

Episode 2: Education

EFMP & Me podcast transcript

Karen Terry:

You're a military parent and you suspect that your child has a developmental delay. Where can you get a referral and what happens after the referral is made? We'll talk about that and more in this podcast for EFMP families. Hi, I'm Karen Terry and we're going to talk to you today about education support available through the Department of Defense.

Hi, and welcome to our podcast series about EFMP & Me and the support and services available to military families with special needs. Today we'll be talking about education with two subject matter experts. We're going to focus on services associated with the educational special needs and the Individuals with Disabilities Education Act, or IDEA. We will share some tips to help parents or caregivers navigate between the special education needs of their children and the demands of living a military life.

My name is Karen Terry. I'm a program analyst for the office of special needs and your host for this episode. I want to warn you up front, this is an acronym-heavy episode. So pull out some paper and a pencil, take notes on whatever you have handy – your hand, a coffee cup – whatever you have. We will identify the long names as we go, and you will be able to find a complete list of the acronyms in the episode description.

Now, I can state from firsthand experience that finding the right education options for children with special needs is a continuous process, and it can start at a very young age. In this episode, we'll be talking to Ms. Patricia Smith, who's an early intervention specialist, and Ms. Jasmine McLeod from DODEA. So before we begin, would each of you take a minute and tell us a little bit about yourself?

Patricia Smith:

Hi, Karen. This is Trish. Thanks so much for having me. It's really nice to be here. I am the family readiness department head for the Navy Bureau of Medicine and Surgery, which is also commonly called BUMED. Within family readiness, we're primarily responsible for three family programs, the first one being EDIS, which stands for the Educational and Developmental Intervention Services. We're also responsible for the EFMP program, and third, the Navy overseas suitability screening program for dependence.

By background, I'm a speech language pathologist specializing primarily in early intervention services for children under the age of three and their families. Prior to coming to BUMED, I worked for the Army EDIS program in Germany.



Karen Terry:

Great. Welcome, Trish. Jasmine, would you like to tell us a little bit about yourself?

Jasmine McLeod:

Absolutely. Thank you for having me. Well, I'd like to start by saying I'm the daughter of an Air Force veteran and a former student myself. For my profession, I do serve as the chief of student services at the Department of Defense Education Activity, which I will refer to moving forward as DODEA. I'm also a licensed clinical professional counselor. Prior to serving as the chief of student services, I've served in the capacity of being the program manager for student services, as well as a school counseling instructional systems specialist at DODEA HQ.

Access and equity in education is my passion. Prior to serving at DODEA, I led a lot of various educational programs in public schools, and I also worked with a couple of graduate programs. But I found my way into the career of education by working with autistic students in elementary grades. That's how I put myself through my undergrad program.

Karen Terry:

That's great. I'm more confident now than ever that we have the best SMEs here for this particular subject. I'm excited for this episode because the provision of early intervention and special education and related services is near and dear to my heart. I have a special needs child. When my son was young, I somehow stumbled on Child Find purely by accident. Trish, can you tell us a little bit about Child Find? What is Child Find?

Patricia Smith:

Sure, Karen. So good question. So under IDEA, the early intervention program is required to do what's called Child Find, and this is really here to benefit the families so that they're aware that we're out there. So we might be doing public awareness. You might see us at different festivals on your installation, or you might see us at the exchange or someplace else so that we can give you information about our programs, or you might also see us doing screenings throughout the community where you can actually bring your child to us, and we can walk through a screening with you if that's what you would like to do.

So those are just two examples of how we do Child Find. But we really do make an effort to get out there into the community so that you know who we are and how to reach us.

Karen Terry:

Great. Before we start talking about IDEA and the provision of support and services, it mandates it's important that you know that there are two main parts to it. Part C covers early intervention services. That's what Trish was just talking about. We also call that EIS, and that's where we're going to start. Trish, your work focuses on children ages zero to three who have or are at risk of having a developmental delay. Can you tell us how the military provides early intervention services to these children?



