Gifts We All Can Give

The 370 amazing children and their families served by RISP during the past year, as well as generous community partners, have given so much in many different ways. These gifts have been, and will continue to be, investments in the future, not only for the children but also for the entire community.

All children have special gifts that they share with their families, friends, and helpers. The children who have been served by RISP this year have shown us the gifts that they bring now and also a glimmer of the future. Making the most of their skills and talents, these children inspire and amaze us. Some came to us with what we call the “nevers” still ringing in their parents’ ears: what they were told their child would never do—rather than the joy they would bring, the hurdles they would overcome, and the meaningful lives they would have. Our staff has seen many children move well beyond the unknown of those first months and blossom into our “gifts” of happy children, doing things in their own way and certainly in their own time. It has been our privilege to share their families’ hopes and dreams and to see the many successes and accomplishments of their children.

Our thanks go to the families who have allowed us to be part of their children's gifts, as they move, learn about, and enjoy the world around them. We also are thankful to those in the community who have given their gifts of time, talent, and funding so that these children can thrive. The following pages highlight some of their stories.
RISP is a program of the public, nonprofit Middle Peninsula-Northern Neck Community Services Board where the vision is “creating possibilities...changing lives.” As part of the statewide Infant and Toddler Connection of Virginia, RISP works toward this vision for our youngest citizens: babies and toddlers up to three years of age in the ten counties of Essex, Gloucester, King and Queen, King William, Lancaster, Mathews, Middlesex, Northumberland, Richmond, and Westmoreland. RISP has been providing a wide range of successful developmental and therapeutic services since 1983.

RISP has been a wonderful program not only for our special needs son, but for our family as a whole. They helped with all of our son's physical needs, and they met our emotional needs as well. RISP took away a lot of the stress and helped with the “unkowns” by guiding us through the proper avenues to make sure our son got the help he needed. We are very grateful for all of the time and effort the RISP staff has put forth.

Brandon and Kaitlyn Auel  (Copelan’s parents)

Everyone at RISP is exceptionally sensitive and supportive. They each have encouraged and comforted me. Through their combined skill, talent and ability they are giving me hope for Paul. The level of expertise that RISP demonstrates is unparalleled in my 20 years experience working in healthcare. I now have hope.

Paul’s mother

I enjoyed watching how well everyone interacted with my son. I really enjoyed all the ladies that came to see us. They explained what they were looking for and made it comfortable for my son very quickly.

Anonymous

Dear Ms. ________,
Thank you is such a small thing to say after everything you have done for my girls. [My children]’s speech has come a long way. You have spent a lot of hours with them, helping them learn to talk. Our family, especially the girls and I, will always have you in our thoughts. You have truly become part of our family over the last three years.

Thank you,
The Ayres Family

Everyone has been friendly and reassuring with much encouragement. My daughter appeared comfortable with every caregiver.

Anna’s mother

Chris and I want to say thank you for all you have done for us over the past three years! It has been a wonderful journey for us all! You and your staff have gone over and above to make sure Brendan has received the best experience. It has really changed our lives! For that we will be forever grateful!

We have felt like you have been a part of our family for the past three years. We have welcomed you into our home and feel blessed that you came. You have always been there to answer an overprotective mom’s questions and have done whatever you can to help us to make sure that Brendan’s start to life was so successful.

He has grown into a little boy who has the world and all of its experiences ahead of him. You have been one of the reasons that he has been so successful. Please know that what you do makes a difference in each family and we have felt so special that you have been in our lives.

Brendan’s parents
RISP Exceeds State Expectations for Early Intervention Services

It is a Federal requirement for Part C to annually evaluate the percent of infants and toddlers enrolled in Part C who demonstrated improved:

a. Positive social emotional skills
b. Acquisition and use of knowledge and skills (including improved language/communication)
c. Use of appropriate behaviors to meet their needs.

In the Middle Peninsula and Northern Neck this past year, 95-100% of families surveyed scored above Virginia’s targets in these important areas of improvement.

Virginia’s statewide early intervention system experienced 52% growth from Fiscal Year 2007 to Fiscal Year 2011 without increases in state and federal funding. The Middle Peninsula-Northern Neck experienced 55% growth during this time period.

The Fiscal Year 2012 Determination Assessment by the state Part C office indicated that our locality served 162.4% of the state target for children from birth to three years old and 247.9% of the state target for children from birth to one year old, thanks to our very supportive referral sources.

