

# SPECIAL NEWS FOR SPECIAL NEEDS



## Fall 2007



### Fall Greetings.....

It is hard to believe hot summer days are over and cool, crisp fall days have arrived! Frost on car windows, fallen leaves on the road and darkness at 5:30 pm require extra care driving and watching for children. In this issue, we've included informative facts on Respiratory syncytial virus (RSV) a lower respiratory illness affecting infants and young children. Also tips to lower the risk of sudden infant death syndrome (SIDS) from the National Institute of Child Health and Human Development (NICHD). Always consult and discuss any health concerns with your health-care provider. Call Kellie McKeefery (302-995-8617) or Jennifer Donahue (302-424-7300) with ideas and suggestions. Or, via e-mail at [kellie.mckeefery@state.de.us](mailto:kellie.mckeefery@state.de.us) and [jenniferl.donahue@state.de.us](mailto:jenniferl.donahue@state.de.us)

Kellie & Jennifer

### Mattel Toy Recall Information

Fischer-Price, in cooperation with the United States Consumer Product Safety Commission voluntarily recalled more than 300,000 Sesame Street and Nickelodeon painted toys. Paint on affected recalled products contained excess levels of lead. Lead is toxic if ingested. Consumers should take the recalled toys away from children and contact Fisher Price. A voucher for a replacement toy will be issued for the returned product. For more information on the Fischer-Price Toys with Lead Paint Recall visit [www.recalls.gov](http://www.recalls.gov) or [www.service.mattel.com](http://www.service.mattel.com)

### S N A P

#### Special Needs Alert Program

##### What is SNAP?

SNAP identifies children with special health care needs in the community.

##### Prepare Before a 911 Call

SNAP lets families with Emergency Medical Service (EMS) staff in the family's home before they have to make a 911 call. This includes ambulance drivers, paramedics and other professionals.

##### Who May Enroll?

No family will be excluded if they feel they would benefit from SNAP. Families can enroll in the SNAP program at anytime. Any child with special emergency care needs may enroll. This includes, but not limited to children with tracheotomies, IV therapy, and feeding tubes. This includes premature and low birth weight babies. *Participation is strictly on a voluntary basis. You may cancel enrollment at any time.*

##### Why Should You Enroll Your Child?

Together, the family and emergency medical service teams will determine the child's most important needs in the event of a 911 call. *The SNAP program is free of charge!*

##### How to Enroll Your Child?

Call the Emergency Medical Services for Children (EMSC) Office at **302-744-5415**. Ask to enroll in the SNAP program. EMSC will contact your local emergency medical services and make arrangements for a non-emergency home visit to meet the child and family.

### CEREBRAL PALSY PARENT SUPPORT GROUP

Thursday, October 25, 2007 6:30 to 8:00 p.m.

Nemours Alfred I. DuPont Hospital for Children 3<sup>rd</sup> Floor, Classroom 3

Topic: Variety Children's Charity- Events and services for children with special needs

Speaker: Meghan Evans Parent Facilitator: Nicole Stoessel

Future Dates: 11/15, 1/24, 2/21 and 3/27 Questions? Contact: Andrea Tomlin 302-651-6050



Special News for Special Needs  
Delaware Health & Social Services, Child Development Watch, Fall 2007





## **An Ever Growing Font (of Information)**

Do you sometimes have trouble finding quality books for and about your children with special needs? Or, do you find it gets a bit pricey fulfilling your needs? Joining your local library is a great alternative: however, finding just the right material for children with special needs can still be tricky.

The Department of Public Health, The Birth To Three Early Intervention Program and the Department of Education want to help you and your child to “Grow With Books.” Grow With Books is a special collection donated to Delaware’s Public Libraries for use by children, their parents or caregivers. These titles are carefully screened to ensure the best information is available about many of the issues facing today’s children. Issues include comprehensive disorder guides, books about specific disabilities, touch books and story books to help grown ups, teens and children understand a variety of special needs. Grow With Books is a great resource for children and the caring adults in their lives!