Patricia Smith:

Sure, Karen. Within the DOD, early intervention services are provided through the EDIS program. EDIS is located at all installations where there's a DODEA school. Throughout the DOD, there are approximately 38 EDIS locations spread throughout the Navy, Army and Air Force installations, both domestically in CONUS locations and overseas in OCONUS locations.

The domestic EDIS programs provide early intervention to infants and toddlers whose families live in base housing. Overseas programs provide early intervention to all families who are eligible for DODEA schools, regardless of whether they live on or off base.

Karen Terry:

OK. I just want to clarify so that if you're stationed stateside, CONUS, and you live off installation, you will need to use a community service rather than a DOD service. Is that correct?

Patricia Smith:

That's exactly right. Yes. So if you live on base, you would use your EDIS services, but if you live off base and you live stateside, you would contact your local or state program for the services.

Karen Terry:

OK. But the services that families receive in the community are going to be the same as what they would get through the military, correct?

Patricia Smith:

That's correct. Primarily, the services are the same, but some programs may differ slightly in their delivery model. So the EDIS program follows something that's called a primary provider model, and this means that one primary provider would work with your family, and this allows the family to have a central person to work with. Of course, other specialty providers are also available who can work with the family at any time, depending on their needs.

Karen Terry:

So what would be those specialty providers? What would be some of those specialties that they might provide?

Patricia Smith:

So EDIS programs typically have an early childhood special educator, speech language pathologist, occupational therapist and physical therapist on staff, and some programs also have child psychologists and social workers.

Karen Terry:



Oh, OK. Quite a bit then. If a parent suspects that their child has a developmental delay, where would you suggest they start?

Patricia Smith:

So a parent can just start by walking into an EDIS clinic, or they can pick up the phone and call EDIS themselves, or they may want to first schedule an appointment with their primary health care provider at their local military treatment facility or MTF. So EDIS accepts referrals from both the MTF medical provider and a parent or legal guardian.

Karen Terry:

Then what happens after that referral is made? Do they just immediately get accepted into the program, or is there some sort of evaluation that has to take place?

Patricia Smith:

That's a really good question actually, and a question that a lot of parents have is, what comes next and what happens? So the first step is just making that connection between EDIS and the parent. So if we haven't already met you, we would pick up the phone and call you and just have that conversation to answer any of your questions about what our program does and how it runs. This is also a really good time for a parent to ask questions that they may have about their child's development.

Karen Terry:

So after they meet the first time, what happens next?

Patricia Smith:

So the next step is typically an in-person screening, although in this climate, we can also do the screening virtually, and we make every effort to do that screening in the child's most natural environment, which is typically the home. So we come to you. So during the screening, the parent and the EDIS provider discuss and make observations about the child's skills and what the child is already doing and what that parent might want to see them doing next. So it's really a collaborative effort between the EDIS and provider.

After that screening is done and during that screening, the EDIS and the parent may decide if we want to move to the next step called the evaluation. Just a little note, too about the screening, some parents might be familiar with something called the ages and stages questionnaire. This is often used during a well child visit. So EDIS may use a tool like that to go over with the parent to sort of figure out where that child is at and where we would like to see them going next.

Karen Terry:

So it's a tool that might be familiar to them just from their well-baby checkups and that kind of thing.



Patricia Smith:

Sure. It could be for some families. Yes.

Karen Terry:

OK. So what is this more formal evaluation? What does that consist of?

Patricia Smith:

The evaluation is typically scheduled for another visit because we don't want to overload the family or the child and do everything in one visit, and we want to give that family and the child some time to prepare and think about what's going on. That evaluation is also conducted within the child's most natural environment. Again, that's usually the home, although we may also do it virtually, especially now.

It could also be perhaps at a child's day care. But we really do want that parent or the caregiver involved in the evaluation so that they're really part of the process, an equal team member. I often get questions such as, "Well, how can you do a test on a child that's that young?" Believe it or not, it's actually quite easy because so much of the evaluation is based on the parent's report and observation.

So we just can either ask questions about what that parent is seeing, what the child is doing, what they would like the child to be doing, and other parts of the evaluation are based on just standard activities, depending on that child's age. So we take a look at what that child is already doing and compare it to what other children their age are doing.

