

EXCEPTIONAL FAMILY MEMBER PROGRAM:

FAMILY SUPPORT REFERENCE GUIDE



CONTENTS

CHAPTER 1 THE EXCEPTIONAL FAMILY MEMBER PROGRAM	
Introduction	1:1
EFMP Family Support Provider Core Competency Curriculum	1:3
The Exceptional Family Member Program	1:4
Legislation and Military Policies	1:5
CHAPTER 2 FAMILY SUPPORT: MANAGING THE PROGRAM AND UNDERSTANDING YOUR ROLE	
Roles and Responsibilities	2:1
Installation Demographics	2:3
Reaching Families	2:3
Command and Installation Support	2:3
Collaboration and Partnerships	2:4
Program Awareness and Marketing	2:4
Quality Assurance	2:4
CHAPTER 3 FUNDAMENTALS OF WORKING WITH FAMILIES	
Hallmarks of the Helping Professional	3:1
Communication Skills	3:2
Professional Boundaries	3:5
Service Accessibility	3:8
Empowering Families	
Cultural Compotoncy	2.10

CHAPTER 4 DOCUMENTATION AND NON-CLINICAL CASE MANAGEMENT

Information and Referral	4:1
Non-Clinical Case Management	4:2
Privacy and Disclosure	4:5
Records Management	4:5
Requests for Release of Records	4:6
Internal Case Review	4:6
Record Transfers	4:6
CHAPTER 5 LEGAL ISSUES	
Installation Legal Office	5:1
Additional Legal Resources	5:2
Letter of Intent	5:2
Estate Planning	5:3
Survivor Benefit Plan	5:4
Special Needs Trusts	5:4
Guardianship and Conservatorship for Incapacitated Adults	5:5
CHARTER & FARLY INTERVENTION AND ORGAN ERMOATION	
CHAPTER 6 EARLY INTERVENTION AND SPECIAL EDUCATION	
Screening and Referral	6:2
Early Intervention Services	6:2
Special Education	6:4
Public School Structure	6:7
The School Liaison Program	6:11

CHAPTER 7 ADULTS WITH SPECIAL MEDICAL AND/OR EDUCATIONAL NEEDS

Military Benefits for Adult Family Members	7:2
Education Options	7:2
Post-Secondary Education	7:3
Military Spouse Career Advancement Account	7:3 7:4 7:4 7:4
Vocational Rehabilitation and Employment Options	
Assistive Technology	
Transportation	
Social and Recreational Opportunities for Adults	
Personal Financial Management and Free Tax Return Assistance	
Deployment Support	7:5
Parenting	7:5
Installation Emergency Assistance Plan	
CHAPTER 8 HEALTH CARE BENEFITS	
Organizing Medical Information	8:1
Medicare	8:4
Medicaid	8:4
Title V of the Social Security Act	
CHAPTER 9 PUBLIC BENEFITS AND FINANCIAL ASSISTANCE PROG	RAMS
Social Security Administration Benefits	9:1
Housing Assistance	9.3

CHAPTER 10 RELOCATION

Assignment Coordination	10:1
Connecting to Resources	10:2
Housing	10:4
TRICARE Portability	10:4
Early Intervention and Special Education Services Considerations	10:4
Guardianship and Conservatorship	10:6
Relocating State to State	10:7
Relocating Overseas	10:7
Humanitarian or Compassionate Reassignments	10:7
Standardization FAQs and Myth Busters	10:8
APPENDIX	
Public Benefits Resource Table	A:1
A-Z Index of Government and Non-Government	
Agencies and Resources	B:1
Glossary of Terms	C:1

Disclaimer: Information and links to outside organizations may change over time. Please confirm information with the source agency before providing to families.



CHAPTER 1

The Exceptional Family Member Program

Introduction

The Defense Department is committed to providing consistent, high-quality support to military families with special medical and/or educational needs. Understanding and meeting the needs of family members is essential to both mission and personal readiness.

Together with military families and DOD components, Congress expanded the Exceptional Family Member Program to incorporate Family Support services into the assignment coordination program. Section 563 of the National Defense Authorization Act for Fiscal Year 2010, Pub. L No. 111-84, required the secretary of defense to establish the Office of Community Support for Military Families with Special Needs (now referred to as the Office of Special Needs) to "enhance and improve DOD support around the world for military families with special needs (whether medical or educational needs) through the development of appropriate policies, enhancement and dissemination of appropriate information throughout the DOD, support for such families in obtaining referrals for services and in obtaining service, and oversight of the activities of the military departments in support of such families." There are three primary program areas of OSN: EFMP, the provision of services pursuant to the Individuals with Disabilities Education Act, and the sponsorship and facilitation of the Advisory Panel on Community Support for Military Families with Special Needs. Learn more about the activities of the OSN in the Annual Report to

Congressional Defense Committees. OSN provides support to you, the Family Support provider, leadership and families by developing and disseminating valuable tools and resources through Military OneSource. Please visit and share the abundance of resources provided by accessing the hyperlinks throughout this guide. You can also visit EFMP & Me and additional EFMP resources at Military OneSource.

This guide is an information source for use in supporting military families. It provides critical program planning information, including parameters for establishing a new Family Support program at an installation, improving an existing program, providing service delivery, and developing collaborative relationships with on- and off-installation offices and agencies. The guide also includes helpful sample documents, a resource list and definitions of commonly used terms.

Use this guide in conjunction with service and installation policies and procedures. It is a customizable working document that will help you provide support to military families with special medical or educational needs including children, enrolled adults and caregivers.

You can also use this guide to compile and store the following information:

- Important legislation, DOD policies and service regulations
- Sample forms
- Tools for tracking your program's activities
- Operating policies and procedures
- Information on programs or services available on the installation and in the surrounding community
- Additional tools and resources

The guide is updated annually by OSN to reflect evolving policies, roles and responsibilities, and to identify best practices for delivering timely and effective services to military families. Terms are defined in the glossary.

The Service Provider section of EFMP & Me brings the full OSN library of information and resources right to your computer or mobile device.

Find it at https://efmpandmemilitaryonesource.mil.

EFMP Family Support providers can receive program updates from OSN by subscribing to the Exceptional Advocate, the quarterly EFMP eNewsletter available on Military OneSource.

EFMP Family Support Provider Core Competency Curriculum

This guide's objective is to provide a clear understanding of the Family Support provider's role and the delivery of EFMP services, which are available to all service members and their families, regardless of enrollment status or service affiliation. It is a supplement to the EFMP Family Support Provider Core Competency Curriculum. The curriculum outlines recommended training courses for all EFMP Family Support providers to develop and enhance skills essential to executing EFMP Family Support responsibilities. Release 1.1 of the curriculum includes updated and newly released courses to provide staff with the most recent and applicable resources. The trainings below are available through the course catalog on the MilLife Learning site, or https://millifelearning.militaryonesource.mil/.

MilLife Learning provides three tailored EFMP Family Support staff training videos: Building Your EFMP Family Support Program, Completing Quality Case Notes and EFMP Family Needs Assessment Training, as well as an EFMP Glossary created for providers to have access to the meaning of various terms used within the different service branches. You can also find videos to share with the families you support on MilLife Learning.

The curriculum also includes new TRICARE Autism Care Demonstration Manual Change webinars, as well as a selection of OneOp webinars, including updated or newly released webinars. The entire selection of OneOp Caregiving Webinars is continuously growing and can be accessed here. We encourage you to keep visiting the site to check out newly released webinars.

OSN, in collaboration with service EFMP Family Support headquarters representatives, continues to develop and monitor courses for the curriculum – stay tuned for additional future releases.



Register for an account on MilLife Learning.

https://millifelearning.

militaryonesource.

mil/MOS/mcfp-prod/

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The Exceptional Family Member Program

EFMP is a DOD program implemented by all service branches. The EFMP has three components:



Identification and Enrollment

Enrollment in the EFMP is mandatory for active-duty military members who meet enrollment criteria. When a family member is identified with special medical or educational needs, those needs are documented through enrollment. Members of the National Guard or reserve may enroll according to service-specific guidance.



Assignment Coordination

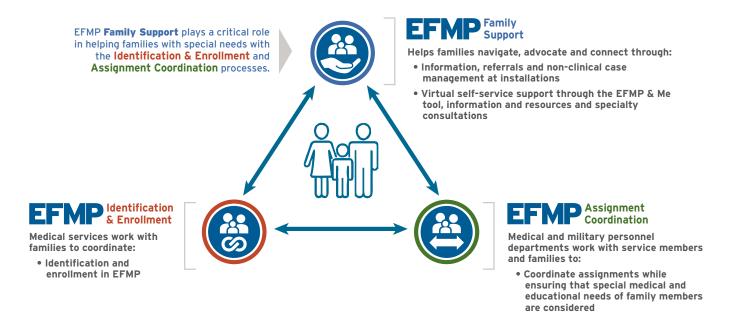
EFMP enrollment ensures that a family member's special needs are considered in the assignment process. You can learn more about Assignment Coordination in Chapter 10.



Family Support

EFMP Family Support assists families with special needs by helping them identify and navigate support programs and services. Family Support provides assistance to enrolled children and adults, their families and caregivers.

FIGURE 1:1 EFMP Components



As of fiscal year 2022, the number of service members enrolled in EFMP was approximately 110,000, and the number of family members enrolled was approximately 142,725. Enrollment includes spouses, children and other dependent family members with a qualifying medical and/ or educational diagnosis, defined in <u>DOD Instruction 1315.19</u>, "The Exceptional Family Member <u>Program," April 19, 2017</u>. Enrollment is not necessary to access Family Support services.

Legislation and Military Policies

It is important to understand the legislation and DOD policies that impact families with special medical and/or educational needs. For ease of reference, you may wish to insert relevant service and installation policies at the end of this chapter.

Legislation

The <u>Uniform Federal Accessibility Standards</u> are design requirements developed under the Architectural Barriers Act of 1968. The act requires that buildings and facilities designed, constructed or altered with federal funds be accessible and provides a definition of "accessible."

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination on the basis of disability in public and private programs and activities receiving federal funding, including the Defense Department. Under Section 504, individuals with disabilities are defined as persons with physical or mental impairments that substantially limit one or more major life activities. People who have a history of, or are regarded as having such impairment are also covered. These individuals may need an accommodation plan for added support.

The <u>Americans with Disabilities Act of 1990</u> is comprehensive legislation providing civil rights protections to individuals with disabilities. It guarantees equal opportunity in employment, state and local government, public accommodations, telecommunications and transportation. Read the <u>Americans with Disabilities Act fact sheet</u> to learn more.

The <u>Individuals with Disabilities Education Act of 2004</u> governs how states and public agencies provide early intervention, special education and related services to children with disabilities:

- Part A addresses general provisions of the act.
- <u>Part B</u> addresses requirements for educating children ages 3 to 21 with disabilities and applies to all U.S. public schools and Defense Department schools.
- <u>Part C</u> addresses early intervention requirements to identify, assess and provide services to infants and toddlers from birth through age 2 who are at risk for developmental delay.
- <u>Part D</u> provides for national activities to improve the education of children with disabilities.

The <u>Vocational and Technical Education Act</u>, also known as the Carl D. Perkins Vocational and Technical Act of 1998, was enacted to improve the academic and occupational competence of all vocational students with an emphasis on special populations. Special populations include students with disabilities and students who are academically or economically disadvantaged. The act provides funding for secondary, post-secondary and technical programs.

<u>Title 42, USC, Chapter 126, "Equal Opportunity for Individuals with Disabilities," Feb. 1, 2010</u> provides a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities. See the <u>Equal Opportunity for Individuals with Disabilities</u>

Fact Sheet to learn more.

<u>Title 10, United States Code (USC) §1781c, "Office of Special Needs," Jan. 7, 2011</u> established the Office of Special Needs to enhance and improve DOD support for military families with special medical or educational needs through the development of appropriate policies, dissemination of appropriate information and more.

Title 29, USC, Chapter 16, "Vocational Rehabilitation and Other Rehabilitation," Jan. 3, 2012 ensures that the federal government plays a leadership role in promoting the employment of individuals with disabilities, especially individuals with significant disabilities, and in assisting states and providers of services in fulfilling the aspirations of such individuals with disabilities for meaningful and gainful employment and independent living. See the Vocational Rehabilitation and Other Rehabilitation Fact Sheet to learn more.

Public Law 108-364, The Improving Access to Assistive Technology for Individuals with Disabilities Act, March 2021 promotes awareness of, and access to, assistive technology devices and services, and provides AT to people with disabilities so they can more fully participate in education, employment and other daily activities. The act incorporates all ages and disabilities in all environments, such as early intervention, K-12, post-secondary, vocational rehabilitation, community living and aging services.

Department of Defense Policies

Directive 1020.1, "Nondiscrimination on the Basis of Handicap in Programs and Activities

Assisted or Conducted by the Department of Defense" implements Section 504 and directs the Defense Department to make all services and facilities accessible to people with disabilities. It also ensures nondiscrimination in employment and establishes procedures to file and manage complaints.

DOD Instruction 1342.12, "Provision of Early Intervention and Special Education Services to Eligible DOD Dependents" establishes policy for providing early intervention, special education and related services for eligible DOD dependents.



Access DOD policies on Military OneSource.

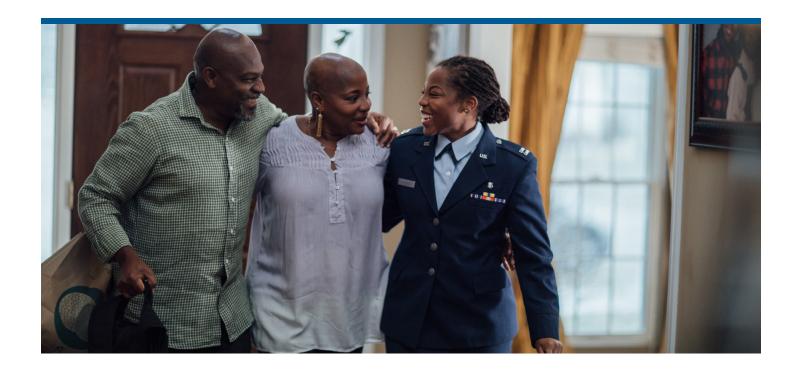
DOD Instruction 1000.13, "Identification Cards for Members of the Uniformed Services, Their Dependents and Other Eligible Individuals," Jan 23, 2014 establishes policy, responsibilities and procedures for issuing ID cards to members of the uniformed services. Children who become incapacitated prior to the age of 21 (or between 21 and 23 if enrolled as a full-time student) and are incapable of self-support, remain entitled to benefits and privileges authorized by the uniformed services if medical sufficiency is met and the sponsor is providing more than 50% of their support.

<u>DOD Instruction 1315.19, "The Exceptional Family Member Program," April 19, 2017</u> assigns responsibilities and prescribes procedures for authorizing family travel at government expense for active-duty service members who are assigned overseas and have a family member with special medical and/or educational needs. It also provides guidance for processing civilian employees who have family members with special medical and/or educational needs for an overseas assignment.

<u>DOD Instruction 6060.02, "Child Development Programs (CDPs)," Aug. 5, 2014</u> updates established policy, assigns responsibilities and prescribes procedures for providing care to minor children (birth through age 12 years) of individuals who are eligible for care in DOD child development programs.

<u>DOD Instruction 6060.04, "DOD Youth Services (YS) Policy," Dec 4, 2019</u> establishes policy, assigns responsibilities and provides direction for the establishment and maintenance of DOD youth services.

<u>DOD Instruction 1342.22, "Military Family Readiness," August 5, 2021</u> establishes policy, assigns responsibilities and establishes procedures for the provision of military family readiness services. It also sets requirements for financial education and counseling, relocation assistance, family readiness in the reserve components and emergency family assistance.



CHAPTER 2

Family Support: Managing the Program and Understanding Your Role

Roles and Responsibilities

Family Support services provide information and referrals for families as well as nonclinical case management services. Understanding the various driving forces and major influences that impact your organization and the planning process is important. The specific needs of your installation population will further define the services and supports your program should provide.

The provision of Family Support services involves a number of functions and activities. As you provide Family Support services, you may find your role and responsibilities are divided between program implementation, program development, community outreach and family support:

Program | Program | Community | Family | Support | Support

Program Implementation

- Provide overall program administration, resourcing, reporting and outreach.
- Brief family readiness staff and others upon request.
- Represent EFMP at installation coordinating committees.
- Manage Family Support records in accordance with DOD and service policies.
- Forward Family Support records to the appropriate EFMP personnel when transitions occur.
- Collect and analyze data for planning, reporting and program improvement.
- Ensure all designated reports are submitted to service headquarters as required.

Program Development

- Remain informed regarding recent research and policies.
- Monitor, evaluate and enhance program services to meet the needs of families.

Community Outreach

- Develop partnerships with military and civilian agencies and offices (local, state and national).
- Improve program awareness.
- · Provide information updates to families.
- Host and/or participate in EFMP family events.

Family Support

- Implement policies, procedures and practices that connect families to support services.
- Partner with families to increase resilience, develop self-advocacy skills and improve their ability to navigate systems effectively.
- Provide families with current information and assist families in connecting to resources.
- Provide one-on-one support to each family's unique situation at the installation and during times
 of PCS transition.

Self-Service/Virtual Family Support

- Provide virtual events for families who are unable to attend in person or for geographically separated units.
- Empower families to utilize self-service tools such as <u>EFMP & Me</u>, <u>EFMP special needs</u>
 consultations, <u>MilLife Learning EFMP courses</u> and the <u>Office of Special Needs EFMP</u>
 podcast series.

Installation Demographics

The demographics of an installation have a direct impact on the level and types of support needed. Improve effectiveness by becoming familiar with the following on your installation:

- Average rank/rate or age of active-duty personnel
- Number of reservists in your local community
- Number of active-duty service members who are deployed
- Number of members enrolled in EFMP on and off the installation by medical and educational needs
- Approximate number of other DOD members located in the area who are eligible for installation services
- Groups that may require additional assistance
- Multicultural families
- Dual-military couples, working spouses or single-parent service members

Protect confidentiality when sending email from a distribution list by ensuring contact information is kept hidden.

Reaching Families

Many families are unaware of the assistance that EFMP Family Support provides. Reach out to families by hosting briefings, workshops or events on and off the installation. Now with virtual events, your events can reach those living off the installation, those at geographically separated units, members of the Guard and reserve, recruiters and others geographically separated from the installation.

Use installation-specific distribution lists and social media to quickly share newsletters, information and other social media sites such as Military OneSource.