RISP Referral Information

The first three years of a child’s life are the most critical time for learning. Young children naturally want to learn about the world around them, which they usually do very easily as they play and interact. However, some children can have difficulty in learning the skills that form the foundation for kindergarten and beyond. Children who are later in learning to walk, using their hands, saying words or following directions, or those who seem to be having trouble interacting with people or difficulty with their behavior may benefit from having their development checked. Children who were born prematurely, those with hearing or vision problems, or those with feeding problems may also be at risk for falling behind in their development.

If you have any concerns about your infant or toddler, the staff at the Rural Infant Services Program (RISP) can provide a free developmental screening, either in your home or at a convenient location for you. For young children who might have delays or problems in their development, RISP can offer early intervention services and the special support that their families might need. Do you have any questions about your child’s development? For additional information, please call 758-5250 or 1-800-305-BABY.

RISP services are open to all children and families in the ten counties of the Middle Peninsula and Northern Neck. There are no financial eligibility requirements, and services are available to all.
Early intervention therapy at RISP is fun, enriching, and family centered, and has been shown to be the best way to help young children learn to move, talk, eat, play, and even to see and hear—despite special challenges and hurdles. Always with the most favorite people, routines, and activities in a child's life, early intervention helps children to participate fully in their family and community life and to achieve many hopes, dreams, and successes.

Studies show that infants and toddlers with delays or disabilities who receive early intervention services have the best opportunity to reach their full potential.
Funding for early intervention services in our community comes from a wide range of public and private sources, including the Middle Peninsula-Northern Neck Community Services Board, Part C of the Individuals with Disabilities Education Act, local tax dollars, reimbursement from private health insurance and Medicaid, family fees, and private contributions from many kind and generous individuals. In addition, RISP has received contributions and grants from our partners in community organizations, churches, and charitable foundations. These contributions have made it possible for the children served by RISP in 2011-2012 to receive the much needed services, supports, and materials to give them the best chance possible to reach their full potential and have much brighter futures. Many thanks to the following caring contributors:

Anonymous
Abingdon Episcopal Church, White Marsh
Bay Quilters
Elis Olsson Memorial Foundation
Felicia and Joan's Angel Fund
Gloria M. and Paul D. Hare Early Intervention Fund
Gloucester Community Foundation
Grace Episcopal Church, Kilmarnock
Middlesex Kiwanis Club
William F. and Catherine K. Owens Foundation
St. Andrew's Presbyterian Church, Kilmarnock
The Samaritan Group, Gloucester
J. Edwin Treakle Foundation
United Way of Greater Williamsburg (Donor's Choice)
Zoar Baptist Church Ladies Bible Study, Deltaville

Your tax-deductible financial contributions to RISP can help additional young children have a positive start during the early years, when the most lasting benefits can occur. Funding continues to be needed to help expand early intervention services to the increasing number infants and young children with special needs who are being referred throughout the Middle Peninsula and Northern Neck. For additional information, please call 800-305-2229.

---

Very special thanks to ...
Helen Worthington for the generous donation of her time and talents in designing and editing the RISP report this year. Thanks also for the beautiful photographs of the children and their families from Mary Grafton Yagel and Cullen Walker.
Betsy Donoghue

A Career Dedicated To Helping Children and Families

Betsy always wanted to work with children and families, which led her to earn a Master's Degree in Social Work, with concentration in that area. Betsy came to RISP with a strong belief in families and with varied experience at local child protective service agencies, family mental health services, and Head Start before beginning her work in early intervention. A developmental therapist and service coordinator at RISP since May 2006, Betsy has stated that all the studies and work she had done before had given her a good foundation for working with infants, toddlers and their families. She said that there was definitely a learning curve for the many requirements of early intervention, as well as the specifics of early language, motor, and cognitive development.

Betsy reflects that her time as a stay-at-home mom also gave her a real-life perspective on child development. In addition, Betsy says that raising her own three lively children (which she has likened to being an air traffic controller) prepared her well for the multitasking needed with her position at RISP. Betsy’s mother, Ellen Donoghue, was also a valued RISP volunteer after retiring from teaching.

Betsy says that she finds her work at RISP fascinating and fun. She loves seeing the spark of learning in children’s play. At the same time, Betsy says her work is challenging. It is hardest when families have issues, such as lack of resources or need basics like safety or housing, in addition to having a young child with special needs. Betsy also finds that complex medical issues are daunting for the children and families she serves. When the future is unknown or when needed resources simply are not there, Betsy tries to be a support for families.

Betsy states that she especially likes meeting so many new families—children and families to care about and enjoy as they develop, despite the odds. Families, no matter what challenges they face, always see the positives about their children, as does Betsy. She has been impressed by children and their families taking both small and large steps in their development and not giving up. But most importantly, Betsy has seen that love between parents and children is always there.