Karen Terry:

So how would I know if my child is eligible for early intervention, and then what does that mean exactly? What would that look like, that early intervention service?

Patricia Smith:

Sure. So as a result of that evaluation, we really take a look at five primary areas of development, and these would include social skills. So that would be things such as eye contact or social engagement, how they play with other children, that sort of thing. We also look at their adaptive skills, which are their self-help skills. So these would include things like feeding and dressing.

Another area of development that we look at is communication skills. That's not only the child's ability to talk and communicate and use gestures to express themselves, but it would also include the child's ability to understand or comprehend speech. Another area of development that we look at is the motor skills, and this includes gross motor skills, such as running and jumping as well as fine motor skills, such as picking up little items with their fingers.

The final or the fifth area of development that we look at is cognitive. This may include things like problem-solving, thinking skills, memory, and we go beyond. The reason why we look at all five of these areas is because we really want to get a comprehensive look at what the child is doing. So even though a



parent may only have concerns about their child's speech, we want to make sure that we look at everything the child is doing because the speech delay may arise from a muscle issue, or it also may affect the social skills. So we want to get that comprehensive view.

Karen Terry:

That makes total sense.

Patricia Smith:

So once we complete that evaluation on a standardized test, we do get a score, and if that score is falling within a certain range, it would determine whether that child and the family are eligible for our services. That's something that we would really go through with a parent to make sure that they have a deep understanding of what that means.

Karen Terry:

So what happens if they are determined eligible?

Patricia Smith:

So if they are determined eligible, the program is voluntary. So we talk that over with the family, and they make a decision about whether they want to move forward with our services or not. So if they choose to move forward with our services, we would develop something called an individualized family service plan. This is also called an IFSP. It's sort of commensurate with an IEP, individualized education program. So some families might be familiar with this. But the IFSP is for younger children.

Karen Terry:

Can you tell us a little bit more about that? What does it consist of, and how does that work?

Patricia Smith:

Sure. The IFSP is developed as a collaborative effort by both the parents and the EDIS providers. They come up with practical goals or outcomes that they would like to work on, and what I mean by practical goals is that the goal should be something that the parent can easily work on throughout the course of their day. It can be embedded into the family's natural routine, and that way it doesn't feel like homework to the parent. We don't want to add additional things to do onto the parent. We just want to help them with some strategies that may help to advance their child's development. So these goals or these outcomes would also be measurable for that parent. So the parent would be able to measure that.

Karen Terry:

That's important to know if your child's making progress. Yes.

Patricia Smith:



Exactly. So I was just going to say, so I mean, sometimes we say, "Oh, he can do this three out of five times." But that might not make sense to a parent. So we want to make sure that how we measure it is truly making sense for a parent and it's something that they want to do and want to work on.

Karen Terry:

Exactly. Yes. That makes absolute sense. I've been there. I've done that. That makes sense to me. If a child has an IFSP, are they typically also enrolled in EFMP?

Patricia Smith:

Yes. The EFMP enrollment is required if the child is enrolling into the EDIS program, and we do this to make sure that the family's special needs are considered during the assignment process. So we want to all do our part to see that a family gets the services that they need wherever they go.

Karen Terry:

I agree with that. So what are some of the biggest concerns that families might have about early intervention?

Patricia Smith:

Well, every family is different, of course, and is going to have their own concerns and questions. But the two most common questions I hear is, "My child is so young. Isn't it too soon to tell? Maybe I should just wait it out and see how it goes." What I can say for that is that the early intervention program is based on prevention.

Studies have shown that the earlier we can identify and address the need, the better the outcome is in the long run. If we identify that the child is falling behind their peers, it's best to work with that child and family as soon as possible. So our goal is to set up the child and the family for success, and then throughout the process, we continually check to see if the services we're providing are still necessary or need to be updated. So we do perform progress reviews at least every six months, and we reevaluate at least every year.

Karen Terry:

Oh, wow.