### **What’s in the Collection?**

Over 165 Books/ Other Media, such as audio CD, available through public libraries!

### **What Can I Read About?**

You’ll find in the collection a large variety suitable to most ages and levels. Children’s books deal with complex life issues in an age-appropriate manner. They often feature a character with a disability and include objects such as hyperactivity or autism. Developmental sensory books also round out the children’s collection. Books for parents and caregivers include subjects like coping with a disability, delay or disorder like cerebral palsy, spinal bifida, asthma and visual impairment. The collection has books for all ages and in addition to special needs interests, has material that promotes acceptance and understanding of diversity and unique needs. Other genre discusses blended families, sibling relations, media violence, communication delays, fatherhood, and preemie care.

### **How can you GROW WITH BOOKS?**

Just visit or call your local library! Remember to look for the silver seal on the jacket. Or, refer to this link for a listing of books.

<http://www.dhss.delaware.gov/dms/epqc/birth3/files/bib-07.pdf>

### **What if I don’t find what I need?**

Each year, new books are added to the Grow With Books Collection. If you’ve already read a great book that you want to share or couldn’t find what you needed on the GWB annotated bibliography, please share your suggestions with us. Although we cannot guarantee that your book of choice will be added, we do guarantee that it will be considered.

Please write Jennifer Donahue-Sawchenko with your suggestions:

[jenniferl.donahue@state.de.us](mailto:jenniferl.donahue@state.de.us)

## Maytag Mom

By Samtra K. Devard

Everybody knows the commercials featuring the Maytag repairman. This is the guy who has nothing to fix. Of the millions of washers, dryers and dishwashers that are sold- the guy who was hired to fix any problems that Maytag appliances may have, has nothing to fix.

Surely there is something that he can fix. Yes, only if something is broken!

Just like the Maytag repairman has nothing to fix, Mom's of children with disabilities have nothing to fix. We are in essence Maytag Moms.

Many of us are given a diagnosis for our kids and a laundry list of all the things that are wrong. We are presented with scenario after scenario of circumstances too bleak to contemplate.

The problems that face children with disabilities and their families sometimes seem endless. And for many who are faced with a problem- the natural tendency is to fix it.

A wise woman whom I love and respect once told me it took her a long time to figure out that her role in her daughter's life was NOT to "fix" her daughter, because she wasn't broken. Once she learned that she was able to come into acceptance of what is- and find peace with that. To function in a mindset that is about maximizing potential and life chances, rather than fixing the problems of a "broken" child or family situation is so much more meaningful. The Maytag Mom is expending valuable energy trying to fix something that isn't really broken.

Broken means out of order, not working, damaged, ruined, destroyed, defeated, dejected, crushed, dispirited- without hope.

Our children are anything but broken.

The sooner we stop trying to fix the situation or our children, the sooner we can begin the healing process and begin to function in a positive, less energy draining way.

I have learned I am a Maytag Mom. I have been doing all I can to fix things. Acknowledging this has been so profound for me. It's taken a lot of soul searching in a short period of time to realize that no matter what- we have some circumstances that just are what they are. Nothing's broken.

The good news is Maytag Moms are good at what they do and can redirect their energies to things that are about building and growing and uplifting. We can do with our lives what was intended- to live and love to the fullest. Love our children and the joy they bring. Resist any temptation to fear the unknown about what lies ahead. Certainly, what the Moms of children with disabilities face can be different than if our children didn't have a disability- but guess what there would still be something to deal with: just a different something.

But I believe wholeheartedly that the heart, energy and passion of the Maytag Mom is why God blessed our lives in such a great way. Reminding ourselves of the blessings during times of turmoil all around us becomes the challenge.

Maytag Moms- there is a great future ahead!



## WAYS TO SAY VERY GOOD!!

Children of all ages require lots of tender, loving care. Providing positive praise and encouragement will increase your child's self esteem and make them proud of their effort and accomplishments.