Command and Installation Support

Sharing program information with installation or unit commanders, family centers, military treatment facilities and schools enhances opportunities to reach families. Service members are much more likely to participate in programs supported by their command or by those in leadership roles. Use the following strategies to reach service members directly at the unit level:

- · Provide short articles for unit newsletters or websites.
- Coordinate with family readiness officers, key spouses, school liaisons or support organizations.
- · Participate in family day events.
- · Attend deployment and reunion briefs.

Collaboration and Partnerships

Working with others is often the most effective means of addressing complex needs. Helping families navigate military and civilian support systems requires close working relationships with installation and community organizations.

Families with intensive needs may have multiple case managers such as through TRICARE, home health care agencies, community service boards or schools. Discuss with the family if they would like you to coordinate with these other professionals. Work with these providers to clarify roles and responsibilities. This will allow you to avoid duplicating efforts while working efficiently with available resources. Discuss with the family and your supervisor what case information can be shared.

Remain in regular contact to learn about service updates and share information about new EFMP offerings or supports. Educate leaders, providers and families about easily accessible Family Support information and resources such as the EFMP & Me self-service digital tool and the Office of Special Needs EFMP podcast series on Military OneSource. Follow up with families who are referred to another program or service to verify that their needs are being met. You can also refer them to a Military OneSource special needs consultant if you feel it might assist the family.

Installation Committee Participation

You will have the opportunity to represent EFMP and the needs of families at a variety of installation-wide meetings. Participation in these types of committees allows for greater coordination and collaboration in accessing quality support services. Participation also promotes creativity in problem solving and allows participants to share ideas to overcome challenges.

Your supervisor is there to assist you. It is your responsibility to alert your supervisor of any issues that may require their attention or action.

Program Awareness and Marketing

Ongoing marketing is an important aspect for the success of your program. The goal is threefold: Raise awareness of the program, identify family needs and highlight available support services. This will result in an improved perception of EFMP and potentially an increase in enrollment. Use this opportunity to dispel common myths about EFMP and encourage the use of Family Support services, regardless of enrollment status. Learn more about common myths and EFMP FAQs in Chapter 10.

Quality Assurance

A comprehensive quality assurance plan measures outcomes to demonstrate if program objectives are met. It involves systematic monitoring and evaluation of families' access to, and the appropriateness of, care and services. It also monitors satisfaction with the services. A QA plan helps identify concerns and provides an opportunity to improve care, service and program performance.

Internal certification or accreditation reviews are conducted to ensure they are operating within existing regulations. Check with your supervisor to find out what inspections, certifications or accreditations affect your Family Support program. It also encourages program excellence through continuous program improvement. This process provides an external, objective process to assess whether military family support centers meet accepted standards for organizational strength and quality of service. Refer to your family center's QA plan for more information.

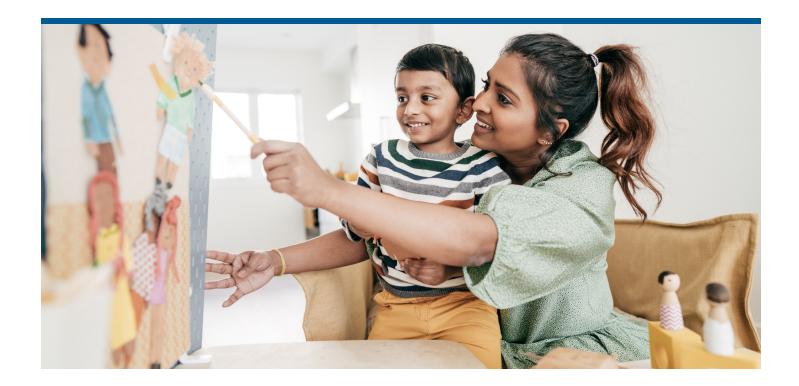
Promotional materials, such as eNewsletters, articles, fact sheets, other print materials, briefings and presentations, are available for download on Military OneSource at http://www.militaryonesource.mil/service-providers/efmp.

Key Messages for Family Support

Key messaging is the use of consistent language in all briefs, marketing materials and other publications. Use the following key messages as talking points:

- The Defense Department Office of Special Needs is committed to helping families with special needs thrive in military life.
- 2 EFMP is a system of support for military families with special needs, including identification and enrollment, assignment coordination and family support.
- 3 EFMP Family Support serves each service member by ensuring their family member's special needs are considered.
- 4 EFMP plays a vital role in the readiness of our families with special needs.
- EFMP listens to families and consistently looks for ways to enhance the overall program and experience.
- 6 For active-duty service members with a family member with special needs, enrollment is mandatory.
- FFMP helps make sure the special medical and educational needs of military families with special needs are considered during the assignment process.
- While each service has its own mission and history with EFMP, the Defense Department is creating more standardization across services to make it easier for families to access important resources.

Sharing Military OneSource documents and key messaging from OSN can help provide a standardized message, dispelling myths and avoiding confusion for families. Take advantage of social media toolkits, branding toolkits and more to help with consistency.



CHAPTER 3

Fundamentals of Working With Families

Hallmarks of the Helping Professional

Establish an atmosphere that is welcoming and puts families at ease. Have an inviting and comfortable place to meet families that also offers privacy to protect confidentiality.

When meeting with families, be sure to maintain the positive traits of the helping professional as identified in Figure 3:1.

FIGURE 3:1 Attributes of the Helping Professional

Attributes of the Helping Professional

- Empowering
- Objective
- Accepting
- Nonjudgmental

- Emotionally mature
- Empathetic
- Unbiased



Communication Skills

Verbal and nonverbal communication set the tone for every interaction and is an essential piece of building rapport. This section outlines the use of positive verbal and nonverbal communication skills when working with families.

Active Listening

Regardless of the audience, active listening is critical for successful communication. Consider the following active listening tips when working with families:

- Prepare to be completely focused on the family or individual. Turn off your
 cellphone and computer monitor. Each family member needs to know they are valued
 and that each meeting is important to you. You will have difficulty expressing your
 sincerity if you are distracted by your surroundings.
- If it's easier for you to process things visually, ask the family or individual if it's
 OK if you take notes during the conversation so that you don't miss any
 important topics discussed. But remember, this is not the time for "intake" or a
 fill-in-the-blank questionnaire.
- Observe nonverbal behavior and body language. Body language can indicate what someone is feeling or thinking.
- Listen for and use vocal cues. Vocal cues include such things as pitch, tone, speed of speaking and volume. Each influences perceptions. For example, listeners tend to perceive speakers who have variety in their pitch as having a more positive personality and speakers who have more consistent low pitches as being more dominant. Signal cues such as "Mm-hmmm," "Uh-huh," "Ah," and "Umm," and brief comments such as "Oh," "I see," and "Yes," encourage people to continue speaking.
- Mirror statements. Mirroring refers to rephrasing ideas in similar words and then
 repeating them back. Mirroring statements include "What I hear you saying is ..."
 or "You would like to."
- Ask open-ended questions. Try to ask questions that require more than a one-word answer. For example, "What information have you already gathered?" garners a more in-depth response than, "Have you gathered information?"
- Validate responses. When a family member shares an opinion or comment, offer encouragement and support.

Body Positioning

The position of a person's body during an interaction can indicate the person's level of comfort and emotional state. It is a form of nonverbal communication to consider when speaking with families.

- **Body orientation.** This refers to the degree to which the shoulders and legs are turned toward or away from another person. Facing an individual conveys empathy and interest. Turning away from a person indicates a sense of separation.
- Body positions. Use open body positions when working with families. Open body
 positions include elbows away from the body, hands not touching and uncrossed legs.
 Crossed arms would be an example of a closed body position. An individual's body
 position can be an indicator of comfort level or feelings about the interaction.
- **Gestures.** The motion of the hands or body expresses a lot about a person's thoughts and feelings.
- Self-conscious or nervous behaviors include fidgeting, touching hair and nail biting.
 Drumming fingers conveys that the listener is bored or losing patience, while still hands convey warmth and interest.
- **Head movements.** Frequent head nods encourage an individual to share more and suggest that you are empathetic and understanding.
- Office layout. Check with your supervisor if there is guidance about your office layout and how it should be arranged. Some military family support centers may have guidance about the office setup, such as not having the desk as a "divider" between the family support provider and the family.

Addressing individuals with their preferred name demonstrates professionalism and supports a person-centered approach. Avoid the use of pet names, such as sweetie, honey or dear or using a name other than how they introduce themselves (i.e. the member introduces himself as Tony but his legal name is Antonio.)

Positive/Negative Approaches to Communication

The following table provides examples of positive and negative communication techniques to consider while meeting with families.

FIGURE 3:2 Communication Approaches

Preferred Communication Approaches	Nonproductive Communication Approaches
Asking open-ended questions	Asking questions requiring a one-word answer
Probing for more information and problem-solving together	Declining to gather more details or disregarding the thoughts and opinions of family member
Making eye contact, leaning toward the other person, giving full attention	Being distracted or using other body language that suggests lack of interest or attention
Showing empathy, validating the other person's feelings, displaying empathy or using phrases such as "This must be hard for you," "Sounds like you are puzzled about what's going on," or "It's difficult to talk about"	Using inappropriate feeling phrases such as "You shouldn't think that," "That's silly," "Come on, it's not that bad," "I didn't see it, so it's hard for me to believe it," or "Just buck up and you'll be fine"
Active listening	Comparing their experience to the experiences of other families
Withholding judgment	Interrupting
Avoid preconceptions or implicit bias	Lecturing or moralizing
Using "Yes and" statements	Using "Yes but" statements
Normalizing the experience by using statements like "What you're experiencing is not uncommon," "You are not alone in your experience"	Monopolizing conversation by sharing personal experiences

Professional Boundaries

Professional boundaries establish the tone of your relationship with a family receiving services and improve credibility. They allow for safe and appropriate interactions between providers and the families they support. Professional boundaries include scheduling appointments within reasonable working hours, limiting the length of meetings, minimizing self-disclosure and having your personal space respected. Consult your supervisor if you have questions regarding maintaining professional relationships, as failing to maintain professional boundaries can lead to disciplinary action, dismissal or legal action and may damage program credibility.

Challenging Situations

- While most interactions with families will be positive, there may be times when
 interactions may become difficult. Always be aware of your personal safety while working
 with families.
- Set limits for what behaviors you are willing to tolerate. If an individual becomes increasingly agitated, consider using the following de-escalation strategies:
- Make eye contact and suspend other activities. Let the person know they have your attention.
- Validate each person's feelings. Try to understand their concerns and demonstrate empathy.
- Discuss concerns using facts, not feelings. Try to capture any differences in perspective.
- Speak softly and respectfully. Lowering your volume often influences the other person to mirror your actions and speak more softly.
- Let the individual know that you want to help solve the problem or issue. Be clear. For example, you can say, "Let's work together to solve this issue," "I want to help you work this out," or "Let's see if we can find a solution."
- · Keep the focus on problem-solving.

If your attempts to de-escalate the situation fail or if you feel threatened at any time during the interaction, it is appropriate to end the meeting. Do so in a respectful manner and suggest rescheduling the meeting for a later time.

Familiarize yourself with your program's safety standard operating procedures and consult your supervisor if you have any questions or concerns.

Some individuals have varying comfort levels regarding physical contact. Simple touches meant to convey sympathy or empathy, like a hand on the back or patting someone's arm, may not be appropriate for this situation. Minimize unnecessary physical contact with families to avoid adding stress to the meeting.

Self-Disclosure

Self-disclosure is the intentional or unintentional sharing of personal information. When introduced appropriately, self-disclosure can play an important role in developing credible relationships with families.

Unintentional self-disclosure could be as simple as leaving a photo of your family member with special medical and/or educational needs on your desk. Intentional disclosure could involve sharing personal experiences regarding other programs or sharing information about your own family. Before sharing personal information consider your motives: Is this information beneficial to the family receiving services, or is it meeting a personal need of your own?

Compassion Fatigue

Compassion fatigue is a form of burnout. It manifests itself as physical, emotional or spiritual exhaustion and can be a consequence of being a support provider or a caretaker. In this situation, providers often find it difficult to maintain a healthy balance between their personal needs and their dedication in caring for others. Educate yourself and the families you consult about the signs of compassion fatigue. Seek professional help if you begin to feel overwhelmed and encourage overwhelmed families to do the same. Connect them with support groups in the local community. Although symptoms may vary, the red flags noted in Figure 3:3 may be indicators of compassion fatigue. For more information, review the Military OneSource website for compassion fatigue webinars, training and podcasts at https://www.militaryonesource.mil/training-resources/webinars/.

FIGURE 3:3 Symptoms of Compassion Fatigue

Symptoms of Compassion Fatigue



- Anger
- Hopelessness
- Blaming habits
- Chronic lateness
- Increased irritability
- Depression
- Decreased ability to feel joy
- Diminished sense of personal accomplishment

- Inability to maintain balance of empathy and objectivity
- Low self-esteem
- Physical ailments
- Abuse of drugs, alcohol or food
- High self-expectations

Symptoms of Compassion Fatigue

Consider the following to prevent and alleviate compassion fatigue:

- Be aware of and accept the limitations of the family, your job and yourself to solve serious problems.
- Develop relationships with others who provide similar types of services to create outlets for relieving stress.
- Set priorities by organizing daily tasks and responsibilities.
- Take small breaks during the day.
- Remind yourself that your role is to provide information and support and not to solve every problem.
- Be honest with yourself. Ask for help or take a break when you are not in a position to provide effective support.

Gift Giving and Receiving

Government employees must adhere to certain standards of conduct and ethics. You cannot accept gifts beyond simple cards or thank-you notes from families you serve. Giving or receiving gifts can negatively affect relationships and blur professional boundaries. Consult your supervisor or installation standard operating procedure regarding restrictions on gift giving and receiving.

DOD Directive 5500.07

contains the standards of conduct and ethics guidelines for government employees.

Dual or Overlapping Relationships

Dual relationships exist when you hold a secondary significant relationship with one of the families you serve (for example, an authority relationship, such as a supervisor, or an emotional relationship, such as a relative or friend). Dual relationships present an inherent risk of power imbalance in the relationship, which can damage a family's trust or comfort level with you.

Overlapping relationships exist when a provider has contact but no significant secondary relationship with the family. These often exist in small communities, such as churches, the service member's unit, schools, fitness centers, military treatment facilities or within military housing. If you run into a family outside of the workplace and they start a discussion about their unique needs, let them know you care and want to assist. But tell them you can give your full focus and stay on top of things better if you keep those conversations for business hours. Then see if you can arrange a time to meet.

Avoiding dual or overlapping relationships may not always be possible. Assess each situation on a case-by-case basis to determine whether the relationship will affect your ability to provide objective services. Consult your supervisor if questions arise.

Service Accessibility

Make every effort to identify and implement strategies that foster positive relationships with all families. For example, some may speak English as a second language, and others may have religious or cultural beliefs that affect their participation in the process. Individuals with visual or hearing impairments may need accommodations to facilitate effective communication. Whatever the issue, remain nonjudgmental and avoid making assumptions.

Language

When a family member speaks another language, it may be necessary to locate an interpreter. With the individual's permission, attempt to identify a coworker who may be proficient in that language. The interpreter must sign a privacy statement approved by your military service. Be sure to include your actions in the case notes, along with the interpreter's contact information.

Visual and Hearing Impairment

Plan ahead for a family member who has a visual or hearing impairment that may influence meeting effectiveness. The DOD Computer/Electronics Accommodations Program is a reasonable accommodation program for DOD employees and wounded service members with disabilities. The CAP also supports DOD programs serving deaf, hearing or visually impaired individuals by providing face-to-face communication tools. Contact a program consultant if you are serving a family member who is deaf or hearing or visually impaired. The equipment they provide is free of charge, but must remain in the center for all programs to use.

Maintain objectivity regardless of age, education, gender, rank, ability, temperament, disability and ethnicity. Provide the same quality support and services to all families.

Overcoming Stigma

The DOD is structured to encourage service members to be self-sufficient and capable of managing the welfare of their families. While the military has made great strides in reducing any stigma, some service members and their families may be hesitant to seek support services. Building trust allows families to access needed services, gain control over their own lives, build resiliency and support the military mission.

Empowering Families

One of your primary responsibilities is empowering families to interact with support agencies. Families should become familiar with <u>advocacy</u>, entitlements, <u>military benefits</u>, respite care and available resources. Figure 3:4 lists techniques that you can use to help empower families. Remember that you are not the gatekeeper to information, merely the bridge. Educating families on how to access the abundance of resources available, such as <u>EFMP & Me</u>, articles, <u>podcasts</u>, <u>online learning courses</u>, <u>e-newsletters</u>, and <u>Military OneSource special needs consultation services</u> will empower families to be best informed to advocate for themselves.

Tips for Empowering Families

- Acknowledge that the situation is difficult.
- · Discuss their options.
- Identify the family's strengths and accomplishments.
- Facilitate decisions and help formulate a plan.
- · Remind them that they are not alone.
- Follow up after a reasonable time period.
- Educate families on how to access the resources available to them.

Resilience

Resilience is the ability to withstand, overcome and adapt to an immediate crisis or an ongoing challenge in positive ways. It means that the individual is able to recover and grow stronger from the experience.

These challenges can vary in degree and frequency – some are discrete events while others are continuous. Everyone responds to challenges and stressors differently.

Families may be so overwhelmed at the thought of navigating the vast network of services that they lose sight of their own strengths. Resilient families understand the critical role each family member plays in promoting health and happiness. Work with family members to identify core strengths and build upon them to improve resiliency.

In addition, provide appropriate information to help each family make informed choices and navigate the systems that improve quality of life. These actions provide families the tools to resolve issues in the future.

Virtual resources and tools are also available to assist families in a variety of situations including financial counseling, military tax services, spouse education and employment, health and wellness coaching, non-medical counseling, access to wellness apps and more.

Cultural Competency

Service members and military families have varied cultural backgrounds. Culture extends beyond ethnic background and can include a multitude of identity markers such as nationality, race, gender identity, faith, language, community or belief system. To provide quality services, it is important to be sensitive to cultural norms and avoid implicit bias. Cultural competency is a highly valued skill that will enable you to connect with, respond to and interact effectively with families.