Patricia Smith:

The other concern that I hear is, "I don't want my child to be labeled." I think that's probably true for most parents. For early intervention, the records are kept private, and they're not shared with anyone outside the NTF medical community, like for example, the referring doctor. So it is confidential. Although the parent may request for us to share information with someone else, like for example, a babysitter or a day care provider, and in that case, the parent would sign consent and let us know who



to share information with and what information they would like to be shared. So we really do make an effort to keep everything confidential, unless the family would like something to be shared.

Karen Terry:

OK. Well, I think personally speaking, I mentioned, my son has special needs. Both of those concerns crossed my mind when we were having our child evaluated. But I can honestly say that those services provided as early as they were and that information that was given back to us as parents was absolutely critical to our family. At that time, we were really in crisis trying to figure out what to do. So this is a really important service that I'm really glad that you're here to talk more about it. What age does a child typically transition from the early intervention services to the special education services?

Patricia Smith:

So EDIS provides services for children up until their third birthday. But we begin planning that transition out of early intervention at least six months prior to their third birthday. So a transition may indicate that a child no longer needs intervention. In that case, we may just provide some additional strategies that a family can work on, and the child would no longer receive the services, although they're always available at some point either through the school that a parent can access after that.

But we also may find during that transition period that a child would benefit from the developmental preschool, and we would prepare the family so that they would have an understanding of where their closest developmental preschool is and how to access those services. So we really do stay close with the family throughout the transition process and help to answer any questions that they may have. That's why we start that transition so early. The parent is involved every step of the way. The primary goal of the EDIS program is to provide that parent with resources and options so that they can make educated decisions for their child.

Karen Terry:

OK. So this sounds like the perfect time to bring in Jasmine. Jasmine, it sounds like there needs to be coordination, good coordination between EDIS and DODEA or the EIS if you're in a community service to ensure that the child is evaluated for special education at the right time, which is, as Trish was saying, approximately six months before their third birthday. Can you tell us what that coordination looks like and about the eligibility process for special education?

Jasmine McLeod:

Absolutely. I'm really glad you asked that question. If the child is eligible for preschool services for children with disabilities, which is also known as PSCD, coordination typically begins when the child is around 30 months old. The service coordinator will reach out to the family to schedule a home visit, where they'll have the opportunity to meet with DODEA schools personnel, and together, they begin to process the appropriate evaluations.

Then with the family's permission, once all of the assessments are complete, the service coordinator will review those outcomes with the school, and as a team, they'll determine the child's eligibility for special



education. OK. So now, if it's determined that the child is eligible, the team is going to create what's called an individual education program, an IEP, and it's very similar to the IFSP that Trish mentioned earlier. But it's really designed to be more appropriate for the school setting. Again, all of this is done with the families' involvement.

Karen Terry:

Terrific. Because we're dealing with the military, if a family is PCSing during this critical around the 30-month timeframe, how are these transitions coordinated between locations? Is there anything the parents can do to prepare?

Jasmine McLeod:

Oh, yeah. Transitions are so important. I remember even my own family going from one location to the other, leave one school, and the other school has learned cursive, and I'm here learning overnight in billeting. So transitions are so very critical. It's all about launching, but also making sure there's a soft landing on the other side for that student.

So there's a couple of things that I would advise that military families with students with special needs should always keep with them. OK. You want to have an updated folder with specific special education documents, and you will keep this over time.

To remember what those documents are, I like to use the IDEA acronym. So you have I, which stands for a copy of the student's individual education program, their most recent copy. D for documentation of progress made since the last IEP was developed. E is for any evaluations or medical records, and then A, that's going to be all of your assessment information, adaptive equipment, assistive technology, anything that's used to support or inform the IEP. If you can keep a copy of those with you and just make sure you have them on hand, it will be very helpful to the receiving IEP team.

Karen Terry:

Absolutely. I want to piggyback on what you just said, Jasmine. To help families keep all of those papers organized, EFMP has a special product called The Special Care and Organizational Record. We'd normally call it the SCOR, and there is a SCOR for children with special medical and/or educational needs. These are going to help you keep your information and paperwork organized. You can set it up the way you like. It's a large hardback notebook that you can get from your EFMP Family Support provider.