**You worked well today.  
You're doing a good job.  
You've just about got it.  
What a nice job!  
THAT'S IT!  
FANTASTIC!  
I knew you could do it.  
Great!  
Good for you!  
You make it look easy.  
Good idea!  
That's the way!  
Nice going.  
Keep up the good work.  
You can do it.  
EXCELLENT!  
I need your help.  
Way to go.  
Good try.  
Keep it up!  
Your working hard today!  
Good thinking!  
Keep on trying!  
Good for you!  
I like that.  
THANKS!  
Good job, (name of child)  
You are very good at that.  
Good to see you trying!  
WOW!  
Way to go.  
Good remembering.  
That's really nice.  
Your on the right track.  
Not bad.  
I am proud of you.**

Adapted from Rose L. Ford Extension House Economist Lit.

## Respiratory Syncytial Virus

Respiratory syncytial virus (RSV) infection is a viral disease of the lungs. In the winter months, it is one of the most important causes of lower respiratory tract illness in infants and young children

### How do people get RSV infection?

The virus is found in discharges from the nose and throat of an infected person. People can get RSV infection by:

- Hand-to-mouth contact after touching an infected person.
- Hand-to-mouth contact with a surface that an infected person has touched or coughed on.
- Breathing in droplets after an infected person coughed.

### What are the signs and symptoms of RSV infection?

- Mild to serious respiratory tract infections, including pneumonia.
- Symptoms can last for a few days to several weeks.
- Newborns and young infants may include irritability, listlessness, and poor feeding.
- Children may have a low-grade fever for several days, a cough lasting more than 2 weeks, and respiratory symptoms including difficult or rapid breathing and deep coughing.
- In young children symptoms include stuffy nose, cough and sometimes ear infection.
- In older children and adults, infection involving the nose, throat, or sinuses.

### Who is at risk for RSV infection?

- Very young infants
- Premature infants
- Children with lung, heart, or immune system problems
- Elderly
- Adults with lung disease or weakened immune systems.

### What is treatment for RSV infection?

- Mild RSV infections can get better without treatment.
- Serious infections require hospitalization
- Currently no vaccine to prevent RSV infection.

### What complications can result from RSV infection?

- Severe breathing problems that need to be managed in the hospital.
- In premature babies less than 6 months old and infants with chronic lung, heart or immune problems severe complications that may lead to death.

### Prevention:

- Immune globulin intravenous (IGIV) treatment for high-risk infants.
- Wash hands often and thoroughly
- Cover coughs and sneezes
- Dispose of used tissues properly

Adapted from the Directors of Health Promotion and Education Website  
<http://www.dhpe.org/infect/rsv.html>



## Shhh.....Baby is sleeping...

The National Institute of Child Health and Human Development (NICHD) suggests parents take these steps to lower the risk of sudden infant death syndrome (SIDS).

### The Safe Sleep Top 10.....

1. **Always** place your baby on his or her back to sleep, for naps and at night.
2. **Place** your baby on a firm sleep surface, such as on a safety-approved crib mattress, covered by a fitted sheet.
3. **Keep** soft objects, stuffed toys, and loose bedding out of your baby's sleep area.
4. **No** smoking around your baby.
5. **Keep** the baby's sleep area close to, but separate from, where you and others sleep.
6. **Think** about using a clean, dry pacifier when placing the infant down to sleep.
7. **Do not** let your baby overheat during sleep.
8. **Avoid** products that claim to reduce the risk of SIDS.
9. **Do not** use home monitors to reduce the risk of SIDS.
10. **Reduce** the chance that flat spots will develop on your baby's head and provide "Tummy Time".



For more information about SIDS and the Back to Sleep Campaign:  
Mail: 31 Center Drive, 31/2A32, Bethesda, MD 20892-2425  
Phone: 1-800-505-CRIB (2742)  
Fax: (301) 496-7101  
Internet: <http://www.nichd.nih.gov/sids>