FIGURE 3:10 Applying Cultural Competency

Examples of cultural competency:

- Being aware of your values, stereotypes and biases regarding your own and others' ethnicity and social class
- Acknowledging culture as a significant force in shaping people's behaviors, beliefs and values
- Accepting that cultural differences exist and have an impact on interactions among people
- Understanding other cultures and developing skills to effectively communicate with diverse groups respecting the unique, culturally defined needs and behaviors of various populations
- Demonstrating an appreciation that diversity enriches our world
- Believing that diversity within cultures is as important as diversity between cultures

Ways to develop cultural competency:

- Interacting and developing relationships with people of different cultural backgrounds
- Talking with supervisors and coworkers to learn from their experiences
- Attending and participating in a variety of cultural events
- Reading materials on cultural competence
- Attending training sessions that focus on cultural competence



Military Culture

Within the military community, each service also has its own culture. You will find that each service has its own language, customs, traditions, uniforms and rank insignias. It is important to understand these differences. For example, the rank of captain in the Navy is an O6 in grade, whereas a captain in the Marine Corps and the Air Force is an O3 in grade. Seek resources through your family center to learn more about the military culture and attend courses for civilian employees if available on your installation.

It is also important to familiarize yourself with the various programs and services available to military families. Take time to learn about the services offered through your installation's military and family support center and about other services provided at the installation such as the commissary, DOD school programs, religious programs, spouse organizations and housing. You can also learn more about these programs at MilLife Learning.

Essentials in the Military Culture



Mission. The mission of each service and installation drives its decision-making processes. Family center programs are designed to contribute positively to the mission and support personnel readiness. This allows service members to focus on mission obligations without having to worry about the welfare of the member's family.



Chain of Command. All of the services use a chain of command to communicate. This is a formal system in which authority passes down from the top through a series of executive positions or military ranks to disseminate information and to make decisions. Each member of the chain of command is accountable to the member directly above them in the chain. This long-established process maintains a flow of communication and ensures that all relevant individuals are aware of key decisions and actions taken.



CHAPTER 4

Documentation and Non-Clinical Case Management

Information and Referral

Individual and family needs exist on a continuum. Most families will require only information and referral to programs or services. Other families will need additional support while obtaining information and accessing programs or services. The more involved the needs of the family, the more direct support and assistance the family will need while navigating multiple systems coordination and service planning.

Your primary role is to gather and maintain a resource library, supply information about agencies and organizations that offer needed services, and link families to the appropriate resource providers.

Information and referral means any of the following:

- Helping families determine which community resources are appropriate to meet their needs
- Offering relevant information
- Gathering feedback from families on resource effectiveness

Non-Clinical Case Management

In some instances, families may have many questions or be faced with a complex situation and information and referral just won't do.

If it is determined that the family needs more support, non-clinical case management may be the appropriate choice. This is a collaborative process with the family that begins with a needs assessment and development of goals and objectives (services plan). Non-clinical case management differs from information and referral in that you will provide more support and assistance such as:

- Helping the family to identify their priorities so that they aren't overwhelmed tackling everything at once
- Assisting families in effectively accessing identified resources
- Following up to verify that the family has connected with support services
- Following up to find out whether the resource is helpful for the family
- Contacting the family to "check in"
- Gathering feedback from families on resource effectiveness

Non-clinical case management involves the provision of information and referrals to families and the individuals who assist them in making informed decisions and navigating resources. The goal of non-clinical case management is to improve the family's quality of life. This does not involve coordination and follow-up of medical treatments.

Assessment

Understanding the needs of the individual and the family is the first step in supporting families. Doing so establishes the nature and extent of support the family will require.

The assessment process will also help you consider the family holistically. Be sure to not only consider the needs of the family member with special needs but also the other family members and the active-duty member as well. The <u>family needs assessment</u> takes into account the family's resources and strengths, including formal and informal supports, which can be used to inform service planning. Depending on the needs of the family, the process may take several appointments in person or over the phone to gather all necessary information. Please see the <u>standardized DD Form 3054 Family Needs Assessment</u> and service plan form in the Appendix. <u>Training on the use of the form is located on the MilLife Learning site</u>, and a Helpful Hints document is available through <u>EFMP & Me</u> in the Service Providers section.

During the assessment, identify the following:

- The reason the family is requesting support
- Actions the family has taken and/or services they received to address their concerns
- Outcomes of those actions
- Additional needs the family may have
- Next steps

Services Plan

The National Defense Authorization Act for fiscal year 2010 directed the DOD to establish "requirements regarding the development and continuous updating of an individualized services plan for each military family with special needs." The NDAA also required "record keeping, reporting and continuous monitoring of available resources and family needs under the individualized services support plans for military families with special needs." The NDAA for fiscal year 2021 further clarifies "Procedures for the development of an individualized services plan for military family members with special needs who have requested family support services and have a completed family needs assessment."

A services plan is based on an assessment of the family's and/or individual's identified needs. Families and individuals who actively develop and endorse their own plan may be more motivated to be involved in advocating for their needs and guiding changes in their lives. The goal is to empower families and foster independence. Providing the necessary tools can help families reach desired goals without extensive support and therefore enhance their quality of life.

If a determination is made that a services plan is appropriate, work with the family to develop a plan based on the information obtained from the needs assessment. The plan should be strengths-based and family centered. The goals, linked to family needs, are selected by the family with you helping to clarify, distill and write them based upon the desires of the family. Both goals and strategies must be reasonable and manageable.

A copy of the DD3054 Family Needs Assessment is included in the Appendix. This document includes the services plan. The services plan form includes the following key information:

- Desired goals, including services or information the family is requesting
- Strategies or outlined steps to achieving desired goals
- Relevant points of contact
- Agreed-upon frequency of follow-up contact
- · Dates and a brief description of services that the family has received

The services plan documents goals the family has set and tracks their progress in meeting their goals. It acts as a reference point in locating supports and services.

Document follow-up contacts with the family to establish whether they feel their needs are being met. Regularly refer to your case notes to document and track progress toward meeting the goals of the services plan.

Family Feedback

EFMP Family Support is constantly evolving to incorporate best practices and enhance the services provided to families. After your interaction with a family, provide them with the information to access the <u>Family Support Feedback Tool</u>. Families will be able to provide anonymous feedback about their experience and will contribute to the oversight and enhancements to the Family Support program. The information provided is confidential and is delivered straight to OSN.

Contact Notes

Document all contacts and all collateral contacts you make on behalf of the family. A sample contact note form is included in the Appendix. <u>Training on completing quality case notes</u> is available on MilLife Learning.

Contact notes should include the following information:

- Date, time and type of contact
- Steps taken or to be taken by you or the family
- Reason for the contact and, if applicable, the services-plan goal
- Agreed upon follow-up time or frequency
- Status of concerns (for example, ongoing or resolved)

Keeping accurate and timely contact notes will assist in the following:

- Monitoring and coordinating information and referral and non-clinical case management services
- Tracking the flow of events and outcomes
- Tracking follow-up with the family and other programs
- Verifying provision of services
- Maintaining focus on goals
- Identifying emerging or changing needs
- Tracking time and the level of service you are providing
- Remember that others will read your notes.

Contact Note Tips

- Complete case notes in a timely manner.
- Be clear, objective, factual and non-emotional.
- Annotate items that still need to be accomplished and follow through.
- Review notes for clarity.
- Use positive, unbiased language.
- Refrain from posting private health information.

Privacy and Disclosure

The <u>Privacy Act of 1974</u> safeguards individuals against the invasion of personal privacy and allows individuals access to relevant government records. Personal information shared by families will be kept private. Unless you have a signed consent form from the individual or the legal guardian, information should only be disclosed on a "need to know" basis and in compliance with installation policies and standard operating procedures. Families should be aware that situations involving domestic abuse, known or suspected child abuse and neglect, thoughts of harm to self or others and illegal activity must be reported. Check with your supervisor regarding the reporting process for your installation.

In explaining the Privacy Act to families, you must make clear circumstances under which reporting is mandatory. For further guidance on Privacy Act issues, consult your supervisor.

Records Management

Proper management of records includes protecting family records and ensuring confidentiality. Consider the following guidelines when maintaining installation records.

Paper Records

- Paper records should not be carried off site unless absolutely necessary and then only
 with the permission of your supervisor or from the family center director for official
 business use.
- Records should be stored in a secured environment when not in use. They should not be left unattended in a public environment.
- Ensure the record is not in open view and that the content cannot be read by others.
- Use DD Form 2923, Privacy Act Data Cover Sheet, with all paper records when in use.
- Paper records must be disposed of according to each military service's records disposition schedule.

Computer and Electronic Records

- Never leave a computer or electronic record unattended in a public environment.
- Computer access should always be password protected.
- Regularly change passwords to EFMP case files.
- · Position computer monitors for privacy.
- Remove your Common Access Card when you leave your computer.

Requests for Release of Records

EFMP Family Support providers have a duty to maintain the privacy of personal information. Keep in mind that you may face unique situations regarding privacy if you are working with a family member who is over the age of majority. From time to time family members may request copies of information from their own records. Such requests should be handled in accordance with the Privacy Act and individual military service's systems' notices. Family members should initiate a request per military service/installation guidelines. Check your local guidance and contact the local releasing authority, usually the installation legal assistance office, for further guidance.

Internal Case Review

The family case file contains invaluable information that demonstrates the progress the family has made while participating in EFMP Family Support. Internal case reviews provide an opportunity to assess what has and has not worked for the family. Reviewing records internally ensures complete and timely documentation and appropriateness of the services plan based on the family's needs and desires. Internal case reviews should be conducted by the losing EFMP prior to relocation, by the gaining EFMP upon arrival, and at regularly scheduled intervals for families who receive continuing support services.

Record Transfers

Coordination of services for the relocating family is imperative. A warm handoff and proper transfer of records help to minimize interruption to the family's continuum of services during relocation. Your service headquarters provides guidance regarding the transfer of records when a family relocates. If a family is transferring to or from a sister military service and they would like a warm handoff, you may fill out the Inter-Services Transfer Summary to send to the gaining installation EFMP Family Support office. This summarizes the EFMP Family Support services utilized

A warm handoff from the losing to the gaining EFMP Family Support office helps connect families to community supports or services at the new location.

at the losing installation and can provide information and continuity of care for families PCSing. It is an addendum to the DD3054 Family Needs Assessment found in the Appendix.



CHAPTER 5

Legal Issues

Please be advised that the information in this chapter is not intended as legal advice. Laws change, and we cannot guarantee the timeliness of information presented. If you have any questions about how the law applies to a specific situation, consult your legal assistance office.

Installation Legal Office

The installation legal assistance office provides a <u>wide range of free services</u> subject to availability of resources and the expertise of the legal assistance attorneys. Each branch of service offers information and referral regarding special education law, whether at the installation, regional or headquarters level. Be aware of which legal points of contact are trained in special education law and how to refer families to them. Contact the legal assistance office on your installation for advice, information or referral regarding the following topics:

- · Wills, testamentary trusts, advance medical directives, living wills and estate planning
- Domestic relations to include divorce, legal separation, marriage annulments, child custody and paternity cases
- · Adoption and legal name changes
- · Notarization of documents

- Financial nonsupport and indebtedness issues
- Immigration and naturalization issues
- Basic tax advice and assistance on federal, state and local taxes
- Landlord-tenant contracts and lease reviews
- Civil suits, to include preparation of legal correspondence, documents, and, in limited cases, preparation of pleadings
- Service members' rights and responsibilities under the <u>Servicemembers Civil Relief Act</u>
- Protections for military families under the Military Lending Act
- General advice on misdemeanor criminal matters or traffic offenses
- Information and referrals for concerns with special education laws

A <u>family care plan</u> is a mandatory document that outlines care for family members in the absence of the service member due to mission requirements, such as deployment or training. The plan describes the legal, medical, logistical, educational, monetary and religious arrangements for <u>family members' care</u> and includes certain legal documents (for example, a <u>power of attorney</u> or a <u>will</u>). Refer to <u>Department of Defense Instruction 1342.19, May 7, 2010, Family Care Plans, for additional information regarding family care plans.</u>

Family care plans are required for all service members who are:

- Single parents
- Dual-member couples with dependents
- Married service members with custody or joint custody of a child whose non-biological or adoptive parent is not the current spouse of the service member
- Service members who are primarily responsible for dependent family members

Each service has its own regulations regarding family care plans. Family care plans are particularly important for those families with special medical and/or educational needs.

Additional Legal Resources

Listen to the Season One Office of Special Needs EFMP podcast episodes four and five for Legal and Long-Term Financial Planning to get information on preparing financially and legally for the future and also learn more about guardianship, conservatorship and long-term planning. Visit EFMP & Me to find additional information for service providers and military family members. The Office of Financial Readiness Estate Planning page discusses estate planning, planning for the future and more.

Letter of Intent

Although not legally binding, a letter of intent allows family members to provide written instruction to the person caring for and making decisions for the individual with special medical and/or educational needs.

These letters become critically important in the absence, incapacitation or death of family members who usually provide that care. Guardians may appreciate your help in constructing a letter of intent. The letter can include relevant background information for the person with the disability, medical information and educational needs, as well as more informal information such as favorite activities, foods and friends. It can also address any plans a family has made for future living arrangements. Families can download a variety of organizational templates called Special Care Organizational Records, or SCORs, for children, young adults or adults with special needs that can be used to supplement your letter of intent.

Estate Planning

Estate planning is the strategy used to direct property to the appropriate beneficiaries, diminish tax liability and other costs, and to arrange for property management and disposition in the event of physical disability, mental disability or death. Families can arrange for estate planning by using a combination of legal instruments and documents.

Will

<u>A will</u> is the most significant instrument used in estate planning. If a person dies without a properly executed will, a probate or trial court may appoint an administrator of the estate and require distribution of property in accordance with state laws.

A will is indispensable in estate planning, as it provides control over what happens to the person's children and property. A will allows the person to nominate a legal guardian for their minor children and to name an executor to handle the distribution of the estate to designated beneficiaries. The requirements for a legally valid will vary from state to state. The testator, or person making the will, must take the formal, legal step of executing the will after it has been drafted.

You should encourage families to consult an attorney to ensure that a will is executed properly and in compliance with state laws. If the will is not properly executed, it may not be honored by the probate court.

Advance Health Care Directive

An <u>advance health care directive</u> provides instruction regarding health care should a person become unable to make decisions on his or her own. This directive can be revoked only by a court. The most common types of advance health care directives are powers of attorney for health care and living wills.

Power of Attorney for Health Care

A <u>power of attorney</u> for health care is a written legal document through which a person with capacity names another individual to make health care decisions on their behalf. The named person must follow any instructions or wishes expressed by the individual. The named person

must also take the individual's personal values into consideration when making decisions. Any decisions made by the individual with power of attorney for health care take precedence over those of a quardian unless the court orders otherwise.

Living Will

A living will is a set of written instructions that explain a person's wishes regarding end-of-life decisions in the event that person becomes terminally ill and unable to communicate with their doctor.

Survivor Benefit Plan

Surviving spouses and/or children of retirees may be entitled to <u>Survivor Benefit Plan</u> payments. The maximum SBP payments are equal to 55% of what a member's retirement pay would have been had they retired at 100% disability. The SBP payments are annuities typically distributed to the surviving spouse. If the spouse is deceased, the annuities are equally divided among the children.

In 2015, Congress amended Survivor Benefit Plan laws. This amendment gave military members and retirees the option to direct payment of an SBP annuity for a dependent and disabled child to a special needs trust.

It is important that parents examine their child's needs and how any additional income may impact them with and without a trust. There are attorneys who specialize in this area and are qualified to assist in exploring options.

The SBP payments are subject to federal income taxes. Persons receiving an SBP annuity may wish to visit their installation legal office for tax assistance.

Decision making regarding survivor benefit plans may be time sensitive, so encourage families to contact a transition assistance counselor. If families are considering this decision, they should keep in mind that once made, the election to make payment to a special needs trust on behalf of a Survivor Benefit Plan beneficiary is irrevocable. Legal assistance can provide families with the information they need to make an informed decision.

Special Needs Trusts

Special needs trusts are discretionary trusts created for people with disabilities for the purpose of supplementing public benefits. They allow a disabled individual to continue to receive Supplemental Security Income, Medicaid and assistance from other public programs while benefiting from trust fund money.

The trust can hold cash, stocks and property, as well as money received from life insurance policies, personal injury settlements, judgments or other family's or friends' generosity, such as a gift.

It is important to have a trust set up in advance to cover any needs that may occur in the future. If the funds go straight to the individual, these funds may be subject to repayment or recovery by the source of public benefits. A trust has no financial limitations; it can be as small or as large as needed.

The funds in the trust can be used for supplemental and extra care over and above what the government provides, such as special wheelchairs and accessible vans, televisions, DVDs, musical equipment, daily activity programs, computers and vacations, if government benefits are not available or will not cover an item required for the person with a disability.

Funds from a trust do not cover daily living expenses, such as utilities, food, taxes and insurance on the individual's residence.

The installation legal assistance office or Military OneSource can provide a list of attorneys who are qualified to handle special needs trusts.

Guardianship and Conservatorship for Incapacitated Adults

Establishing a guardianship and/or conservatorship can be a critical part of estate planning. There is a presumption that adults have the capacity to manage their own personal and financial affairs. When this is not the case, most states allow for the adult's decisions to be made by a quardian or conservator.

Guardianships and conservatorships are intended to protect and offer ongoing care for individuals unable to make or communicate responsible decisions. An illness or disability alone is not sufficient reason for guardianship or conservatorship. Individuals who have executed necessary documents while still capable may not require a guardian or conservator. Guardianship or conservatorship will be imposed only if the person is determined by a court to be incapacitated.

Although the definition of incapacity varies from state to state, it is generally specified that the person must be unable to make or communicate responsible decisions regarding their own person or property. In some states, an incapacitated person is defined as a person who is impaired by reason of mental illness, intellectual disability, physical illness or disability, chronic use of drugs, chronic intoxication or other cause. This impairment must be to the extent that they lack sufficient understanding or capacity to make or communicate reasonable decisions concerning themselves or their property.

A guardian makes decisions about the incapacitated person's life and well-being. If a conservator is not appointed, a guardian may have limited authority over the person's money and property. If the person owns real estate or has a substantial amount of money or property, the probate judge will generally appoint a conservator to make decisions regarding money and property. The same person can be both guardian and conservator or there may be a different person for each responsibility.

Depending on the circumstances, a guardianship or conservatorship may be defined as full, limited, partial or temporary. A guardianship or conservatorship defined as limited or partial restricts the powers of the guardian or conservator and allows the individual to retain more rights and freedom.

Obtaining guardianship or conservatorship is a very serious step that extensively restricts an individual's rights and freedom. It should be considered only after all other reasonable alternatives have been explored and exhausted. Additional details about permanent dependency can be found in Chapter 7.

