Family Specialist has the opportunity to share their personal experience of living with children who have Severe Emotional Disturbance. This helps build an understanding about family life and what parents go through when seeking help for their child.

The GLS Grant has helped change the lives of many children and families through some very difficult times. We look forward to being of assistance for a long time to come. For more information contact Nevada PEP.
Upcoming Events

LAS VEGAS/HENDERSON
City of Las Vegas, Adaptive Recreation Division
3333 W. Washington Ave.
Recreational activities for youth of all ages with/without developmental disabilities.
Contact: Cassie Jemison
702.229.6358

Give Me A Break, Inc. (GAB)
Respite days are the 3rd Saturday of each month in the Vegas Valley.
Contact Scherrie Adams at 702.898.2216 or Toll Free 866.486.2275, Fax: 702.248.4739.
You must RSVP to reserve a spot.

Heart & Soul Discussion Group
For families with children diagnosed with a heart condition. Meetings are the 2nd Wednesday of each month at, The Children’s Heart Center, 3006 S. Maryland Parkway, from 6:00 – 7:30 PM. Visit the Heart & Soul website at www.chfn.org

Nevada PEP Family Support Group
We meet the 2nd Wednesday of every month from 5:30 PM – 7:30 PM at, 2101 S. Jones Blvd, Ste 120. Contact a Family Specialist at 702.388.8899

Nevada PEP Grupo de Apoyo Familiar
Reunira el ultimo Miercoles de cada mes, 5:30 PM – 7:30 PM at, 2101 S. Jones Blvd, Ste 120. Llame a Cynthia Escamilla al 702.388.8899

Positive Supports for Children
Specific intervention to promote social, emotional behavioral functioning. Contact Christy Buckingham-Martin at 702.367.0306 or email: ps4children@lvcoxmail.com

Recreation and Experience Club (R.E.C.)
Year-round after school program for young people with disabilities, grades 9th-12th. Contact Sara at 702.267.4065.

Special Olympics
A variety of athletic activities for children with disabilities.
Contact Rachael Hudson at 702.474.0690 X205.

RENO/SPARKS
Asperger’s Support Group
Monthly meetings on Tuesdays at Renown Hospital, Sierra Tower Contact John at 775.787.2904 for dates, times and more information.

City of Reno Parks & Recreation
Recreation programs for children with disabilities. Contact April McIntyre – 775.334.2260 or email: mcintyrea@cityofreno.com or contact: “Inclusion” at 775.334.2262.

Grandparents Raising Grandchildren
Support for those raising grandchildren. Contact Dawn Costa at 775.353.3112

Nevada PEP Family Support Group
We meet the 3rd Tuesday of every month from 6:30 PM – 8:00 PM, 4600 Kietzke Lane, Ste. I204, Reno. For more information call 775.448.9950 or 1.800.216.5188.

Reno Autism Information Network (RAIN) Information, support and social nights with activities for children. Contact: Toni Richards at 775.324.5058 or email: Toni’sisign3550@sbcglobal.net or Robinrobin@accutek.com (put “Autism” in the subject line).

The Solace Tree
Support for families grieving from a personal loss. Call 775.324.7723 or email: info@solacetree.org Visit their website at www.solacetree.org

RURALS
Nevada PEP Family Support Group
We meet on the 3rd Tuesday of each month, from 6:30 PM – 8:00 PM at the Family Alliance Building, 186 E. Main St. - Ste 4, Fernley. For more information please call 775.448.9950 or 1.800.216.5188.

Resource Review
BY JUDY MARTIN

Last One Picked… First One Picked On:
Learning Disabilities and Social Skills
• Presented by Richard Lavoie, M.A., M.Ed.

In this video, the viewer is provided with valuable insights into the socialization issues that children who learn differently experience on a daily basis.

Dr. Lavoie explains that children with learning disabilities often lack the ability to properly evaluate social situations and react inappropriately, unable to utilize essential social skills to respond to these settings. Using humor, and his vast experience and knowledge, Dr. Richard Lavoie provides suggestions and examples for parents, teachers, and others.

Last One Picked is one of the many videos available for loan, through the Nevada PEP resource library. Stop by either our Reno or Las Vegas office’s, and browse through our selection of books and videos available for check out.
The Consortium has met several times since the last report. During that period Janice Wolf, with the Children’s Attorney Project was welcomed as the newest member of the group. Her perspective and experience is welcomed by the group and will help us make better recommendations. The group is now looking for a new member representing a community business leader interested in improving children’s mental health care. As a consequence of State budget troubles, the CCCMHC reviewed their operational budget and talked about alternative funding sources to keep the work of the consortium going. Each member of the consortium believes the work of the group is important to ensure the system of care for children with mental health issues is improving throughout Nevada. With that in mind, the CCCMHC developed a bill draft request (39-336) that will be considered in the upcoming Legislative session. This bill will make it possible for consortium members to seek grant and foundation funds to further their work. The bill also requests minimal operational funds to support the basic operation of each mandated consortia. Across the country there are wonderful examples of how a group of stakeholders can work together to improve systems. The CCCMHC has developed a 10 year plan to improve the system of care that children and their families receive. Now the group must work to implement the 10 year plan. Collaboration and coordination is key to moving any of the 10 year plan initiatives forward. Recognizing that our children who have mental health concerns are involved in many of our systems, it is imperative that the systems work together to support the children and their families.

Another important part of improving systems is parental involvement. In the advocacy world, there is a saying; “nothing about us, without us”. Meaning parents and youth need to be involved in system reform discussion and decisions to help ensure the policies and procedures that are put in place actually make sense to parents and are designed to help children reach positive outcomes. Please consider getting involved and providing the parent/youth perspective in consortium activities; contact me for more information, 702-388-8899.

Family Story By PEP FAMILY SPECIALIST

Eleven years ago I received a call from a Mom needing Nevada PEP’s help. Her son was having challenging behaviors at home and at school. She made an appointment and came into the PEP Satellite Office and began to share her concerns with me. Her son was in the kindergarten with a SED diagnosis. His placement in his IEP was in a Social Intervention Program focusing on behaviors. Mom’s concerns were both behavioral and academic, she knew that her son was capable of learning and part of the problems at school was that he were not being challenged academically. I attended an IEP meeting and her relationship with PEP began.

This child’s experience at school was not positive. There were many suspensions; FBA’s which lead to numerous IEP meetings. PEP was there to support Mom by educating her about the IEP process and giving her options and tools to help her through the IEP process and finding appropriate services for her son.

Middle school was extremely difficult leading to a residential treatment center far from his family and community. PEP was always there to encourage Mom to speak up for her child, reminding her that she was his best advocate.

When this young man returned home to his family, mom began trying to find mental health services within their community. With the support of a PEP Family Specialist, the family was introduced to Wraparound in Nevada (WIN). Child and Family Team meetings helped the child and the family find resources for home and school. Monthly CFT meetings with community partners helped the child become successful at home and at school and empowered Mom. Mom knew that, if she needed a voice of encouragement, she could call her Family Specialist who would listen and offer options.

Today this young man is a senior in high school. He has all regular education classes and has a 4.0 GPA and with only one more high school proficiency exam to pass, he likes school and his teachers. His teachers and administrators at his high school have wonderful things to say about him.

At his last Annual IEP Mom couldn’t believe her eye when she saw that “Does the student’s behavior impede the student’s learning or the learning of others?” was checked “no”. Every teacher said that he was a joy to have in class. His biology teacher said that she was looking forward to having him as her aid next semester. As we walked out to the parking lot Mom had tears and thanked PEP for all the support and encouragement.