But you can also preprint and download forms from Military OneSource to help maintain the specific information that Jasmine was just mentioning and have a quick-access format. So maybe if you have a babysitter or a day care provider or something like that, you are able to access the information you need, download a copy, print it out, give it to them, and they have all the contact or information regarding prescriptions or whatever they might need.

But I also want to highlight the importance of hand-carrying a copy of your latest eligibility information with your IEP or IFSP, having that on hand and not having to wait until your household goods arrive or something like that. It's really going to give you a good head start to getting your child enrolled in a new program or set up with new providers. So highly encourage that. Thanks for mentioning that, Jasmine.



Jasmine McLeod:

Absolutely. I love the idea of that folder. That's awesome.

Karen Terry:

Yes, it's really. It's really very cool. So at this point we're going to move on to assume that the child has been evaluated and found eligible for special education and related services. For those of you who are tracking that we haven't yet talked about the second part of the two parts of IDEA, here you are.

Part B is the second part you should be familiar with as a parent, and part B outlines what you need to know about special education in order for it to be compliant with the law. So can you tell us a little bit more about that, Jasmine?

Jasmine McLeod:

Absolutely. That is true. It's really important to remember IDEA really is the statute, the federal law. It's going to outline the what of the law. But it's really important for parents to set their expectations around knowing that whether it's DODEA or even the state education agency or even some school districts, they get to decide how IDEA is implemented in their schools. So parents will see some differences in how the laws applied as they move from one location to another.

Karen Terry:

It sounds a bit like military policy. So we at OSD write policy saying what needs to happen and then the military departments and services, and then sometimes even the installations get to decide how to make those things happen. Right?

Jasmine McLeod:

That's absolutely right. Yep.

Karen Terry:

OK. So in our example, the toddler was evaluated and was found eligible for special education. What happens next?

Jasmine McLeod:

So once the student has gone through the eligibility assessment and a disability has been identified, a case study committee will meet to determine the level of special education required to provide an appropriate educational framework. So the members of the case study committee always will include the parents, the guardians.

You'll have a school administrator, a general education teacher, a special education teacher, and then other professionals who may have knowledge and information about the student may attend as well. Then together, they review the various pieces of information and data to establish short- and long-term



goals. Then those goals are folded into an individualized education program, the IEP that will be implemented by the school.

Karen Terry:

OK. Then I guess we just need to be clear that a student can be evaluated for special education at any age. Right? They don't have to be part of an early intervention program first.

Jasmine McLeod:

Oh, very good point. Yeah. That's correct, Karen. A student may be referred by parents, medical professionals, social service agencies, even through a pre-referral process where other behavioral or academic deficits were identified and interventions implemented by the school were unsuccessful. OK. So once they're referred for special education services, the assessment process begins to determine whether the student is eligible for special education services, and the thing to keep in mind is developmental delays or learning disabilities such as dyslexia, dysgraphia, and your auditory or sensory processing disorders tend to show up when a student begins to read and write, and they can be difficult to identify before the students start school. So we've built in multiple points of access to special education services.

Karen Terry:

Why is the IEP so important for students found eligible for special education?

Jasmine McLeod:

Well, the IEP, it's an essential tool that galvanizes key stakeholders such as parents and administrators and teachers, and they come together to build a road map of special education instruction services and supports that are needed in order for the student to meet their learning potential. It also affords students and families legal protections, and those legal protections are designed to ensure the student has access to free and appropriate public education based upon their individual needs.

Karen Terry:

I like that you called it a road map. I think that's really appropriate and a really good description of that. You mentioned FAPE, so Free and Appropriate Public Education. Can you tell me more about FAPE?

Jasmine McLeod:

OK, Karen. This is where we get into the alphabet soup of special education. FAPE, Free Appropriate Public Education from a historical lens is a civil right founded in the 14th amendment.

Karen Terry:

Oh, wow.



Jasmine McLeod:

FAPE, it's centered on the belief that all students in the United States are entitled to an equal opportunity to access their educational benefit in the least restrictive environment. So what does that mean for students with disabilities? An individual education program, the IEP, as we said before, is the road map that provides guidance for FAPE to meet the child's unique needs, including ensuring an educational benefit, preparation for future education, employment and independent living.