Guardian Defined

A guardian is a person appointed by the court to make decisions on behalf of an individual the court has found to be incapacitated. The guardian has decision-making authority for all aspects of a person's life except those specifically excluded by other laws or the guardianship order.

The Duties and Powers of a Guardian

In many states, unless modified by the court, a guardian has most of the powers and duties that a parent has toward a minor child. The guardian, however, does not have to personally provide for the person and is not liable to third parties for acts of the person solely based on the guardianship relationship.

Although duties and responsibilities vary from state to state, there are some commonalities:

- The guardian has custody of the individual and can decide where the incapacitated person will live, either in or out of state.
- The guardian can put the incapacitated person in a hospital, nursing home, boarding home or other institution. The guardian is not allowed to commit the incapacitated person against their will to a mental health institution without going through the formal legal procedure for involuntary commitment.
- The guardian must see to the care, comfort and maintenance of the incapacitated person and, where appropriate, arrange for training and education.
- The guardian must take care of clothing, furniture, vehicles and other personal effects and commence protective proceedings if other property is in need of protection.
- The guardian does not have authority over the minor children of the incapacitated person unless the guardian files a separate petition to be appointed as the guardian of the person's minor children and is awarded the additional guardianship.

Guardianship or conservatorship may not be necessary if the individual executed necessary documents such as a living will, a power of attorney for health care, a durable financial power of attorney or a living trust while they had capacity.

Conservator Defined

A conservator, also called a guardian of the estate, is an individual, corporation or state agency appointed by the court to protect and manage the estate of a person the court has found to be incapacitated or otherwise unable to effectively manage the estate. A conservator will generally be appointed if the individual owns real estate or has a substantial amount of money or property. In some states, the judge must also determine that the individual has property that will be wasted if not appropriately managed or that funds need to be managed for the care, support and welfare of another person supported by the individual.

The Duties and Powers of a Conservator

The conservator is not legally obligated to use his or her own money or property for the care and support of the protected person.

Although duties and responsibilities vary from state to state, there are some commonalities:

- The conservator is usually required to use income and assets for the reasonable care and support of the protected person.
- The conservator is usually responsible for the accounting of those funds.
- The conservator may be required to spend money for the care and support of the
 protected person's dependents and/or for members of the protected person's household
 who are not legally dependent but are unable to support themselves and who are in need
 of support.
- The conservator is usually required to manage and invest excess property and money
 of the protected person so as to provide a reasonable return. Thus the conservator can
 usually make investments, buy and sell property and borrow money on behalf of the
 protected person.
- The conservator is usually empowered to employ people, including lawyers, accountants and investment advisors, to assist the conservator in his or her duties and pay for those services from the protected person's funds.
- The conservator is usually required by the court to provide an inventory of the estate of the protected person within a certain time of their appointment.

<u>Chapter 10: Relocation</u>, provides information on relocating when a guardianship or conservatorship is in place.

The Legal Process of Obtaining Guardianship or Conservatorship

Determining incapacity and obtaining guardianship or conservatorship is accomplished through the court system. The proposed or protected person has the right to attend the hearing, to have legal representation, to see and hear all of the evidence regarding their condition and to present evidence or cross-examine witnesses. The court may appoint an attorney if the individual contests any part of the proceeding or seeks to limit the power of the proposed guardian or conservator.

The incapacitated person should be encouraged to attend the incapacitation hearing and be involved to the fullest extent possible.

During the hearing, a judge determines whether a person meets criteria for incapacitation. At the end of the incapacitation hearing, the judge may enter a decision and name a guardian and/or conservator. The judge may also choose to review the evidence and issue a decision later.

Every state has its own legal process for determining incapacity and appointing a guardian or conservator. The major procedural steps followed in most states are as follow

- A petition is filed with the appropriate court located in the county or district where the incapacitated person resides.
 - The court notifies the relatives of the incapacitated person that a petition has been filed.
- The court appoints a court visitor/investigator and a guardian ad litem to represent the incapacitated person.
- A hearing is held and a judge determines whether the individual is incapacitated.
- The court appoints a guardian and/or conservator or denies the request.

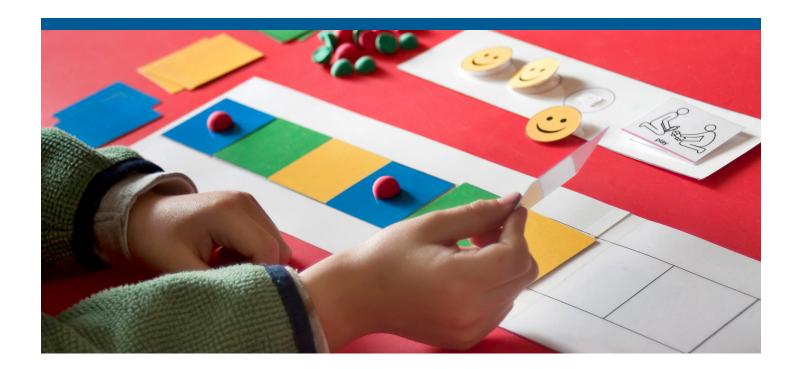
Guardian Ad Litem

In many states, the court can appoint a guardian ad litem for the allegedly incapacitated person. Guardians ad litem are usually lawyers appointed by the court to carry out an independent investigation of the facts and circumstances surrounding the issues for the best interest of the person. The guardian ad litem often interviews family members and other individuals who play an important role in the allegedly incapacitated person's life. The guardian ad litem generally visits the person's home to see their living environment and to ensure it is healthy.

Guardian Ad Litem and Attorney Responsibilities

An appointed attorney is responsible for providing legal representation supporting the wishes and position of the proposed or protected person. An attorney litigates legal issues on behalf of that person. A guardian ad litem provides an objective assessment of all circumstances surrounding the requested appointment and advocates for the best interest of the allegedly incapacitated person. The guardian ad litem also makes recommendations to the court on behalf of the allegedly incapacitated person.

The guardian is financially responsible for paying the legal fees for the guardian ad litem.



CHAPTER 6

Early Intervention and Special Education

The <u>Individuals with Disabilities Education Act</u> is the federal law that governs how United States public agencies provide early intervention, special education and related services to children with disabilities. It addresses the educational needs for children with disabilities from birth through age 21. The DOD implements key provisions of the IDEA through DODM 1342.12, Implementation of Early Intervention and Special Education Services to Eligible DOD Dependents.

Each state is responsible for developing IDEA policy for their early intervention and special education services, as is DODEA. Copies of the policies and procedures are available through each state's Department of Education website. You may also find state information via the <u>DOD Education Directory for Children with Special Needs</u> on Military OneSource.

Department of Defense Instruction/Manual 1342.12,
Provision of Early Intervention and Special Education
Services to Eligible DOD Dependents is the department's implementing guidance for the provision of early intervention and special education services.

<u>Chapter 10: Relocation</u> provides additional information for relocating families with a child who has early intervention or special education services.

Screening and Referral

Child Find is the ongoing process used by the states and DOD to identify children and youth from birth through age 21 who may be eligible to receive early intervention, special education and related services because they have a developmental delay or disability. Child Find is a coordinated effort involving public awareness activities and products, developmental screenings and evaluations. Child Find is provided at no cost to families.

However military treatment facilities, medical providers, psychologists, teachers, parents or other interested parties can also refer or request an evaluation.

Early Intervention Services

In 1986, Congress recognized the importance of getting help for young children with special medical and/or educational needs and their families and amended the Education for All Handicapped Children Act of 1975. This amendment ensures that children with an eligible disability or developmental delay will not have to wait until they are school-age to receive needed services and family supports. Today, Part C of the IDEA requires that all 50 states and jurisdictions have a system of **early intervention services** for all children with disabilities from birth until they turn 3. The DOD outlines early intervention support in DODI 1342.12. **Early intervention** supports the family's ability to meet the needs of their infants and toddlers with disabilities or developmental delays.

State systems use the term "Part C" when referring to EIS. Part C is the specific section of IDEA related to EIS. Each state has one agency, or lead agent, that is in charge of the early intervention system. The lead agent may be the state department of education, the health department or another designated agency.

Usually, military families will receive EIS from state-based agencies. However, at military locations in the United States served by the DODEA schools, the military departments provide EIS through the Educational and Developmental Intervention Services, or EDIS. Overseas, the military departments provide EDIS in assigned geographic areas of responsibility (for example, the Navy is responsible for providing services to all eligible children in Japan and Okinawa). For specific information regarding EIS and EDIS, visit Military OneSource or contact your local military-service EDIS program.

More information on EIS can be found in the <u>MilLife Learning Early Intervention Services</u> video and also on <u>EFMP & Me</u>. You may also want to visit the <u>U.S. Department of Education's Individuals with Disabilities Education Act website</u> to explore information and resources.

Eligibility

In order to participate in EIS, children must meet EIS eligibility guidelines according to the IDEA. An infant and toddler up to the age of 3 may be eligible for services if they meet the following criteria:

- The child has a diagnosed condition with a high probability of resulting in a developmental delay.
- The child has a developmental delay in one or more of the following areas: adaptive/self-help skills, social or emotional development, communication, physical development (including vision and hearing), or cognitive as measured by appropriate assessments, procedures and criteria.
- The child is considered to be at high risk of developing a delay if EIS are not provided.

Because of state differences in the definition of developmental delay and lists of conditions that are likely to result in developmental delay, eligibility for EIS varies from state to state. Children who are eligible for services in one state may not be eligible in another state. Additionally, some states provide EIS for infants and toddlers who are at risk of developmental delay. Their families may also be eligible. For information on the definition of disability under IDEA and eligibility criteria for early intervention in your state, contact your state's Part C coordinator.

The Early Childhood Technical Assistance Center maintains information regarding each state's Part C services. For additional information and contacts, visit http://ectacenter.org.

Individualized Family Service Plan

When a child is found eligible for EIS, a multidisciplinary team, including the parents and key service providers, will meet to develop an Individualized Family Service Plan. This plan will identify current developmental levels, outcomes (or goals) and services and other supports that will assist the family and child to meet those outcomes.

The foundation of the IFSP is the idea that the family is the child's greatest resource and that a child's needs are closely tied to the needs of his or her family. It is important for the early intervention service providers and family to understand that the best way to meet a young child's needs is to support and build upon the strengths of the family. In this way, EIS aims to support the family's needs relative to their child's functioning within the day-to-day routines and activities and within their natural environment.

The IFSP will include the following:

- Child's current level of development
- Family resources, priorities and concerns
- Outcomes, or results, that are expected to be achieved
- A detailed description of agreed-upon services that are needed to achieve the outcomes
- What service is needed, how often the service will be provided, how many sessions and how long each session will last, where the sessions will take place and how the service will be delivered (for example, individual consultation)

- A statement about the natural environment where the services will be provided
- · Name of the service coordinator who will help coordinate and obtain the services
- A transition plan for moving out of EIS as the child approaches age 3

The IFSP is a family plan with the parents as key contributors in its development. The involvement of other EIS team members depends on what the child and family need to support the child's growth and development. Unless services cannot be provided satisfactorily in such settings, the EIS are to be provided in the child's natural environment, including the child's home and the community settings in which children without disabilities participate. In this way, EIS empower families to become active participants in their children's development to improve the functional independence of their infants or toddlers. Families are to regularly review the IFSP with their child's EIS team to be sure that there is progress towards meeting IFSP outcomes and to revise or update the plan as needed.

The IDEA mandates timely access to EIS. A child's IFSP should be developed not later than 45 days after the date of referral for an evaluation. This means that the comprehensive evaluation is completed, the eligibility meeting is held and, if applicable, the IFSP is developed, all within 45 calendar days.

Transition

No later than six months before a child turns 3, EIS will typically begin to discuss options for services that may be available for a child after their third birthday. For some children, EIS will be all that is needed and no further services or supports are necessary. Others may need continued services during their preschool years and beyond and will transition to school special education services (Part B). States differ in their EIS transition options so be sure to check state department of education websites. For parents whose children are eligible to attend a DODEA school, coordination between the EDIS team and DODEA is key. As an EFMP Family Support provider you can assist families PCSing during this time by ensuring the family understands this transition process and who to reach out to at their new location.

Special Education

<u>Special education</u> is defined as specially designed instruction provided at no cost to the parent to meet the individual needs of children ages 3 through 21 who have disabilities.

Referral

A referral to the special education committee is the first formal step in the special education process. A parent, the child's teacher, another teacher or a health care provider familiar with the child can initiate a referral if a lack of progress or signs of physical or behavioral challenges that interfere with learning are noticed. A referral is generally submitted in writing and most schools have a specific referral process.

After a referral is made, a special education committee meets to determine whether the child needs a full and comprehensive evaluation. If the special education committee decides an evaluation is needed, the school will request the parent's written permission to evaluate the child. A child cannot be evaluated without parental consent. You can assist the family by determining whether their local school has a special form for requesting an evaluation or by helping write the request for the evaluation using the sample template included in the Appendix.

Within the DODEA, teams are referred to as case study committees. Within public school systems, the name for these teams will vary from state to state.

Eligibility

Figure 6:1 lists the disability categories under which children from age 3 to 21 may be eligible for special education services as identified by the IDEA. For a child to be eligible, the disability must affect the child's educational performance.

States, local education agencies and DODEA schools may all use different criteria for determining eligibility for special education services. DOD schools in the United States and overseas use the same eligibility criteria found in DODi 1342.12. State criteria can be found on individual state department of education websites.

FIGURE 6:1 - Disability Categories Listed in the IDEA

13 Disability Catagories Considered by IDEA



- Autism
- Traumatic brain injury



- Developmental delay
- Specific learning disability



- Visual impairment (including blindness)
- Deaf-blindness



- Emotional disturbance
- Intellectual disability



- Orthopedic impairment
- Multiple disabilities
- Other health impairment



- Speech or language impairment
- Hearing impairment (including deafness)

Disability Categories Listed in the IDEA

Special education eligibility decisions are made by reviewing the disability criteria and the results of the child's evaluation. Parents are an integral part of the eligibility meeting. A written summary identifies testing results, the implications for programming and the team's recommendations.

If a parent does not agree with the results of the evaluation, they may request that the school conduct additional evaluations, consider additional information as provided by the parents or request an independent

When a parent requests an independent educational evaluation, the school system may either agree to fund an IEE or initiate a due process hearing to demonstrate that its evaluation was appropriate.

educational evaluation. An IEE means an evaluation conducted by a qualified examiner who is not employed by the public agency responsible for the child's education. A family who disagrees with the findings should consult the school system's policies for reviewing or mediating assessment decisions. You can assist families in crafting this request. A sample request for an IEE is provided in the Appendix.

Individualized Education Program

An Individualized Education Program is developed once the child is found eligible for special education services. The IEP is a written statement describing the educational program designed to meet the child's individual needs.

The IEP sets reasonable learning goals for the child and identifies the services the school will provide for the child. All school systems use their own standardized form for the IEP. It is reviewed and updated annually and eligibility for services is reconsidered every three years in accordance with the IDEA.

Transition to Adulthood

Between the ages of 14 and 16, a child's IEP begins to address the process of transitioning out of the public school system. During transition planning, students and their families learn about community agencies and programs that provide services to individuals with disabilities after high school. Some of these adult services include job training and placement, housing assistance and programs related to health care and independent living. Transition services should start by the time the child turns 16 and should be reviewed annually thereafter. No later than one year before the child reaches the age of majority under state law, the child should be advised of his or her IDEA rights that will be applicable upon reaching the age of majority.

If appropriate, the child should be involved in the transition planning. Chapter 7, Chapter 8 and Chapter 9 provide additional transition information relevant to adults with special medical and/ or educational needs.

More information can be found in the MilLife Learning courses <u>Post-Secondary Transition</u> and <u>Adults with Special Needs</u>. <u>EFMP & Me</u> also has tools, resources and checklists to aid in the transition to adulthood process.

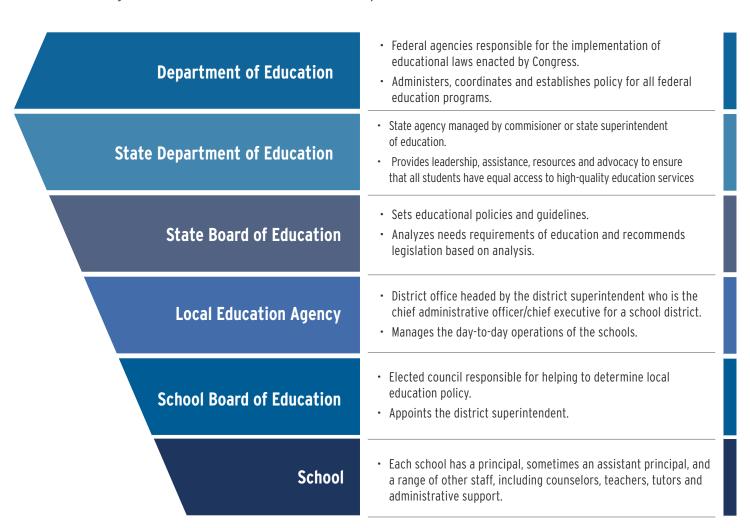
Public School Structure

Each state places the responsibility of public education on its state department and board of education, including early childhood, K-12 secondary, higher education and technical and community colleges.

Becoming familiar with the organizational structure of the public school systems will help families successfully navigate the system and services it provides. Use the <u>Education Directory for Children With Special Needs</u> to locate your state's special education services and tools. Families should contact their installation school liaison for information before contacting their local education agency.

The federal government provides <u>funding and aid to the states</u> that meet federal requirements. Minimum education standards are established by state education agencies. Local education agencies provide oversight for the public schools within their jurisdictions. Under the provisions of state law and through elected school board members, individual school districts set policies, develop curricula and make funding decisions.

FIGURE 6.3: Organizational Structure of the Public School System



Defense Department School Structure

<u>The DODEA</u> provides pre-kindergarten through grade 12 education to children of service members within certain jurisdictions. All schools within the DODEA are fully accredited by U.S. accreditation agencies. The DODEA schools are organized into three geographic areas: Europe, the Pacific and the Americas.

Learn more about <u>DODEA schools worldwide</u>, along with locations, number of students and more.

Advisory councils function as the equivalent to state boards of education. They make recommendations to the secretary of defense and the various leadership levels within the DODEA policy, programs and practices that impact the overall educational system.