Thanks very often come from the families that Betsy serves, the agencies with which she interacts, and her team mates. Her calming and competent presence on the RISP team, her wisdom, and her support are very much appreciated.
Madison’s Story

Madison’s mother, Katie Packett of St. Stephen’s Church, was interviewed at home for the 2012 annual Legislative Event held by the Middle Peninsula-Northern Neck Community Services Board. Madison has been enrolled in RISP for the past year and her mother, an elementary special education teacher in a local school system, shared her views, along with hopes and dreams for the future, for her beautiful daughter.

Madison played throughout the visit, crawling enthusiastically throughout the room, and signing when she wanted something such as her favorite snack.

Tell us about Madison and how she has been involved with early intervention:

Madison was referred at one year old and at that time she was assessed at a scatter of 6-9 months across ability levels. Now she is two years old and she is assessed at 18-24 months. When she first came into RISP, she was able to sit, but she could not get from lying down to sitting up, she could not really weight bear and was not standing, and there were hardly any vocalizations.

And now she is standing almost on her own, walking with a push toy, and is crawling all over the place, and there are lots of vocalizations.

As a special educator, even before I was pregnant, it was my fear that I would have a child with special needs.

And when she was born of course – there were 10 fingers and 10 toes and everything looked perfect - you don't think there could be anything wrong when she looks so perfect. As time went on, I noticed the red flags because of course being in special education.

When she was referred to early intervention, even though I knew the steps and I knew the process I was devastated because you don't imagine that there could be anything wrong with your child. But if I hadn't been referred to early intervention I would not be connected with all of the services that she is getting.

She has seen a neurologist and we have been for a genetics evaluation. And, of course, all the therapies: physical therapy, speech therapy, developmental therapy, and service coordination. If not for early intervention, she would not be doing THAT (as Madison crawled quickly and proficiently down the hall).

Does she enjoy the therapy sessions (at home and at Grandmother Peel’s home)?

Yes she does! It is playtime for her when she sees her therapists, Miss Julie, Miss Betsy, and Miss Libby come.

Tell me about your thoughts for Madison’s future and what you see as any possible limitations or any fears:

My hopes are that down the road she catches up and she blends right in to a regular education classroom. How do we get there? We keep doing what we are doing. As she ages out of Part C, if she needs to go into a center-based program we will do it.

My fears are that she doesn't get the services she needs and she falls through the cracks because, when you look at her, you do not see 'delays' (we do not use the term disability). So that is my #1 fear. My hope is that with all the therapies and all the doctors we can get her caught up. And caught up so that the sky will be the limit for Madison!
RISP Statistics

General Information

Total Children Served in 2011-2012, by County (370):

- Essex: 41
- Gloucester: 95
- King & Queen: 8
- King William: 44
- Lancaster: 28
- Mathews: 24
- Middlesex: 31
- Northumberland: 33
- Richmond: 26
- Westmoreland: 40

Race

- White: 233
- Black: 90
- Other: 20
- Hispanic: 23
- Asian: 2
- Native American: 2

Gender

- Male: 234
- Female: 136

Additional children screened/monitored – 70

Children enrolled for full developmental services (Part C) - 300

Discharge Settings

During 2011-2012, 137 enrolled children were discharged from RISP to the following settings:

- Preschool Special Education Class: 50
- No additional services needed/community preschool: 42
- Therapy only from school (speech): 14
- Moved from area (referred for continuing Infant Services): 14
- Unknown: 11
- Declined services: 3
- Completed, declined referrals: 2
- Deceased: 1

Diagnoses/Conditions of children enrolled for full services (some children are in more than one category)

- Developmental delay: 214
- Speech delay: 42
- Prematurity: 37
  - (extreme prematurity – less than 28 weeks): 28
- Communication disorder (includes autism): 28
- Motor impairment (includes torticollis): 27
- Medically fragile/health impairment: 23
- Feeding disorder: 12
- Vision impairment: 11
- Other genetic disorders: 11
- Sensory integration disorder: 10
- Down syndrome: 8
- Cerebral palsy: 4
- Cleft palate: 3
- Accident: 2
- Hearing impairment: 2

Insurance Coverage of Children Enrolled in 2011-2012 (300)

- Medicaid (including HMO): 209
- Private insurance: 57
- Tricare: 12
- FAMIS: 7
- Private insurance and Medicaid: 15

Referrals by Source

- Physicians: 89
- Parents/family: 79
- Department of Social Services: 22
- Hospitals: 15
- Parent-Child programs: 6
- Infant-Toddler Connection: 5
- Shelters: 2

Brandon