So it's designed to consider the unique needs of an individual student by examining the effects the disability has on the student's ability to access their learning potential and then utilizing the IEP, building a program with the appropriate special education instruction services and supports needed to remove barriers so that student can continue to learn in the general education setting to the greatest extent possible.

Karen Terry:

OK. So you said something that made me go mm-hmm (affirmative). The LRE, least restrictive environment. Can you explain what that is?

Jasmine McLeod:

Right. So LRE, another important member of the alphabet soup family here. So as you stated, LRE stands for least restrictive environment. What that means is that the school must try to keep the student in a class with their nondisabled peers to the maximum extent possible. The general education classroom is considered the least restrictive environment in most cases.

However, if necessary, the student can be placed in special classes, receive separate schooling or otherwise be removed from the regular educational environment if the nature or the severity of their disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Karen Terry:

Is that LRE determined during the IEP meeting? Do parents have a part in that? How is that determined?

Jasmine McLeod:

Oh, absolutely. Parents are a part of the journey on this road map the entire time. LRE is unique to the students' needs and their disability. The IEP ultimately provides for the appropriate supports and services the student needs to be able to remain in the general education setting, and if that setting is determined inappropriate to meet the student's needs, another setting will be discussed.

Remember that IEP team, which remember the parent is a very important member of, is responsible for determining what that individual student needs to access his or her LRE.

Karen Terry:



OK. So I'll ask you the same question I asked Trish. Is a child with an IEP typically enrolled in EFMP?

Jasmine McLeod:

We have the honor and privilege of serving military-connected students, and you'll remember DOD instruction 1315.19 requires EFMP enrollment for all military connected students who intend on receiving special education services at a DODEA school. So we find that the vast majority of our students who have IEPs are enrolled in the EFMP.

Karen Terry:

Why do you think EFMP enrollment is important for these students? Is there a benefit that you see with the special education?

Jasmine McLeod:

Absolutely. There's a lot of research and just grassroots efforts that are finding that families that enroll in the EFMP tend to experience improved educational outcomes. We know that delay of special education services can significantly impact a child's academic and functional progress. It also supports DODEA's readiness to receive students and their families as they PCS to new locations. So it's essential, so very essential that our military families with students with special needs receive duty assignment locations with the supports and services the family needs in place, including related services.

Karen Terry:

Ooh, we haven't talked about those yet. What is a related service?

Jasmine McLeod:

OK. So related services are those services required for the student to benefit from his or her special education programs. So they may include psychological and counseling services, speech and language, hearing, transportation, assisted technology. It also includes your physical and occupational therapy and medical services required for diagnostic or evaluation purposes. These services are documented in the student's IEP, and they can be provided by the school or a specialist from another DOD agency.

Karen Terry:

So the family is moving out of an area with a DODEA school where they've been receiving special education services, and then the child is now going to be going to a public school. Are there differences in what the family or the child will experience? What should they expect?

Jasmine McLeod:

There will be differences. IDEA is federal law, and that's very important. It's important for parents to understand that every student with an IEP is covered by IDEA. What's important for military-connected families to understand is that IDEA stipulates what the state or an educational institution must do to



meet the needs of students with disabilities, but it leaves room for states and educational institutions to define how they will operate within the statute. They cannot offer less than what the law requires, and they cannot undermine the law, but parents can expect to see some variance in how the law is applied from state to state or institution to institution.

So when preparing for a move, I like to always advise our military-connected families, those that have students with IEPs, they'll want to ensure they have those educational records that we spoke about earlier, and it's so helpful and important that they connect with their local EFMP representative and they take advantage of those supports. Most recently, one that comes to mind is the EFMP & Me program, which just has a plethora of resources and supports for families with students with disabilities.

Jasmine McLeod:

Then the last thing to remember and be sure to do is engage with your new school district and notify them that your child has special needs so they can begin to transition early and getting back to that soft landing, not just the launch, but we're thinking about the landing.