FIGURE 6.4 - Organizational Structure of the DODEA School System

 Establishes policy for DOD schools Monitors compliance with federal law and DOD policy 	Department of Defense
 Umbrella agency, overseen by a director, that operates the Department of Defense Dependents Schools and Department of Defense Domestic Dependent Elementary and Secondary programs Supervises and manages area offices Sets policy and guidelines and provides leadership, assistance and resources 	Department of Defense Education Activity
 Three area offices (Europe, Pacific and America), each managed by an area director Provides guidance and support to district schools 	Department of Defense Education Area Office
 Local office headed by a district superintendent who is the chief administator for a school district Has responsibility for the day-to-day operations of the schools 	District Office
Each school has a principal, sometimes an assistant principal, and a range of other staff, including counselors, teachers, tutors and administrative support	School

Problem-Solving

Parents should <u>address concerns</u> with their child's teacher before they move to the next level as described in Figure 6:5. The result of positive collaborations on the parent-teacher level is often more positive and strengthens relationships between the parents and those individuals directly responsible for their child's education than those settled on a higher level.

Whether the child attends a public or DODEA school, the steps for resolving concerns regarding the child's educational services are similar. Encourage families to try to resolve issues at the lowest level possible.

Many school districts are now using a variety of strategies to avoid or resolve conflicts between families and schools. This strategy, referred to as alternative dispute resolution, offer parents and schools the opportunity to resolve concerns collaboratively and avoid time-consuming and costly litigation.

Contact information and resource guides for supporting the education of military children can be found at https://www.dodea.edu/Partnership.

The U.S. Department of Education funds statewide and community-based Parent Training and Information Centers offering information and assistance regarding special education rights, advocacy and dispute resolution. The PTI Center staff are knowledgeable about informal dispute resolution techniques and can assist families in understanding the options available in their area.

Families may need additional support navigating the educational systems on the installation or in the local community and resolving any related issues or concerns. In collaboration with the installation school liaison, partner with the schools or other local agencies to host local information/educational seminars regarding special education issues. It is critical the school liaison be engaged to ensure appropriate contacts are made and established installation relationships with the LEA are maintained. Families can also receive information and referral regarding special education law from their service-specific legal offices. MilLife Learning offers a variety of self-paced courses about early intervention, special education and the dispute process.

FIGURE 6:5 - Resolving Concerns

Department of Education or DODEA Headquarters

Involvement of the special education director/coordinator at the state and/ or DODEA headquarters level should be used when concerns cannot be addressed at the lower levels.

DODEA Area Office

Each DODEA area office is staffed with an area special education coordinator who can provide assistance to district office personnel and the parent. The parent may contact the area office when a resolution cannot be reached at a lower level.

District Office Local Education Agency

Every district has a district superintendent/chief school administrator and a special education director or coordinator. The parent and/or school may request a meeting with district personnel if problems cannot be resolved at the lower level.

School Administrator

If a resolution cannot be reached through meeting with the teacher and/ or the Individualized Education Program team, the parent should request a conference with the administrator in charge of special education.

IEP Team

If the child has an IEP, the parent may request a meeting with the IEP/case study committee team at any time to address his or her concerns.

Teacher

The parent should be encouraged to request a meeting or conference with the child's teachers or the staff members most closely involved with the issue.

The School Liaison Program

The <u>School Liaison Program</u> offers an array of services and resources to support students, parents, installation leadership, schools and the surrounding community. <u>School liaisons</u> are located at each installation and serve as the primary point of contact for pre-K-12 school-related matters. They help schools identify the unique challenges facing military children, such as frequent separations and moves, and how those challenges can impact children emotionally. They also inform parents about local schools, graduation requirements, after-school programs, homeschooling and much more. By working together with these stakeholders, the School Liaison Program builds a support network to provide the best possible education experience for military-connected children and youth worldwide.

The School Liaison Program's goals are to:

- Identify barriers to academic success and develop solutions.
- Promote parental involvement and educate local communities and schools regarding the needs of military children.
- Develop and coordinate partnerships in education.
- Provide students, parents and school personnel with the tools they need to overcome obstacles to education that stem from the military lifestyle.

The school liaison:

- Serves as the primary point of contact for school-related matters.
- · Represents, informs and assists command.
- · Assists military families with educational issues.
- · Coordinates with local school systems.
- Forges partnerships between the military, community and schools.

School liaisons are also an initial contact for participation in the Youth Sponsorship Program, which builds resilience in youth and eases transition. School liaison support is free and open to all Defense Department identification card holders, educators who serve military students and community partners involved with pre-K-12 education.



CHAPTER 7

Adults With Special Medical and/or Educational Needs

EFMP addresses the needs of adult family members with special medical and/or educational needs. This includes spouses, children who have reached the age of majority and parents who are legal dependents. You will be working with these family members to address issues that may be reoccurring, chronic or terminal.

Supporting adult family members with complex needs involves collaboration with a variety of support systems and community-based services. Assistance may take the form of non-clinical case management and referrals for public benefits. Installation support services may be necessary to support adult family members with complex or ongoing needs. Information related to health care and public benefits can be found in chapters 8 and 9, respectively.

The <u>Special Care Organizational Record for Adults With Special Needs</u>, <u>Special Care Organizational Record for Young Adults with Special Needs</u> and the <u>Special Care Organizational Record for Elder Care</u> are organizers for tracking and maintaining records, medical information, contacts and appointments and other pertinent documents. The SCORs also consolidate instructions for caregivers to use in the event the primary caregiver is not available. The <u>SCORs are available for download from Military OneSource</u>.

Additional information can be found on the <u>Adults with Special Needs eLearning Course on</u> <u>MilLife Learning</u>.

Military Benefits for Adult Family Members

Military benefits are provided to family members who are enrolled in the Defense Eligibility Enrollment Reporting System and have a DOD identification card. Review information on secondary dependency on the Defense Finance and Accounting Service, Get an Overview of Adults with Special Needs and learn more about Establishing the Secondary Dependency of a Military Child.

Education Options

Transition services are intended to prepare students for the move from high school to adulthood. The IDEA requires that transition planning begin by the time the student reaches age 16 and must be included as part of their IEP. A student with an IEP who does not meet their goals and objectives is eligible to continue a public school education until the age of 21. Prior to completion of high school, the IEP team should prepare the student to transition to a 504 Plan if pursuing post-secondary education. Connect with your school liaison for local information.

Medical coverage may be extended to eligible family members through the age of 26 with the premium-based TRICARE Young Adult Program.

Visit the <u>TRICARE</u> website for additional information.

Many adults with disabilities leave school and explore other educational and work opportunities. Employment and educational options for adults with special medical and/or educational needs vary between states and counties. The parents or person with a disability may wish to explore a range of employment options such as the following:

- Competitive employment full- or part-time jobs
- Continued education enrollment in a college or university, community college, vocational school or apprenticeship program
- Transitional job training short-term programs designed to provide the vocational skills necessary to obtain competitive employment
- Supported employment paid employment for persons with severe disabilities who need ongoing support to get and keep jobs
- **Sheltered employment** a work environment in a supervised setting where workers with disabilities are paid a "piece rate" for roughly half the productivity of the average workforce
- Adult day programs settings in which staff members assist clients in personal care, community living and vocational skill development

More information can be found in the MilLife Learning courses <u>Post-Secondary Transition</u> and Adults with Special Needs.

Post-Secondary Education

<u>Transition planning</u> is very important to prepare students with special needs for the transition to adult life. Review the resources available on <u>EFMP & Me</u> for additional information. You can also connect with the school liaison for more information.

Military Spouse Career Advancement Account

The Military Spouse Career Advancement Account program offers financial assistance for education or training to eligible military spouses. Spouse Education and Career Consultants can assist with the MyCAA application process or other career and educational questions such as required education and training, career exploration, assessment and employment readiness.

Additional information related to Military Spouse Career Advancement Account can be found at http://www.militaryonesource.mil/SECO.

Vocational Rehabilitation and Employment Options

The <u>Americans with Disabilities Act</u> provides equal work opportunities to individuals with disabilities who are qualified to work. The <u>ADA</u> requires employers of more than 15 people to make reasonable accommodations for qualified job applicants and employees with disabilities. The Carl D. Perkins Vocational and Rehabilitation Act of 1998 provides for <u>vocational</u> rehabilitation to assist individuals with disabilities in securing and keeping employment.

Vocational Rehabilitation

The <u>Vocational Rehabilitation programs</u> are federal- and state-funded services that provide the primary employment support resource for adults with disabilities.

CareerOneStop Career Centers

Neighborhood-based <u>CareerOneStop Career Centers</u> provide intensive employment services such as job training and education. <u>Disability resource services</u> assist individuals with special medical and/or educational needs in accessing employment opportunities and benefits.

Individuals can locate centers in their community by visiting the CareerOneStop website at http://www.careeronestop.org.

Client Assistance Program

The <u>Client Assistance Program</u> advises individuals with disabilities of available services and benefits under Section 504 of the Rehabilitation Act of 1973 and those under Title I of the Americans with Disabilities Act. The program helps people with disabilities advocate for their interests, identify resources, understand procedures, resolve problems and protect their rights in the rehabilitation process.

Ticket to Work

The <u>Ticket to Work program</u> benefits those who receive disability benefits through the Social Security Administration. The program is designed to remove barriers that have previously influenced people's decisions about going to work because of concerns over losing health care coverage.

Work Incentives Planning and Assistance

The <u>Work Incentives Planning and Assistance</u> program offers benefit planning and assistance services to individuals with disabilities, including those who are transitioning from school to work. These programs are authorized to serve all SSA beneficiaries with disabilities.

Plan to Achieve Self-Support

The <u>Plan to Achieve Self-Support</u> is a Supplemental Security Income program designed to help individuals with disabilities return to work. PASS is designed to help individuals with disabilities accrue savings or property while still qualifying for SSA benefits as they return to work and set and achieve specific work goals.

Centers for Independent Living

The <u>Centers for Independent Living Program</u> maximizes the leadership, empowerment, independence and productivity of individuals with disabilities and integrates these individuals into the mainstream of society.

Assistive Technology

<u>Assistive technology</u> is any item, piece of equipment, or product system, whether acquired commercially, modified or customized, that is used to increase, maintain or improve functional capabilities of individuals with disabilities (29 U.S.C. Sec 2202(2)). See Chapter 8 to learn about durable equipment available through <u>TRICARE's Extended Care Health Option</u> benefit.

Transportation

Individuals with disabilities unable to drive will require information on public transportation and other community-based transportation options. Some community-based programs, such as VR services, provide transportation to participants. These programs may be a good resource for information regarding transportation options.

Social and Recreational Opportunities for Adults

Hosting social and recreational events affords opportunities for families to meet and enjoy each other's company. Collaborate with your installation Morale, Welfare and Recreation program or privatized housing office on ideas, activities and events.

Personal Financial Management and Free Tax Return Assistance

Expenses associated with specialty care and equipment can be difficult to manage.

Financial planning, budgeting and assistance can alleviate some of the difficulties families face as they cope with chronic disabilities or illnesses. Visit a personal financial management counselor or stop by your installation military family readiness center to work on or review your plan. Use MilTax consultants for assistance with federal and state tax filing.

Deployment Support

Family members with special medical and/or educational needs may require additional support when the service member deploys. The stress of deployment can exacerbate family situations and disability-related issues. To meet the needs of the family, you may need to coordinate several layers of support. Speak with your family center colleagues, as they have information on your installation's family readiness groups, counseling programs and other deployment resources on the installation. Use <u>Plan My Deployment</u> to prepare and plan for the three stages of deployment. <u>EFMP & Me</u> also has deployment checklists that will assist the family in preparing for an upcoming deployment.

Parenting

Military life presents some unique parenting challenges due to frequent deployments, long duty hours, moves to unfamiliar locations, and separation from extended family and friends. A parent managing their own special medical and/or educational needs in addition to parenting has added stress. Child and youth programs, New Parent Support Programs and respite care help prevent or alleviate some of the stress associated with parenting. Make sure to check out THRIVE, a free online parenting education program.



Individuals can locate centers in their community by visiting the CareerOneStop website at http://www.careeronestop.org.

Child and Youth Programs

DOD Child and Youth Programs provide affordable, high-quality child care services and youth programs for children of DOD personnel. Services are available to eligible children from birth to age 18. All programs are Defense Department certified and most have national accreditation. Accessing appropriate child care can greatly reduce the stress of a military parent with special medical and/or educational needs. Most installations offer the following child care options:

- **Child Development Centers** are available on most installations, providing year-round services for children ages 6 weeks to 5 years. Larger installations might have multiple centers and some offer part-time and hourly services. Each center is accredited and certified by the Defense Department.
- Family child care providers are certified child care professionals who provide child care for infants through school-age children in their homes, located either on or off an installation. Family child care providers typically offer a flexible schedule to support parents with a variety of care needs, including full-day and part-day care, school-year care, summer camp, and in some cases, 24/7 and extended care. The Family Child Care Program provides administrative oversight for the installation family child care providers.
- **School-Age Care** is a facility-based program that provides child care services to schoolage children in full-day kindergarten through grade 7 during the school year. School Age Care programs provide before- and after-school care, and care during school-out days (e.g., teacher training days) and school-year vacations (e.g., winter break, spring break). SAC programs also provide summer camp.
- Youth programs are a comprehensive series of planned and self-directed activities and events responding to the recreational, developmental, social, physiological, psychological, cultural and educational needs of eligible youth. These activities support the acquisition of lifelong skills and facilitate transition to adulthood. Youth programs are offered within a physically and emotionally safe environment that includes professional and caring staff in designated facilities and locations. While these programs vary by installation, most offer special events, sports programs and instructional classes. Children and youth with education or physical limitations are welcome in youth programs.
- Expanded child care options through free access to a national database of child care providers is available to military families through Military OneSource. Parents can search the database for hourly, flexible, on-demand child care that meets their needs.
- MilitaryChildCare.com is the DOD's request-for-care system that helps families in any service branch find and request military-operated or military-approved child care programs worldwide. With militarychildcare.com, you can create an account and maintain a household profile that you can access any time from any location.

Parenting Support

The New Parent Support Program was developed to help military families who are expecting or who have children under age 3 develop the skills they need to provide a nurturing environment for their children. All services provide home visits for families at risk, but installations may also offer New Parent Support Program services that reflect the needs of military families in the area. Additional services may include supervised playgroups, parenting classes or resource materials. Program participants have access to trained staff who can answer parenting questions and provide referrals to other appropriate resources.

Exceptional Family Member Program Respite Care

EFMP respite care offers temporary relief to families and primary caregivers by giving them short-term breaks from caregiving. Each military service has an established EFMP respite care program for enrolled families. This type of support improves the family's ability to cope with daily responsibilities and provides an opportunity for self-care. Consult your leadership for more information. See Chapter 8 for information regarding TRICARE's Extended Care Health Option Respite Care benefit.

Installation Emergency Assistance Plan

Familiarize yourself with the installation emergency assistance plan before a disaster occurs. It may help to identify special requirements under emergency conditions, such as: Will they need a generator if power is lost? Do they have an adequate supply of medication(s)?

Military Relief Societies

Military relief societies are private nonprofit organizations that support each of the services by providing emergency financial assistance. This support comes in the form of interest-free loans and grants to active and retired service members and their families. Contact your installation's relief society for information on how they can help families during crises.

Army Emergency Relief
https://www.armyemergencyrelief.org/

Navy-Marine Corps Relief Society https://www.nmcrs.org/

Air Force Aid Society http://www.afas.org

American Red Cross

The <u>American Red Cross</u> is the nation's emergency-response organization and works closely with the services to support military families in times of need. It provides information related to available support programs, financial assistance and emergency communication support. The American Red Cross relays urgent messages to service members stationed or deployed anywhere in the world 24/7/365.



CHAPTER 8

Health Care Benefits

Awareness of available benefits and resources will make the process of seeking medical care more manageable. Forge strong working relationships with key partners within these systems and share accurate information with the family. This will improve access to services and help the family avoid unanticipated expenses.

Organizing Medical Information

Managing medical records and appointments is an important task when a family member has complex medical needs and issues.

The Special Care Organizational Record for Children With Special Health or Educational Needs, the SCOR for Young Adults With Special Needs, the SCOR for Adults With Special Needs and the SCOR for Elder Care are tools for caregivers that provide central repositories of information about family members' ongoing support and health needs. The SCORs are available for download from Military OneSource.

Military families can order a hard copy of the Special Care Organizational Record for Children With Special Health Care Needs in binder format from Military OneSource by calling 800-342-9647. The SCORs can also be downloaded from Military OneSource at https://www.militaryonesource.mil/leaders-service-providers/efmp-special-needs/special-care-organizational-records/.

TRICARE

TRICARE is DOD's worldwide health care program. It combines the military's direct health care system of hospitals and clinics with a network of civilian health care professionals authorized by TRICARE to receive reimbursement.

Extended Care Health Option

TRICARE ECHO provides supplemental services and supplies that are not available through the basic TRICARE program to active-duty family members and family members of National Guard or reserve members activated for more than 30 days with a qualifying mental, developmental or physical disability and who are enrolled in EFMP.

Durable Equipment

TRICARE ECHO may cost-share <u>durable equipment</u> that does not meet the criteria for durable medical equipment if it is essential to stop or reduce functional loss resulting from a qualifying condition. A physician must certify the item as medically necessary before TRICARE authorizes the item.

ECHO Respite Care

Family members registered in ECHO are eligible to receive <u>in-home respite care</u>. Respite care provides skilled and non-skilled care in the absence of the primary caregiver.

ECHO Home Health Care

ECHO Home Health Care provides medically necessary skilled services to those ECHO beneficiaries who are homebound and generally require more than 28 to 35 hours per week of home health services.

EHHC Respite Care

Respite care is designed to provide temporary relief or rest for the primary caregiver of a homebound beneficiary who requires frequent care. Beneficiaries eligible for The ECHO Home Health Care Respite Care benefit and the ECHO Respite Care benefit are different and cannot be used within the same month.

EHHC Respite Care may receive eight hours of respite care, five days per calendar week.

This benefit is different from the 16 hours of respite care available through ECHO and the two cannot be used during the same month.

TRICARE Comprehensive Autism Care Demonstration

The TRICARE Comprehensive Autism Care Demonstration covers applied behavior analysis services. Under the ACD, ABA services are authorized to target the core symptoms of autism spectrum disorder. The ACD began on July 25, 2014. It is currently authorized to run through Dec. 31, 2023. Significant changes have occurred within the ACD so please visit https://www.tricare.mil/autism for the most accurate information.

Rehabilitation Services

TRICARE will cover <u>rehabilitative therapy</u> to improve, restore and maintain function, or to minimize or prevent deterioration of function. Therapy must be medically necessary and rendered by an authorized provider at a skilled level.

TRICARE Mental Health Care

TRICARE covers <u>mental/behavioral health care</u> that is medically or psychologically necessary for the treatment of a behavioral health disorder. Beneficiaries who need counseling for behavioral or emotional difficulties that are not covered under TRICARE may be referred to Military OneSource.

Hospice and Palliative Care

<u>Hospice care</u> is designed to provide comfort and support to families when a life-limiting illness no longer responds to cure-oriented treatments. This type of care emphasizes supportive services instead of treatment. TRICARE covers hospice care for terminally ill family members with a prognosis of less than six months.

Medical Support Services

Collaboration and partnership with TRICARE and other health care service providers can help improve effectiveness of services when families experience complex medical issues. Find training on TRICARE benefits.

Medical Case Managers

Family members with specialized, catastrophic, chronic, complex, high-risk or expensive health issues may benefit from <u>medical case management services</u>. Medical case management involves a team of health care professionals who help families find solutions to complex health problems. Medical case management services are recommended by the PCM and are provided through the MTF or through TRICARE.

Beneficiary Counseling and Assistance Coordinators

Most military treatment facilities have <u>BCACs</u> on staff who serve as beneficiary advocates and TRICARE problem solvers. BCACs provide information, guidance and assistance on benefit options, enrollment, special authorizations, claims, referrals and appointments. They work to resolve concerns that cannot be addressed through normal channels.

Debt Collection Assistance Officers

<u>Debt Collection Assistance Officers</u> hold designated positions within MTFs that assist families when a provider has initiated debt collection for services that have not been paid for by TRICARE. The DCAOs help beneficiaries understand and resolve underlying debt collection issues.

Medicare

<u>Medicare</u> is a federally sponsored health insurance program designed to assist the elderly or disabled in securing reimbursement for some medical expenses. It reimburses doctors, hospitals and pharmacies, much like a private insurance company. Use the eligibility tool and <u>find more information</u> about Medicare eligibility and enrollment.

Medicaid

<u>Medicaid</u> is a federal- and state-funded medical assistance program for low-income individuals. Eligibility for Medicaid is limited to individuals who fall into one of several categories or groups specified by federal statute. These groups include the elderly, the blind or disabled, pregnant women, and children.

Medicaid Waiver Programs

Under Medicaid, the Department of Health and Human Services can waive certain federal statutory and regulatory requirements to allow states to adopt special waiver programs. Eligibility rules vary from state to state and waiver to waiver. States have the option of offering home- and community-based services. These are known as waiver programs.

Title V of the Social Security Act

Every state and the District of Columbia has a Title V program for children with special health care needs that is funded, in part, through the Federal Title V Maternal and Child Health Block Grant. Programs for CSHCN provide access to medical services and programs for children with physical handicaps, potential handicaps, chronic illnesses, developmental disabilities or sensory impairments.

Additional information on state programs and opportunities for trainings or workshops can be found at http://www.mchb.hrsa.gov/training.



CHAPTER 9

Public Benefits and Financial Assistance Programs

Some families you work with may qualify for public benefits. Develop a basic understanding of the most common public benefit programs available and identify how families can access local, state and federal financial assistance programs. Information for government agencies providing benefits and local points of contact can be found in the Appendix. You may also want to review the Government Assistance Program eLearning course on MilLife Learning.

Social Security Administration Benefits

Sometimes individuals with significant disabilities are unable to work enough hours to earn a livable income. The Social Security Administration addresses these issues by providing qualified individuals cash benefits called Supplemental Security Income and Social Security Disability Insurance.

In addition to SSI and SSDI, the SSA administers the application process for Medicare and Medicaid.

Additional information on Medicare and Medicaid can be found in Chapter 8.

For more information on Social Security, see the <u>guide to</u> <u>understanding your benefits</u>.

When families relocate overseas, it is critical for them to contact the Social Security Administration before they leave the United States. Otherwise, they may be required to pay back any payments they received while overseas.

Military-specific information can be found here.

Supplemental Security Income

Supplemental Security Income is an income assistance program designed to supplement the income of eligible children and adults who are blind, disabled or 65 years of age or older. The cash benefit must be used for food, clothing and shelter. The basic SSI amount is the same nationwide and is adjusted annually for cost of living. Families can call the SSA for information on the state supplement.

Social Security Disability Insurance

<u>Social Security Disability Insurance</u> is a cash benefit program available to adults and children. It is based on the work history of the individual or the child's parent. Social Security Disability Insurance pays only in cases of total disability. No benefits are payable for partial disability or short-term disability

Food Assistance Programs

Some families may qualify for one of the available food assistance programs. Most grocery stores and the commissaries participate in the <u>Supplemental Nutrition Assistance Program</u> and the <u>Women, Infants, and Children</u> programs. Families who are not eligible for SNAP may be eligible for the <u>Department of Defense Family Subsistence Supplemental Allowance program</u>.

Supplemental Nutrition Assistance Program

The <u>Supplemental Nutrition Assistance Program</u> is the federally funded, state-administered cash benefit program (formally known as the Food Stamp Program). Participants are provided with an electronic benefits card to be used at commissaries and most grocery stores to purchase food items.

An individual's disability and age do not impact eligibility for the Supplemental Nutrition Assistance Program, but do make a difference when determining income for financial eligibility determinations.

The Women, Infants, and Children Program

The Women, Infants, and Children program is a federally

funded grant program that provides supplemental food, health care and nutrition education to low-income pregnant, breastfeeding and non-breastfeeding postpartum women and children up to age 5 who are at nutritional risk.

Applicants residing outside the continental United States can apply to the Women, Infants, and Children Overseas program funded by DOD. The eligibility criteria for the overseas program is different, so families who may not have qualified for WIC in the continental United States are still encouraged to apply.

Family Subsistence Supplemental Allowance

The Family Subsistence Supplemental Allowance is a monthly cash allowance of up to \$500 for low-income service members. This allowance raises the basic allowance for subsistence such that the family no longer requires or qualifies for SNAP.

Housing Assistance

Adult family members with special medical and/or educational needs who do not reside with their sponsor may be eligible for housing and household assistance through several federal

and/or state programs. This section focuses on three main types of housing and household assistance: Section 8 of the Housing Act vouchers for rent or purchase, the Low Income Home Energy Assistance Program, and the Low Income Program of the Universal Service Fund-Telephone Service.

Section 8 Housing – The Housing Choice Voucher Program

Section 8 of the Housing Act assists low-income and disabled individuals in securing housing using two types of portable subsidies. The first subsidy helps qualified individuals pay their rent. The rental assistance is paid directly to an individual's landlord. The second subsidy helps qualified first-time homebuyers pay their mortgages.

There may be long waiting lists for Section 8 housing. You should research the list's status in your state before referring a family to this program.

Low Income Home Energy Assistance Program

<u>LIHEAP</u> is a federally funded, state-administered program that assists low-income households with bill payments, weatherization and energy-related home repairs. The program differs from state to state, even having different names.

Low Income Program of the Universal Service Fund - Telephone Service

Through the <u>Universal Service Fund</u>, the Federal Communications Commission helps low-income individuals and families establish and maintain telephone service by discounting basic local service provided by local telephone companies. The programs available to support individuals with low incomes include Lifeline, Link Up and Toll Limitation services.



CHAPTER 10

Relocation

Many military families complete a permanent change of station move every two to three years by moving from one installation to another. Moving can involve transition from county to county, state to state, or from country to country. **EFMP & Me** provides downloadable checklists to help families prepare for the transition.

Assignment Coordination

Assignment coordination is important because access to appropriate medical and educational services may be limited in some locations, especially in overseas and remote locations. Operational and career development requirements are taken into consideration when coordinating assignments such that EFMP enrollment does not negatively impact a service member's career. Ensuring availability of care improves the service member's ability to perform their duty.

Some service members may choose to have their family stay behind or relocate closer to family and request an unaccompanied tour when they are concerned about the availability of medical care or educational services in an OCONUS location. Enrollment in EFMP is not an automatic disqualifier for OCONUS locations, deployment, promotion opportunities, or the requirement to serve an unaccompanied OCONUS tour based upon the needs of the military service. Learn more about the identification and enrollment process on **EFMP & Me**.

Connecting to Resources

Service members with PCS orders need to be informed of the services provided by the EFMP throughout the relocation process. Attend briefings, distribute information and coordinate with the staff providing relocation assistance to reach out to relocating service members.

There are several ways you can assist service members with PCS orders:

- Encourage them to call your office for support.
- Coordinate with the gaining installation's EFMP Family Support office for appropriate resources and information to support the family.
- Communicate with the family as needed to provide additional information as requested.
- Encourage the family to use online resources such as EFMP & Me and the SCORs to prepare and stay organized.
- Remind the family that EFMP does not provide medical services and refer the family to TRICARE for assistance with the transition of medical care.

Be familiar with the resources available within the family center and through Military OneSource that you can use to support families completing a PCS move. Check out the <u>Education Directory</u> for Children With Special Needs, Plan My Move: Great PCS Moving Checklists & More and the checklists on EFMP & Me specifically for families with special needs.

Relocation Assistance Services

The provision of relocation assistance varies by installation. Families can receive valuable moving resources to plan for and make smooth transitions to new duty locations. They may receive sponsorship education, information on household goods and transportation. For more information, contact your relocation assistance point of contact at your family center.

Visit MilitaryINSTALLATIONS at https://installations.militaryonesource.mil/ to find contact information for the gaining installation's Exceptional Family Member Program.

Military OneSource's Exceptional Family Member Program/ Special Needs Section

Military OneSource's EFMP/Special Needs section provides current information on resources, services and support. Some of the resources include information and points of contact for the following:

- Social Security benefits
- Health care (for example, Medicare, Medicaid, Medicaid waivers, TRICARE and TRICARE Extended Care Health Option)
- Food assistance programs
- Disability-related services and supports
- State early intervention and special education programs
- EFMP & Me

Military INSTALLATIONS

MilitaryINSTALLATIONS is an online directory of programs and services available on or near military installations. It includes contact information for EFMP Family Support offices worldwide, as well as maps, community points of interest and search capabilities for information on the installation and the surrounding area. The "Get to Know the Installation" section provides information about local schools, Defense Department schools, early intervention and special education services, and how to find the school liaison. Specific information about health care for families with special medical and/or educational needs is also available.

Take time to become familiar with the Plan My Move program available at http://planmymove.militaryonesource.mil for help when planning a move. Plan My Deployment is a program that helps families with each step of the deployment process and is available at https://planmydeployment.militaryonesource.mil/.

Plan My Move

<u>Plan My Move</u> is an online relocation assistance tool. Families can use the tool to create a fully customizable calendar and to-do lists with links to installation information and points of contact from <u>MilitaryINSTALLATIONS</u>. Families can check a box on the first Plan My Move screen to indicate that they are traveling with a family member with special medical and/or educational needs. They will receive additional information regarding special needs travel, checklists, EFMP points of contact at the gaining and losing installation, adult concerns, accessible housing, cross country travel, health care, special education and early intervention services.

Military OneSource Special Needs Consultations

Military OneSource special needs consultants are available 24/7/365 and there is no limit to the number or length of the calls. The family's needs are assessed and information is provided about moving, benefits, education, finances, housing, support groups, medical resources and more.

Housing

The <u>Uniform Federal Accessibility Standards</u> requires that at least 5% of the total (but at least one unit) of all stateside military housing constructed must be designed and built to be accessible or readily and easily modifiable to be accessible. When working with families that need accessible housing, direct them to the <u>installation housing office</u>.

Fair Housing Act

<u>The Fair Housing Act</u> prohibits discrimination in the sale, rental or financing of residences based on race, color, religion, sex, national origin, familial status or disability. Amendments to the act include six technical requirements for all units on ground floors in buildings without elevators and all units in buildings with elevators built after March 13, 1991.

The requirements are as follows:

- Public and common areas must be accessible to persons with disabilities.
- Doors and hallways must be wide enough for wheelchairs and provide an accessible route into and through the unit.
- Light switches, electrical outlets, thermostats and other environmental controls must be accessible.
- Bathroom walls must be reinforced to allow later installation of grab bars.
- Kitchens and bathrooms must be able to accommodate people in wheelchairs.

Families may have basic questions about the Fair Housing Act and how it might affect their search for appropriate housing. Include this information during the family's warm handoff to the installation legal assistance office, which can provide more comprehensive information and legal advice. Find additional information in the <u>Adults With Special Needs eLearning course on MilLife Learning</u>.

TRICARE Portability

Families should know that TRICARE benefits and services may change when they move to a new location. They should take advantage of <u>TRICARE's Moving Made Easy</u> to stay on top of their benefits when they relocate.

Early Intervention and Special Education Services Considerations

It is important to understand that early intervention and special education services vary from location to location based on state and local policies. Encourage parents to research available programs as soon as possible to minimize delays in service.

<u>The Education Directory for Children With Special Needs</u> provides state-specific information and resources and other valuable information and tools that all families can use to help with a smooth transition as they relocate.

The DOD <u>Directory on Early Intervention</u>, <u>Special Education and Related Services in OCONUS</u>
<u>Communities</u> is a good resource for available information.

The <u>Center for Parent Information & Resources</u> website maintains a list of parents centers in the U.S.

Help reduce the stress of this relocation by reaching out to the EFMP Family Support provider at the gaining installation to learn more about EIS and special education programs at the new location. Remind families that non-Defense Department EIS programs and public schools may have different policies or procedures guiding the operation of their programs. Families should not expect to receive the exact same EIS and special education services at their new location as they received at their old location.

Advance enrollment allows military families to enroll their children in a school district before they arrive at their PCS destination. Some states are already participating in advance enrollment and more continue to commit. Make sure to check with your school liaison. Advance enrollment allows families to enroll their child in specialized academic programs, begin coordinating IEP and 504-plan requirements, register for courses, plan their course of study and know which school they will be attending. Find the latest info on the advance enrollment policy to provide to families.

Moving with a child receiving EIS services requires some advance planning. Before relocating, recommend that the parents meet with EIS providers to review and update the child's Individualized Family Services Plan if needed. Ensuring that the IFSP accurately reflects the child's current level of performance and identifies any additional needs for services will help smooth the

The Individuals with Disabilities Education Act requires that the new school provide comparable services to those outlined in the child's Individualized Education Program until the school is able to conduct an evaluation to determine eligibility for services under the new state's guidelines.

process at the new location. The EIS records and pertinent medical reports should be handcarried to the new EIS program coordinator.

At least 30 days prior to a move, parents should contact their school liaison for the most current education transition process. The school liaison can also connect parents with the school liaison at their new installation.

Parents should take the following steps to <u>smoothly transition a child's special education</u> services from one school to another:

- Notify the school of the move and request a copy of their child's complete educational record (a sample Request for Records letter is included in the Appendix).
- Ensure that the copy of the educational records includes the most recent IEP or Section 504 Plan.
- Confirm that the school has completed and included copies of all tests and assessments.

- Obtain copies of pertinent medical records (both civilian and military).
- Acquire written reports from the teacher and service providers regarding progress and recommendations for continued service.
- Gather information regarding adaptive equipment and assistive technology with serial numbers, warranties and manufacturer information.

Other helpful resources to share with families preparing for a move include the <u>Preparing for Your Move fact sheet</u> and the EIS and Developmental Changes eLearning courses on <u>MilLife Learning</u>.

Families should enroll their children in the new school as soon as possible. This process can be facilitated by hand-carrying their child's educational records and any pertinent paperwork to the new school. Parents may be requested to sign appropriate releases allowing the gaining school to obtain official copies of their child's records.

Encourage parents to familiarize themselves with education services at the new school that may be appropriate for their child. This information is typically available through the state's department of education website and the school district's website. The Education Directory for Children With Special Needs provides state-specific information and resources and other valuable information and tools that all families can use to help with a smooth transition as they relocate.

Guardianship and Conservatorship

Guardianship and conservatorship need to be considered when relocating out of state or outside the continental United States as there are jurisdictional issues and conflicting laws. Many states have laws addressing the recognition and registration of foreign or out-of-state guardianships. Some state laws require guardians to notify or petition the original court before transferring to a different county, state or country. If families relocate to a state that does not recognize out-of-state guardianships or conservatorships, they may have to restart the legal process.

To find more information or the states that have enacted the Uniform Adult Guardianship and Protective Proceedings Jurisdiction Act, visit https://www.guardianship.org.

The Uniform Adult Guardianship and Protective Proceedings Jurisdiction Act has been adopted by many states. In those states, the incapacitation order may

be recognized if the guardian notifies the court that issued the original guardianship order and registers the original guardianship order with the local court at the new location.

Relocating State to State

Potential changes in legal, financial and medical entitlements need to be taken into consideration when a family relocates within the continental United States. States vary in terms of the services they provide beyond the federal government requirements. Changes in pay, such as receipt of a higher basic allowance for housing, may impact a family's eligibility to receive assistance such as Supplemental Security Income and Medicaid.

Assist families by helping them prepare for potential changes in government benefits.

Relocating Overseas

Overseas Screening

All service members and their families traveling overseas at government expense must complete the family member travel screening process. Part of the screening process for each service involves identifying medical and educational needs that require coordination during relocation. The military medical departments and DODEA schools overseas collaborate in determining if identified medical and educational needs are available at the overseas location. Assignment coordination occurs when the personnel command requests that medical or educational professionals review a family member's documented needs to determine availability of services at the projected location.

Humanitarian or Compassionate Reassignments

At some point during a tour of service, a service member may experience a severe family hardship. Emergency leave may not always be practical or long enough to address issues, but the services have policies in place that allow military members to be temporarily reassigned or deferred from assignment in the event of a severe family hardship. The Army refers to this as "Compassionate Assignments," while the Marine Corps, Navy and Air Force refer to it as "Humanitarian Assignments." Service members submit their requests through their chain of command. Family members and other individuals cannot do this for their service member. Consult your service regulations for more information about humanitarian or compassionate reassignments.

Standardization FAQs and Myth Busters

Military families' experiences with EFMP are varied due to their service branch, assignment location or specific need. As an EFMP service provider you can increase program awareness, dispel myths and encourage enrollment as you facilitate access to a range of EFMP support services.

Understand that new EFMP families may think that enrollment can be career limiting, assignments may be a dead end and EFMP may not provide the assistance they need anyway. It's important that EFMP delivers the messaging and services to bust those myths and deliver a positive experience for families across services and locations.