Karen Terry:

As you might be aware, Jasmine and Trish that recently, I think it's about 19 states now, they actually have advanced registration or advanced enrollment for students. So if you're moving from one location to another, it's a good idea to talk to your school liaison on installation or your EFMP family support to see if you're moving to a state that allows you to register your child for school early before you even moved to that state.

So that's a great benefit that's just been recently started to get approved state to state. So I'm sure all of the listeners now realize that this is a big subject with a lot of details, and you'll want to listen to this podcast more than once. But to both of you, what do you think is the most important thing a parent should do or know about?

Jasmine McLeod:

Outside of know your ABCs, if I had to pick the two most important, they would be educating yourself and partnership, right? Parents are equal partners in the IEP process. It's so important that military families educate themselves about the rights the IDEA affords them so that they can advocate effectively for their students.

Knowing the boundaries established in the law allows parents to have the skills necessary to effectively communicate their student's educational needs. It's also equally important to build strong partnerships with your schools, engage your local school system as soon as you can and as soon as you know about your new duty location and have your documentation in hand to minimize delay or disruption, those services. That documentation, it really just removes those transitional barriers a lot.

Karen Terry:

Agree. Agree. Trish?



Patricia Smith:

So thanks, Karen. I think probably the most important thing a parent should know if they have a young child is that if they have a question or a concern, just ask because help is out there. Under the IDEA requirement, EDIS does perform a lot of Child Find. So we're out there. We're in the environment. We're available. We want to take your questions. We're here to help.

So don't feel like you should hold back anything. Just ask those questions now when your child is young. Eventually, along the line, you are really going to have to advocate for your child in one way or another. So it's a good time to start and just find out the information if you're curious. It's available to you.

Karen Terry:

Oh, I like that. That's good. So this is a part of the podcast where I'd like to mention that families can also contact EFMP Family Support and Military OneSource special needs consultants for more information and assistance with educational rights, concerns and questions. I also want to remind listeners that installation school liaisons work on your behalf and can help you as a family, especially in those critical transition times that we've mentioned so many times during this podcast.

EFMP & Me has many checklists under the topic heading of education. These checklists are organized by ages zero to three for early intervention and three through 21 for special education. Each checklist offers you actionable items and pro tips to jumpstart your ability to more effectively self-advocate. All the resources and processes we discussed today are included within these checklists. So check it out on EFMP & Me.

Additionally, I want to draw your attention to the DOD Educational Directory for Children With Special Needs. It is found on Military OneSource. You could just Google in the search bar, DOD Educational Directory for Children With Special needs or Educational Directory. This is a terrific resource for parents, especially when a family is moving. It's going to give you information on the state you're going to, early intervention services, as well as special education services. So highly recommend that.

Trish and Jasmine, I want to thank you both for being with us today. I appreciate you both joining me. I know our listeners learned a lot. Is there anything else you'd like to say before we wrap up this episode?

Patricia Smith:

Thanks so much for having us, Karen.

Jasmine McLeod:

Thank you for having us, Karen. It was a pleasure, and good hearing you again, Trish.

Patricia Smith:

You too, Jasmine.

Karen Terry:



Great. Before we sign off, I just want to thank everyone for listening and encourage them to go to EFMP & Me and take a look at the topics and available checklists. We are really excited about the tool, but we want you to help us make it even better. When you're using EFMP & Me, in the upper right-hand corner of the screen, you will see a contact button. It actually says "Contact." Click that and then click feedback. We want your feedback and ideas so we can continue to refine EFMP & Me and make it the best possible tool for helping you find your answers.

I hope you found the information we shared today valuable. Don't forget all the resources we mentioned. They're going to be linked on EFMP & Me for sure. They'll also be in the episode description. If you have feedback or questions, reach out to us at that contact button or at public.militaryonesource.mil/feedback. In our next podcast, we will be talking about PCSing, a subject every military family can connect to, and I hope you will join us. Thank you very much.

You've been listening to a podcast for EFMP families brought to you by the Office of Special Needs and by Military OneSource. I'm Karen Terry. Thanks for listening.