The Defense Department is working toward standardizing the three components of the Exceptional Family Member Program across the military services: Identification/Enrollment, Assignment Coordination and Family Support. This ongoing process will:

- Ensure the same level of access to services regardless of military service affiliation and location – particularly in joint locations or where service members are assigned to a sister service
- Develop uniform policies and procedures for implementation across the military services
- Develop a system for reporting and continuous monitoring of family needs and available resources
- Monitor business processes and forms, as well as develop information technology solutions

Identification and enrollment is the point of entry into EFMP. Enrollment in EFMP is mandatory for active-duty military members who meet enrollment criteria. The services have standardized the EFMP point-of-entry process. This ensures families have a consistent experience when they identify and enroll in EFMP.

Assignment coordination ensures the family's special needs are considered during the assignment process. Each service branch uses the same criteria for determining the availability of services. Service members now learn the reason for approved or declined orders and have 14 days to request a second review.

Family Support enables the family to become its own best advocate by helping them identify and connect with resources, expert consultations, education and community support. There is now a requirement for EFMP Family Support providers to complete at least one annual personal contact to each family assigned to their caseload and every family using the respective service's respite care program.

Disenrollment occurs when the condition for which the family member was enrolled has resolved. EFMP instructs families on how to disenroll and monitors the disenrollment process.

Respite care provides short-term relief for primary caregivers – anywhere from a few hours to a few weeks. Respite care can be arranged daily, weekly or as needed.

The number of respite care hours are consistent across the services. This means some services will have an increase in hours, but some will experience a decrease.

- Adult dependents are eligible for respite care.
- External respite care eligibility doesn't impact family eligibility for EFMP respite care.
- Siblings are not eligible for respite care.
- Respite care is not available for families stationed OCONUS.
- Unused respite care hours no longer roll over from month to month.
- Families have the ability to request additional services based on exceptional circumstances.

It is important to increase understanding of EFMP, realizing that it is an ongoing process. OSN efforts focus on continuous program improvement and enhancing the EFMP experience for all families. Clear, concise communications about standardization efforts will improve families' understanding of EFMP and how it works. Developing standard messaging for social media, providing outreach to families, and delivering educational opportunities for families, leadership and team members are all key to standardize and continue to improve services for families no matter their service branch or location.

APPENDIX A:

Public Benefits Resource Table

RESOURCE	CONTACT	ORGANIZATION	PURPOSE			
SSI AND SSDI						
Your Benefits Connection	http://www.benefits.gov	Benefits.gov – Your Benefits Connection	Using a questionnaire, this site informs citizens of benefits for which they may be eligible. The site also contains information about more than 1,000 benefit and assistance programs.			
Understanding the Benefits booklet	https://www.ssa.gov/pubs/ EN-05-10024.pdf	Social Security Administration	A guide to understanding your Social Security Benefits.			
Military Service and Social Security	https://www.ssa.gov/pubs/ EN-05-10017.pdf	Social Security	A fact sheet about how military service affects Social Security benefits.			
Local Office Locator	https://secure.ssa.gov/ apps6z/folo/ fo001.jsp	Social Security Administration	A tool for locating Social Security offices.			
Centers for Medicare and Medicaid Services	https://www.cms.gov	United States Department of Health and Human Services – Centers for Medicare and Medicaid Services	Guidelines and forms pertaining to Medicare, Medicaid, Supplemental Security Income and resource limits and special income levels			
Internet Appeal: How to Appeal a Decision on Your Social Security Disability Claim Online	https://secure.ssa.gov/ iApplsRe/start	Social Security Administration	An introduction to the process for requesting a review of the Social Security Administration's medical decision denying an application for disability benefits			
Benefits for Children With Disabilities booklet	https://www.ssa.gov/pubs/ EN-05-10026.pdf	Social Security Administration	This is for parents, caregivers or representatives of children younger than age 18 with disabilities that might make them eligible for Supplemental Security Income payments. It is also for adults who became disabled in childhood and who might be entitled to Social Security Disability Insurance benefits.			

RESOURCE	CONTACT	ORGANIZATION	PURPOSE		
The Social Security Administration's Program for Wounded Warriors and Veterans	http://www.ssa.gov/people/ veterans	Social Security Administration	The policy that explains the Social Security Administration's treatment for wounded warriors and veterans who have a compensation rating of 100% permanent and total		
Disability Planner: Social Security Protection if You Become Disabled	http://www.ssa.gov/dibplan	Social Security Administration	An overview of what benefits are available, what the eligibility criteria are, who can receive benefits, how to apply for the benefits and what happens when an application is approved		
Red Book	https://www.ssa.gov/ redbook/eng/main.htm	Social Security Administration	A summary guide to employment supports for individuals with disabilities under the Security Disability Insurance and Supplemental Security Income programs		
Understanding Supplemental Security Income	https://www.ssa.gov/ssi/ text-understanding-ssi.htm	Social Security Administration	A comprehensive overview of Supplemental Security Income		
Spotlight on Special SSI Rules for Children of Military Personnel Living Overseas	https://www.ssa.gov/ssi/ spotlights/spot-military- overseas.htm	Social Security Administration	An overview page regarding Supplemental Security Income and how it pertains to children of military personnel living overseas		
Adult Benefit Application Procedures	http://www.ssa.gov/ applyfordisability	Social Security Administration	An overview of the process for applying for Supplemental Security Income disability benefits for adults over 18		
Work Credits Needed for Disability Benefits	http://www.ssa.gov/retire2/ credits3.htm	Social Security Administration	Rules and ages for work credits		
Disability Benefits booklet	https://www.ssa.gov/pubs/ EN-05-10029.pdf	Social Security Administration	Detailed information on applying for Social Security Disability Insurance benefits		
Medicare					
Medicare Eligibility Tool	http://www.medicare.gov/ eligibilitypremiumcalc		Information about Medicare eligibility and enrollment		
Medicare FAQs	http://cms.hhs.gov/ Medicare/Medicare.html	Department of Health and Human Services – Centers for Medicare and Medicaid Services and Medicare.gov	General Medicare information, eligibility and enrollment		

RESOURCE	CONTACT	ORGANIZATION	PURPOSE		
		Medicaid			
Link to State Medicaid Agency Websites	http://medicaiddirectors. org/about/medicaid- directors	National Association of State Medicaid Directors	A tool providing links to state Medicaid offices		
Understanding Medicaid Home and Community Services: A Primer	http://aspe.hhs.gov/daltcp/ reports/primer.pdf	George Washington University's Center for Health Policy Research	A guide to the Medicaid program		
Vocati	ional Rehabilitation Se	rvices and Employ	ment-Related Programs		
Workforce Innovation and Opportunity Act	https://www.dol.gov/ agencies/eta/wioa	Department of Labor	An overview of the Workforce Investment Act		
The Work Incentives Planning and Assistance Program	https://www.ssa.gov/work/ WIPA.html	Social Security Administration	Referrals to state Work Incentives Planning and Assistance sites		
Client Assistance Program	http://www.ndrn.org/ndrn- member-agencies.html	National Disability Rights Network	An overview of when and why to contact a state client assistance program		
	Supplemental N	lutrition Assistanc	e Program		
Supplemental Nutrition Assistance Program	https://www.fns.usda.gov/ snap/state-directory	Department of Agriculture	An overview of Supplemental Nutrition Assistance Program		
Supplemental Nutrition Assistance Program Office Locator	http://www.fns.usda.gov/ snap/outreach	Department of Agriculture	A tool for finding local Supplemental Nutrition Assistance Program offices		
Women, Infants, and Children					
Women, Infants, and Children	https://www.fns.usda.gov	Department of Agriculture	An overview of WIC, information regarding eligibility and contact information		
WIC Overseas	http://www.tricare.mil/wic	Defense Department	Information on the Defense Department Women, Infants, and Children Overseas Program for eligible participants living overseas		

RESOURCE	CONTACT	ORGANIZATION	PURPOSE				
Home Ownership							
Housing Choice Voucher Program (Section 8)	http:// affordablehousingonline. com/housing-help	Affordable Housing Online	An overview of the Housing Choice Voucher program in question-and-answer format				
Low Income Home Energy Assistance Program	http://www.acf.hhs.gov/ programs/ocs/programs/ liheap	Department of Health and Human Services Administration for Children and Families	A tool for locating state offices				
Low Income Telephone Service	http://www.fcc.gov/lifeline	Universal Service Administration Company	An overview of discounted telephone service				

APPENDIX B:

A-Z Index of Government and Non-Government Agencies and Resources

This index, provided by USA.gov, links to government websites that provide useful, timely, citizen-centered government information and services and can be located at https://www.usa.gov/federal-agencies

Administration on Disabilities

The Administration on Disabilities collaborates with states, communities and partners in the disability network to equip individuals with disabilities of all ages with opportunities, tools and supports to lead lives of their choice in their community.

https://acl.gov/about-acl/administration-disabilities

Air Force Aid Society

The Air Force Aid Society is a nonprofit organization that provides emergency assistance to active-duty service members and their families. Assistance is given in the form of interest-free loans and grants. The AFAS also has a respite care program designed for personnel with family members who have special medical and/or educational needs. http://www.afas.org

American Red Cross

The American Red Cross offers support and comfort to military members and their families by helping them stay connected during deployments and emergency situations. The American Red Cross also provides access to financial assistance, counseling and assistance to veterans.

http://www.redcross.org

Armed Services YMCA

Armed Services YMCA supports military personnel and their families through educational, recreational, social and religious programs and services. The ASYMCA sponsors a number of support groups, including a group for military families who have children with disabilities. http://www.asymca.org

Army Emergency Relief

Army Emergency Relief is a nonprofit organization that provides financial assistance to soldiers and their families through the use of interest-free loans and grants for emergency assistance. http://www.aerhg.org

Benefits.gov

This is the official benefits website of the U.S. government, which contains information on more than 1,000 benefit and assistance programs. Individuals can search for benefits by state, category or agency and can assess eligibility for specific benefits by completing a short questionnaire. http://www.benefits.gov

Centers for Disease Control and Prevention

The Centers for Disease Control and Prevention has a primary online communication channel for the CDC designed to provide users with credible, reliable information on diseases and conditions, health statistics, environmental health, healthy living and life stages, and safety. http://www.cdc.gov

Centers for Medicare and Medicaid Services

This federal agency administers the Medicare program and works in partnership with state governments to administer Medicaid, the State Children's Health Insurance Program and health insurance portability standards. https://www.cms.gov/

Computer/Electronics Accommodations Program

Computer/Electronics Accommodations Program provides face-to-face communication tools for Defense Department programs such as family centers, which serve clients who are deaf and hearing impaired. https://www.tricare.mil/Plans/SpecialPrograms/CAP

Department of Defense Education Activity

The DODEA plans, directs, coordinates and manages the education programs for eligible dependents of military personnel and civilian personnel of the Defense Department. The DODEA website provides general information about the DODEA, curriculum standards and programs, and resources and tools for parents of children enrolled in DODEA schools.

http://www.dodea.edu

Department of Defense Education Activity Educational Partnership

The DODEA works collaboratively with the Department of Education and other organizations to ease the transition of military dependent students from attendance in DODEA schools to attendance in military-connected local schools. The partnership ensures quality education, seamless transitions and deployment support for military students.

https://www.dodea.edu/partnership/index.cfm

Department of Defense Voluntary Education

The DOD Voluntary Education program offers eligible service members the opportunity to further their education through a variety of programs and services provided by the individual branches of service. The DOD Voluntary Education site provides an overview of the program and links to the voluntary education programs for each.

http://www.militaryonesource.mil/voluntary-education

Department of Education Website

The U.S. Department of Education administers some 200 programs, publishes many reports annually and maintains thousands of webpages selected especially for parents, teachers, students and administrators. The site provides information on financial aid, grants and contracts, policy, programs, and research and statistics. The site also supports links to state departments of education, K-12 schools, school districts, and colleges and universities, as well as other government web resources, libraries and education organizations. http://www.ed.gov

Department of Housing and Urban Development State Information

This site provides links to the state Department of Housing and Urban Development agencies. The HUD supports sustainable, inclusive communities and quality, affordable homes free from discrimination. https://www.hud.gov/states

Department of Justice, Office of Civil Rights, Disability Rights Section

The Disability Rights Section works to achieve compliance with the Americans with Disabilities Act. The section's enforcement, certification, regulatory, coordination, and technical assistance activities, required by the ADA, combined with an innovative mediation program and a technical assistance grant program, provide a cost-effective and dynamic approach for carrying out the ADA's mandates. http://www.justice.gov/crt/about/drs

Department of Labor Office of Disability Employment Policy

The Department of Labor Office of Disability Employment Policy employs a comprehensive strategy of public education, outreach and evidence-based policy research and demonstrations to reach employers, businesses and the disabled community concerning the most effective ways to tap the underutilized talents of workers with disabilities. http://www.dol.gov/odep

Early Childhood Technical Assistance Center

The Early Childhood Technical Assistance Center serves all 50 states with an array of services and supports to improve service systems and outcomes for infants, toddlers and preschool-age children with special medical and/or educational needs and their families. Information about each state's criteria for early intervention services, its lead agency and the Part C coordinators is available through this site. http://ectacenter.org

Family Voices

Family Voices is a national organization advocating for family-centered care for children and youth with special health care needs. The site provides a map that locates Family-to-Family Health Information Centers. These centers advocate for improved policies, establish partnerships with professionals and give families tools to make informed decisions. http://www.familyvoices.org

GPO Access

This site contains all published versions of bills from the 103rd (1993-1994) Congress forward. https://www.govinfo.gov/app/collection/BILLS/

Maternal and Child Health Bureau - Title V

State Title V programs use block grant funding to build capacity and systems, conduct public education and outreach, train providers and support services for children with special health care needs, provide newborn screening and genetic services, work on lead poisoning and injury prevention, and promote health and safety in child care settings.

http://www.mchb.hrsa.gov/programs

Medicaid

The U.S. Department of Health and Human Services provides a wealth of information about Medicare and Medicaid, including eligibility information, coverage details and a description of the Children's Health Insurance Program.

Medicaid covers comprehensive residential long-term care services in skilled nursing facilities and some home and community-based services. Each state sets its own Medicaid guidelines regarding eligibility and services. http://www.cms.gov/home/medicaid.asp

Medicare.gov

This is the official U.S. government site for Medicare. Medicare is a federally sponsored health insurance program designed to assist individuals who are elderly or have disabilities in securing reimbursement for some of their medical expenses. Medicare.gov provides an eligibility tool, general Medicare information, specific enrollment and eligibility information and a resource locator. http://www.medicare.gov

MilitaryINSTALLATIONS

This is a searchable directory of worldwide installation and state-related military information, programs and services. It provides easy access to articles, resource directories, maps, contact information, links to local community points of interest and the ability to search the internet for additional information on the installation or surrounding area.

https://installations.militaryonesource.mil

Military OneSource

This is the DOD website for official Military Community and Family Policy program information, policy and guidance designed to help service members and their families, leaders and service providers. Military OneSource addresses a range of topics and includes FAQs, resources and corresponding legislation and policy information. The Special Needs/EFMP content offers information on a number of topics, organizational tools, hundreds of general resources and promotional materials. https://www.militaryonesource.mil

Military OneSource Special Needs Consultants

Military OneSource provides a team of highly qualified special needs consultants who specialize in the lifestyle of military families with special medical and/or educational needs. Families can speak with a consultant for answers to a wide range of questions about family support, transitioning, post-secondary education, housing, moving and support for adults. Call Military OneSource at 800-342-9647. Ask for an appointment with a special needs consultant.

National Dissemination Center for Children with Disabilities

The National Dissemination Center for Children with Disabilities offers a wealth of information on topics such as disabilities in children and youth, programs and services for children with disabilities, and special education law. The Families and Community section includes descriptions of disability characteristics, overviews of relevant laws, research summaries and additional resources. The website includes a state-specific section that provides names and contact information for state-related resources. http://www.parentcenterhub.org

Navy-Marine Corps Relief Society

The Navy-Marine Corps Relief Society is a nonprofit organization that provides financial assistance in the form of budget counseling, loans, grants, scholarships and visiting nursing services to members of the Navy and Marine Corps and their families. http://www.nmcrs.org

Office of Special Education Programs

The Office of Special Education Programs within the U.S. Department of Education supports a comprehensive array of programs and projects. These are authorized by the IDEA to improve results for infants, toddlers, children and youth with disabilities. The OSEP implements program improvement through research, demonstration, outreach, technology development, technical assistance, training, evaluation and service delivery.

http://www2.ed.gov/about/offices/list/osers/osep

Parent to Parent USA

Parent to Parent USA is a national nonprofit organization. Its goal is to provide emotional support and information to families who have children and youth with disabilities by establishing one-to-one matches between parents who seek support from experienced and trained support parents. http://www.p2pusa.org

Plan My Move

Plan My Move is a set of online organizational tools designed to make frequent moves easier for service members and families. Available tools include a customizable calendar, to-do lists, departure and arrival checklists, installation overviews and installation-specific information on a number of topics such as education, child care and employment.

Plan My Move also provides specialized information, such as travel and arrival checklists and contact information for EFMP for families traveling with members who have special medical and/or educational needs. https://planmymove.militaryonesource.mil

Ready.gov

The Federal Emergency Management Agency website provides information and materials to assist families in preparing for emergencies or disasters. It also encourages families to keep an emergency kit, make a plan and be informed about the different types of emergencies that can happen in their area. http://www.ready.gov

Rehabilitation Services Administration

The Rehabilitation Services Administration oversees grant programs that help individuals with physical or mental disabilities obtain employment and live more independently. It provides references for such supports as counseling, medical and psychological services and job training. The RSA's grant program provides funds to state vocational rehabilitation agencies to provide employment-related services for individuals with disabilities.

https://www2.ed.gov/about/offices/list/osers/rsa

Sesame Workshop

The Sesame Workshop organizes military outreach programs that provide support and significant resources to military families with young children who are suffering the effects of a parent's deployment or injury. The initiative includes a secured site to connect family members, a prime-time PBS special with stories about service members with injuries, DVDs, posters and other items for decorating children's rooms.

http://www.sesameworkshop.org and https://sesamestreetformilitaryfamilies.org

Social Security Online

This is the official site of the U.S. Social Security Administration. It provides information on retirement, disability benefits, Supplemental Security Income and Medicare. Individuals can use the site to apply for these benefits, find local SSA offices and read several helpful publications on a wide range of programs. http://www.ssa.gov

Social Security Disability Insurance

Social Security Disability Insurance is the income assistance program that provides a monthly cash benefit to individuals who were born with or have acquired a disability. The SSA website provides information on how to determine eligibility, apply for the benefits and appeal decisions about disability claims. http://www.ssa.gov/pgm/links_disability.htm

Supplemental Security Income

Supplemental Security Income is the income assistance program that provides a monthly cash benefit designed to help those who are aged, blind or disabled who have little or no income. The SSA website provides an eligibility screening tool, a summary of the application process, contact information for local SSA offices and downloadable booklets that provide comprehensive information about SSI. http://www.ssa.gov/ssi

TRICARE

TRICARE is the DOD's worldwide health care program. It combines the military's direct health care system of hospitals and clinics with a network of civilian health care professionals.

TRICARE's website includes information on many TRICARE plans including TRICARE Prime,

TRICARE Prime Remote, TRICARE Select, TRICARE Reserve and TRICARE For Life. In addition,
the website covers topics such as TRICARE enrollment, cost-share information, covered services,
case management services, claim denials and the appeals process, and regional contractor
information. https://www.tricare.mil

TRICARE Extended Care Health Option

TRICARE ECHO is a supplemental program to TRICARE that provides financial assistance to eligible active-duty family members who qualify based on specific mental or physical disabilities. ECHO offers services and supplies that are not available through TRICARE. https://www.tricare.mil/Plans/SpecialPrograms/ECHO

U.S. AbilityOne Commission

AbilityOne helps people who are blind or have other severe disabilities find employment. The U.S. AbilityOne Commission helps people coordinate activities with nonprofit organizations across the country to employ these individuals and provide goods and services to the federal government at a fair price. https://www.abilityone.gov

U.S. Department of Agriculture Food and Nutrition Service

The USDA Food and Nutrition Service funds nutrition assistance programs that provide children and people with low income with access to food, a healthful diet and nutrition information. The USDA programs include WIC and SNAP, formally known as the Federal Food Stamp Program. http://www.fns.usda.gov

U.S. Department of Health and Human Services

The U.S. Department of Health and Human Services Administration for Children and Families provides information on numerous topics and offers several beneficial programs such as the Low Income Home Energy Assistance Program and Head Start. https://www.acf.hhs.gov

APPENDIX C:

Glossary of Terms

For a glossary of key EFMP program area terms and definitions, log into the service provider section of EFMP & Me.

A

Accessible. Approachable, enterable and usable by individuals with physical disabilities.

Active listening. Communication technique that requires the listener to feedback what they hear to the speaker, by restating or paraphrasing what they have heard in their own words, to confirm what they heard and to verify the understanding of both parties.

Adults with special health care needs. Any family member 18 years or older who has documented special medical needs.

Advance health care directive. Provides legally binding instruction regarding health care decisions should a person become unable to make the decisions themselves.

Advisory councils. Federal employees who function as the equivalent to state boards of education. They make recommendations to the secretary of defense and the various leadership levels within the DODEA regarding policy, programs and practices that impact the overall educational system.

Americans with Disabilities Act. Federal law that provides civil rights protections to individuals with disabilities in all areas of public life, including jobs, schools, transportation and all public and private places that are open to the general public. The purpose of the law is to make sure people with disabilities have the same rights and opportunities as everyone else.

Architectural Barriers Act of 1968. Requires that buildings and facilities designed, constructed or altered with federal funds be accessible.

Assistive technology. Any item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain or improve functional capabilities of individuals with disabilities (29 U.S.C. Sec 2202(2)).

B

Basic allowance for housing. Military-based allowance prescribed by geographic duty location, pay grade and dependency status. It provides uniformed service members equitable housing compensation based on housing costs in local civilian housing markets within the United States when government quarters are not provided.

Basic allowance for subsistence. Military-based allowance intended to provide meals for the service member. Its level is linked to the USDA food cost index.

Beneficiary Counseling and Assistance Coordinators. Designated positions typically found within most military treatment facilities and at all TRICARE regional offices. Coordinators provide information, guidance and assistance on benefit options, enrollment, special authorizations, claims, referrals and appointments. They work with MTF staff, managed care support contractors and claims processors to resolve concerns and problems that cannot be addressed through normal channels.

Benefits.gov. Online access to government benefit and assistance programs with an eligibility questionnaire.

C

Carl D. Perkins Vocational and Technical Act of 1998. Improves the academic and occupational competence of all vocational students with an emphasis on special populations.

Case study committee. Team of DODEA school personnel who are credentialed in different areas of expertise – such as psychology, social work, nursing, special education and regular education – who work to determine special education eligibility of a child attending a DODEA school.

Centers for independent living. Independent living programs seek to maximize the leadership, empowerment, independence and productivity of individuals with disabilities and to integrate these individuals into the mainstream of American society.

Child Find. Organized effort to identify and screen children from birth to age 21 who might be eligible for early intervention services and special education services.

Collaboration. The process and outcome in which shared interest or conflict is addressed by multiple representatives from different programs or organizations.

Command sponsorship. Family travel/relocation overseas that is endorsed by the appropriate military commander. Provides for certain entitlements and travel at government expense.

Compassion fatigue. The gradual lessening of sensitivity over time; can be a consequence of being a support provider or a caretaker.

Computer/Electronics Accommodations Program. A DOD reasonable-accommodation program serving DOD employees and wounded service members with disabilities. The CAP is authorized to provide free assistive technology, devices and support services to federal agencies that have partnership agreements with CAP.

Conservator. Person, corporation or state agency that protects and manages an incapacitated individual's money and property.

Contact note. A document that tracks the flow of services provided to a family, and their progress.

Cultural competency. The ability to work effectively with individuals from different cultural and ethnic backgrounds or in settings where several cultures coexist.

D

Debt Collection Assistance Officers. Designated personnel within military treatment facilities that assist families with debt collection when a provider has initiated collection for services that have not been paid for by TRICARE. The DCAO helps families understand and resolve the underlying debt collection issue.

Defense Eligibility Enrollment Reporting System. Maintains personnel and benefits information for eligible personnel, produces DOD identification cards and supports benefit delivery including medical, dental, educational and life insurance.

Department of Defense Dependents Schools. A network of primary and secondary schools for eligible dependents of active-duty service members and DOD civilians in 12 foreign countries. The DOD Dependents Schools are operated by the DODEA.

Department of Defense Education Activity. The umbrella agency that operates DOD Dependent Schools and DOD Domestic Dependent Elementary and Secondary Schools.

Department of Finance and Accounting Service. Pays all DOD military and civilian personnel, retirees and annuitants. Makes dependency determinations for service members in the Army, Navy and Air Force.

Deployment. The temporary relocation of military personnel and material to desired operational areas.

DOD identification card. An identification card issued to eligible dependents and other eligible individuals.

Domestic Dependent Elementary and Secondary Schools. DOD schools located in Alabama, Georgia, Kentucky, New York, North Carolina, South Carolina, Virginia, Guam and Puerto Rico.

Durable equipment. Equipment that does not meet the criteria for durable medical equipment but is essential to stop or reduce functional loss resulting from a qualifying condition. A physician must certify the item as medically necessary for the treatment of the beneficiary before TRICARE'S ECHO will authorize the item.

Durable medical equipment. Medically necessary equipment and care – ordered by a physician for specific use by the beneficiary to improve quality of life – that can withstand repeated use. The DME is available through the TRICARE basic program.

Ε

Early intervention services. Provides services to eligible infants and toddlers under age 3 who meet the definitions of developmental delay or are exposed to the conditions that are likely to result in developmental delay.

Educational and Developmental Intervention Services. Responsible for providing early intervention services to eligible infants and toddlers with disabilities in the United States and overseas in areas served by DODEA schools. Also responsible for providing related services at overseas locations.

Estate planning. Strategy used to direct property to the proper beneficiaries, diminish tax liability and other costs, and to arrange for property management or disposition in the event of physical disability, mental disability or death.

Extended Care Health Option. Additional services and supplies not available through the basic TRICARE program to active-duty family members and family members of National Guard or reserve members activated for more than 30 days. The ECHO is not available to dependents of military retirees.

ECHO Home Health Care. Provides ECHO-registered families with various services, including skilled nursing care, a home health aide, physical and occupational therapies, speech-language pathology services, medical social services, teaching and training activities, and medical supplies.

ECHO Respite Care. Provides a maximum of 16 hours of skilled and non-skilled care in the absence of the primary caregiver.

Extended Home Health Care Respite Care. Provided to ECHO-registered families for the purpose of allowing up to five days of care per calendar week to give the primary caregiver the opportunity to rest or sleep.

F

Family Care Plan. Command-directed document that outlines legal, medical, logistical, educational, monetary and religious care for family members in the absence of the service member.

Family child care. Installation program that provides flexible child care for infants and children in a family home. Providers and their family members must complete successful background checks and providers must complete required DOD-provider ongoing training.

Family Readiness officers. Point of contact at the unit level who assists families in meeting the challenges of separation and deployment.

Family subsistence supplemental allowance. DOD monthly cash allowance of up to \$500 for low-income service members. The FSSA raises the basic allowance for subsistence so that the family no longer requires or qualifies for food assistance.

G

Guardian ad litem. Typically, a lawyer who independently investigates the facts and circumstances surrounding a case and advocates in the legal process for the best interest of the individual regarding issues of conservatorship or guardianship.

Guardian. Court-appointed person who has been awarded decision-making authority for all aspects of an incapacitated individual's life.

Н

Home and community-based services waivers. Medicaid waiver programs that enable individuals to live, work and participate in communities of their choice, avoiding institutionalization. Waivers also provide for personal care and assistance, health-related services, specialty and adaptive services, family and social supports case management, and service coordination.

Hospice care. Supportive care designed to provide comfort and support to families when a life-limiting illness no longer responds to cure-oriented treatments. TRICARE covers hospice care for terminally ill family members with a prognosis of less than six months.

Humanitarian or compassionate assignments. Process that allows military members to be temporarily reassigned or deferred from assignment in a situation of severe family hardship.

Independent educational evaluation. An evaluation conducted by a qualified examiner who is not employed by the public agency responsible for the education of the child in question.

Individualized Education Program. A written statement for a child with a disability that is developed, reviewed and revised in accordance with the Individuals with Disabilities Education Act.

Individualized Family Service Plan. A written document for an infant or toddler, age birth through 2 years, with a disability, and the family of such infant or toddler, that is developed, reviewed and revised according to the Individuals with Disabilities Education Act.

Individuals with Disabilities Education Act. Governs how states and public agencies provide early intervention, special education and related services to children with disabilities.

Intermediate Care Facilities Benefit. A benefit provided by Medicaid to fund institutional placement and treatment for people with developmental disabilities.

Letter of intent. Allows family members to provide written instruction to the person caring for and making decisions for the individual with special medical and/or educational needs.

Living will. Set of written instructions explaining a person's wishes regarding endof-life decisions in the event that the person becomes terminally ill and is unable to communicate with his or her doctor.

M

Medicaid. Federal and state medical assistance program for low-income individuals who fall into one of several categories or groups specified by federal statute. Providers are reimbursed by the program.

Medical case management. Helps families find solutions to complex health problems by planning and coordinating inpatient, post-hospital and ambulatory care for individuals with multiple needs. They also provide information and referral regarding services available within a military treatment facility, the TRICARE network or other military and civilian resources.

Medicare. A federally sponsored health insurance program designed to assist the elderly or disabled in securing reimbursement for some medical expenses. The program reimburses doctors, hospitals and pharmacies much like a private insurance company.

Military relief societies. Typically located on the installation. Private, nonprofit organizations that provide emergency financial assistance in the form of interest-free loans and grants to active and retired service members and their families.

Military OneSource. A DOD sponsored program that provides information, resources and personalized support to help military service members and their families balance work and family life. Support is available 24 hours a day, seven days a week via phone, email or online and is provided by specialized consultants and state-licensed mental health professionals.

Military OneSource special needs consultant. Military OneSource provider who assesses family needs and can answer questions on a variety of topics including moving, benefits, education, finances, housing, support groups and medical resources.

MilitaryINSTALLATIONS. An online directory of programs and services available on or near military installations. Includes contact information for EFMP locations worldwide, maps, community points of interest and search capabilities for information on the installation and the surrounding area.

Mission. The goal of the service or installation that describes its purpose, provides a sense of direction and guides decision making.

N

Needs Assessment. A systematic process family support staff conduct in partnership with families to determine and address family needs or "gaps" between current conditions and desired conditions or "wants." This process lays the groundwork for developing goals and objectives to help families meet their desired conditions or "wants" (services plan).

Non-clinical case management. The provision of information and referral such as medical, educational, social, community, legal and financial services, to families and individuals to assist them in making informed decisions and navigating resources to improve their quality of life. This does not involve coordination and follow-up of medical treatments.

0

OCONUS. Acronym for outside the continental United States.

Office of Special Needs. DOD office that develops policies to enhance existing support services and provides oversight of service activities that support military families with special medical and/or educational needs.

Overseas screening. Process of verifying the availability of medical and educational services prior to relocation to an overseas duty location. The screening process involves the military medical departments and DOD Dependents Schools overseas.

P

Power of attorney for health care. Legal document wherein a person with capacity names another individual to make health care decisions on his or her behalf, should they become incapacitated.

Primary care manager. TRICARE provider responsible for providing routine care and referrals for any needed specialty care.

Professional boundaries. The limits that allow for safe and appropriate interactions between providers and the families they support.

Public benefits. State and federal programming that provides benefits and funding or other assistance for necessities of life.

Q

Quality assurance plan. Provides systemic monitoring and objective evaluation regarding the access to and appropriateness of care and services. Provides measurable outcomes that demonstrate all program standards and family needs are being met.

Quality of life. Encompasses the entire package of compensation, benefits, and working and living environments for service members.

Quality of life reviews. Generate recommendations for improvements and evaluate progress toward meeting previously identified program goals.

R

Rehabilitative therapy. Physical therapy, rehabilitation counseling, mental health services, speech pathology services or occupational therapy provided to improve, restore and maintain function or to minimize or prevent deterioration of function.

Resilience. The ability to withstand, overcome and adapt in positive ways to an immediate crisis or an ongoing challenge.

Respite care. Temporary relief to families and primary caregivers by providing short-term breaks from caregiving.

Reunion. The return of military personnel from deployment to their family.

S

School Liaison Program. Installation program that brings together local school personnel, installation commanders and families to support military school-age children on educational issues.

Section 504 of the Rehabilitation Act of 1973. Prohibits public and private programs and activities that receive federal funding, including the DOD, from discriminating on the basis of disability.

Section 8 of the Housing Act. Assists low-income individuals and individuals with disabilities in securing housing by providing rental assistance to be paid directly to an individual's landlord or helps qualified first-time home buyers pay their mortgage.

Self-advocacy. An individual's ability to effectively communicate, negotiate or assert his or her own interests, desires, needs and rights. It involves making informed decisions and taking responsibility for those decisions.

Self-disclosure. The intentional or unintentional sharing of personal information.

Services plan. An individualized plan written in collaboration with the family or the family member with special medical and/or educational needs that documents the goal(s) and steps to achieve the desired outcome.

Skilled nursing services. Medically necessary services provided by a registered nurse or a licensed practical or vocational nurse under the supervision of a registered nurse and ordered or supervised by a TRICARE-authorized physician.

Social Security Administration. Provides benefits to individuals affected by disability or retirement and the surviving spouses of those individuals. Eligible beneficiaries are paid in the form of cash benefits called Supplemental Security Income and Social Security Disability Insurance.

Social Security Disability Insurance. SSA cash benefit program available to adults and children. It is based on the work history of the individual or the child's parent and is dependent upon the age of the person and the number of years the person has worked. The SSDI pays for only total disability.

Special education. The practice of educating students with special medical and/or educational needs in a manner that addresses their differences and needs.

Special needs trusts. Discretionary trusts created for people with disabilities which allow for receipt of inheritance funds while allowing the disabled individual continued access to public benefits.

Standard operating procedures. Clearly written set of instructions detailing methods and procedures for carrying out a routine or recurring task.

Status of Forces Agreements. A treaty between the United States and another nation specifying the laws governing U.S. military personnel assigned in that nation and those accompanying the U.S. military personnel.

Supplemental Nutrition Assistance Program. Federally funded, state-administered cash benefit program formally known as the Food Stamp Program.

Supplemental Security Income. SSA income-assistance program that provides a monthly cash benefit designed to supplement the income of eligible children, adults who are blind, disabled or over the age of 65. The cash benefit must be used for food, clothing and shelter.

Survivor Benefit Plan. Annuity payments made to surviving spouses and/or children of deceased retired service members. Enrollment in the SBP is optional and takes place at retirement. Monthly premiums are deducted from the service member's retirement pay.

T

The Privacy Act of 1974. Safeguards individuals against the invasion of personal privacy and allows them access to relevant government records.

Ticket to Work. SSA program that provides disabled beneficiaries with tickets that they may use to obtain employment, vocational rehabilitation services or other support from public and private agencies and employers.

TRICARE. DOD's worldwide health care program that combines the military's direct health care system of hospitals and clinics with a network of civilian health care professionals authorized to receive reimbursement.

TRICARE Young Adult. Health care plan that qualified adult children can purchase after eligibility for "regular" TRICARE coverage ends at age 21 (or 23 if enrolled in college).

U

Unearned income. Income earned from sources other than employment.

Uniform Adult Guardianship and Protective Proceedings Jurisdiction Act.

Agreement between states to recognize out-of-state incapacitation orders if the guardian notifies the court that issued the original guardianship order and registers the original guardianship order with the local court at the new location.

Uniform Federal Accessibility Standards. Design standards under the Architectural Barriers Act of 1968. Requires that at least 5% of the total or at least one unit of all housing constructed must be designed and built to be accessible or readily and easily modifiable to be accessible.

Universal Service Fund. Federal Communications Commission program to help low-income individuals and families establish and maintain telephone service by discounting basic local service provided by local telephone companies. The programs available to support individuals with low incomes include Lifeline, Link Up and Toll Limitation services.

V

Vocational rehabilitation. Assists individuals with disabilities in securing and keeping employment. Includes state assistive technology centers, centers for independent living, a protection and advocacy program, and initiatives for supported competitive employment.

W

Will. Tool used in estate planning that gives an individual the ability to legally declare an executor to manage and distribute their estate to designated beneficiaries at death. It also provides intent for the care for any minor children by nominating a legal quardian.

Women, Infants, and Children program. Federally funded grant program that provides supplemental food, health care and nutrition education to low-income pregnant, breastfeeding and non-breastfeeding post-partum women and children up to the age of 5 who are at nutritional risk.

Women, Infants, and Children Overseas program. A DOD program that provides WIC benefits to eligible participants living overseas.

Work Incentives Planning and Assistance. Program offered to all SSA beneficiaries with disabilities. Provides benefit planning and assistive services to individuals with disabilities, to include those who are transitioning from school to work.





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